# Standing Orders for Administering Rotavirus Vaccine (Pediatric)

**Purpose:** To reduce morbidity and mortality from disease caused by rotavirus by vaccinating all persons 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 health care professionals working within their scope of practice may vaccinate patients who meet the criteria below.

**Procedure:**

1. Identify persons 2 – 8 months of age in need of vaccination against rotavirus based on the following criteria:
    - Lacking documentation of at least 2 doses of rotavirus vaccine (RV) at the appropriate ages/intervals
    - Age 2 - 3 months (14 weeks/6 days) who have not **started** a series of rotavirus vaccine
    - Age 8 months/0 days or younger who have not **completed** a series of rotavirus vaccine

2. Screen all patients for contraindications and precautions to rotavirus vaccine:

    **Contraindications:**
    - A history of a serious reaction (e.g., anaphylaxis) after a previous dose of RV or to a vaccine component
    - History of intussusception
    - Severe combined immunodeficiency (SCID)
    - Uncorrected congenital gastrointestinal tract malformation (such as Meckel's diverticulum)
    - The tip caps of prefilled oral applicators of Rotarix® contain natural rubber latex and may cause allergic reactions in latex sensitive individuals. The plastic dosing tube and cap of RotaTeq® do not contain latex
    - For information on vaccine components, refer to the manufacturer's package insert or go to http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf

    **Precautions:**
    - Moderate or severe acute illness with or without fever (including diarrhea and vomiting)
    - Altered immunocompetence (e.g., HIV/AIDS, cancer or malignant neoplasms, immunosuppressive therapy, etc.)
    - Chronic gastrointestinal disease
    - For Rotarix® only, spina bifida or bladder exstrophy
    - For questions or concerns, consider consulting the DHA Immunization Healthcare Division at (877) 438-8222, Option 1 or DSN 761-4245

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.

4. Provide vaccine as follows:
    - The RV consists of a 2-dose (ROTARIX® 1mL at 2 and 4 months of age) or 3-dose (RotaTeq® 2mL at 2, 4, and 6 months of age) series
    - Note that ROTARIX® must be reconstituted before use
    - Administer the RV orally:
    - Gently squeeze the liquid into the patient's mouth toward the inner cheek until dosing tube is empty (a residual drop may remain in the tip of the tube)
    - If for any reason an incomplete dose is administered (e.g., infant spits or regurgitates the vaccine), a replacement dose is not recommended. The infant should continue to receive any remaining doses in the recommended series

5. Provide subsequent doses of RV to complete each patient's schedule. For patients who did not receive RV at the ages specified in #4, give one dose at the earliest opportunity and then schedule subsequent doses according to the following:
    - Give the first dose **no later than 14 weeks and 6 days of age**
    - Minimum interval between doses is 4 weeks
    - **Maximum age for the final dose is 8 months and 0 days**
    - If any dose in the series is RotaTeq or unknown, complete a 3-dose series

6. Document all immunizations administered in the patient's electronic health record and the appropriate immunization tracking system. 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 (800-822-7967) or online at 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 Date