Standing Orders for Administering Measles, Mumps, & Rubella (M-M-R®II) Vaccine to Children and Adolescents

Purpose: To reduce morbidity and mortality from measles, mumps, and rubella by vaccinating all children and teens who meet the criteria established by the Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices (ACIP), the Food and Drug Administration (FDA) product labeling, and the Department of Defense (DoD).

Policy: Under these standing orders, eligible nurses and other healthcare professionals working within their scope of practice may vaccinate children and teen patients who meet the criteria below.

Procedure:
1. Identify patients 12 months of age and older in need of vaccination against measles, mumps, and rubella.

2. Screen all patients for contraindications and precautions to measles, mumps, and rubella (MMR) vaccine:

   Contraindications:
   - a history of a serious reaction (e.g., anaphylaxis) after a previous dose of MMR vaccine or to an MMR vaccine component (including gelatin and neomycin). For information on vaccine components, refer to the manufacturers’ package insert or go to http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf
   - pregnant now or may become pregnant within 1 month
   - known severe immunodeficiency (e.g., hematologic and solid tumors; congenital immunodeficiency; prolonged (≥14 days) high-dose steroid therapy; severely immunocompromised from HIV infection)

   Precautions:
   - recent receipt (within the previous 11 months) of antibody-containing blood product (specific interval depends on product)
   - history of thrombocytopenia or thrombocytopenic purpura
   - moderate or severe acute illness with or without fever
   - For questions or concerns, consider consulting the DHA Immunization Healthcare Branch at 877-438-8222, Option 1.

3. Provide all patients (or their parent/legal representative) with a copy of the most current federal Vaccine Information Statement (VIS). You must document, in the patient’s medical record, the publication date of the VIS and the date it was given to the patient (parent/legal representative). Provide non-English speaking patients with a copy of the VIS in their native language, if available and preferred; these can be found at www.immunize.org/vis.

4. Provide routine vaccination with MMR vaccine at age 12–15 months and at 4–6 years. Administer 0.5 mL of MMR vaccine subcutaneously (23–25 gauge, 5/8” needle) in the posterior-lateral fat of the upper arm.

5. For children and adolescents who have not received MMR vaccine at the ages specified above in Version January 2018
#4, give one dose at the earliest opportunity and then schedule a second dose, if needed, by observing a minimum interval of 4 weeks between doses.

6. Documentation
   - Document all immunizations administered in the electronic health record. Include date, immunization given, dose, anatomical location of administration, lot number, manufacturer, Vaccine Information Sheet (VIS) date, and the identification of the person administering the vaccine. If vaccine was not given, record the reason for non-receipt.

7. Be prepared to manage a medical emergency related to the administration of vaccines by having a written emergency medical protocol available, as well as equipment and medications.

8. Adverse Events occurring after administration of any vaccine should be reported to the Vaccine Adverse Event Reporting System (VAERS). Reports can be submitted to VAERS online, by fax, or by mail. Additional information about VAERS is available by telephone (1-800-822-7967) or online at [https://vaers.hhs.gov](https://vaers.hhs.gov).

9. This policy and procedure shall remain in effect for all patients of the ___________________ until rescinded and/or upon a change in the Medical Director, whichever is earlier.

Medical Director’s Signature __________________ Date ____________________

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