

Standing Orders for Administering Hepatitis B Vaccine (Pediatric)

Purpose: To reduce morbidity and mortality from hepatitis B virus infection 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 birth - 19 years of age in need of vaccination against hepatitis B based on the following criteria:
 - Have not received at least 3 doses of hepatitis B vaccine (HepB) at the appropriate ages/intervals

2. Screen all patients for contraindications and precautions to HepB:

Contraindications:

- A history of a serious reaction (e.g., anaphylaxis) after a previous dose of HepB or to a vaccine component (to include yeast)
- 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
 - The tip caps of the prefilled syringes of Engerix-B® and Recombivax HB®, and the vials of Recombivax HB®, contain natural rubber latex and may cause allergic reactions in latex sensitive individuals. The vials of Engerix-B® do not contain latex
 - Syncope (fainting) can occur in association with administration of injectable vaccines. Procedures should be in place to avoid a falling injury (e.g. 15 minute observation after administration) and to restore cerebral perfusion following syncope
 - 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:

HepB (Engerix-B®, Recombivax HB®) consists of a 3-dose series at 0, 1-2 and 6-18 months of age. Administer 0.5mL intramuscularly in the preferred site (anterolateral thigh for infants and toddlers or in the deltoid for children and adolescents). The alternate site (anterolateral thigh muscle or deltoid muscle) may be used if the preferred site is inadequate. Choose needle gauge and length appropriate to administration route and the patient’s age and/or body mass according to the chart below

Needle Length and Injection Site of IM Injections for Children		
Use a 22 – 25 gauge needle. Choose needle gauge and length appropriate to administration route and the patient’s age and body mass.		
Age Group	Needle Length	Injection Site
Neonates (0-28 days)	5/8 [†] inch	Anterolateral thigh
Infants (1-12 months)	1 inch	Anterolateral thigh
Toddlers (1-2 years)	1-1.25 inch	Anterolateral thigh*
	5/8 [†] – 1 inch	Deltoid muscle of arm
Children (3-10 years)	5/8 [†] inch- 1 inch	Deltoid muscle of arm*
	1-1.25 inches	Anterolateral thigh
Children (11-18 years)	5/8 [†] – 1 inch	Deltoid muscle of arm*
	1-1.5 inches	Anterolateral thigh

Adapted from General Best Practice Guidelines for Immunization: Vaccine Administration
<https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/administration.html>

[†]If skin is stretched tightly and subcutaneous tissues are not bunched

*Preferred site

Note: persons birth – 19 years of age receive a 0.5mL dose; persons 20 years of age and older receive a 1mL dose. Please see the appropriate standing order for administration of HepB to adults for information

Heplisav-B®-2-dose series at 0 and 1 month may be administered to teens ages 18 years and older.

5. Provide subsequent doses of HepB to complete each patient’s 3-dose schedule by observing a minimum interval of 4 weeks between the 1st and 2nd doses; 8 weeks between the 2nd and 3rd doses; and at least 16 weeks between the 1st and 3rd doses. The last dose in the pediatric series should not be administered earlier than 24 weeks of age. Patients will receive a total of 4 doses of hepatitis B-containing vaccine when combination vaccines (e.g., Pediarix®) are given after the birth dose of HepB which is still consistent with best practices.

Note: revaccination may be recommended for certain populations, including:

- **Infants born to HBsAg-positive mothers**
- **Hemodialysis patients**
- **Other immunocompromised persons**

Patients must obtain a written order from a privileged provider for these situations

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's Signature

Date