# STANDING ORDERS FOR
# Administering Measles, Mumps, and Rubella Vaccine to Children and Teens

## 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.

## Policy

Where allowed by state law, standing orders enable eligible nurses, pharmacists, and other healthcare professionals to assess the need for vaccination and to vaccinate children and teens who meet any of the criteria below.

## Procedure

1 **Assess Children and Teens for Need of Measles, Mumps, and Rubella (MMR) Vaccination** based on the following criteria:

- Age 12 months or older with either a) no documentation of any prior MMR vaccine or b) documentation of only 1 dose of MMR vaccine given when younger than age 12 months
- Age 4 years or older with no documentation of two doses of MMR vaccine
- Age 6 months or older with pending international travel
- History of two previous doses of MMR and identified by public health as being at increased risk during a mumps outbreak

2 **Screen for Contraindications and Precautions**

***Contraindications***

- Do not give MMR vaccine to a child or teen who has experienced a severe allergic reaction (e.g., anaphylaxis) to a previous dose of MMR vaccine or to any of its components. For a list of vaccine components, refer to the manufacturer's package insert (www.immunize.org/fda) or go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
- Do not give MMR vaccine to a child or teen who is pregnant; pregnant teens should be vaccinated upon completion or termination of pregnancy.
- Do not give MMR vaccine to a child or teen having known severe immunodeficiency (e.g., from hema-tologic and solid tumors, receipt of chemotherapy, congenital immunodeficiency, long-term immunosuppressive therapy, or severely immunocompromised from HIV infection).
    - Note: Long-term immunosuppressive therapy is defined as at least 2 weeks of daily receipt of 20 mg or 2 mg/kg body weight of prednisone or its equivalent.
    - Note: Susceptible individuals living with HIV are at increased risk for serious illness if infected with measles. HIV+ children age 12 months or older who are not severely immunocompromised should receive MMR vaccine as recommended. For additional information regarding HIV laboratory parameters and use of live vaccines, see the General Best Practice Guidelines for Immunization, "Altered Immunocompetence," at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/immunocompetence.html and Table 4-1 (footnote J) at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html.

CONTINUED ON THE NEXT PAGE ▶

- Do not give MMR vaccine to a child or teen with a family history of congenital or hereditary immuno-deficiency in first-degree relatives (e.g., parents, siblings) unless the immune competence of the potential vaccine recipient has been clinically substantiated or verified by a laboratory.

***Precautions** (require evaluation before vaccination)*

- Moderate or severe acute illness with or without fever
- History of recent (within the past 11 months) receipt of antibody-containing blood product (specific interval depends on product)
- Need for tuberculin skin testing (TST) or interferon-gamma release assay (IGRA) testing. If active tuberculosis is suspected, MMR should be delayed. Measles vaccination might suppress tuberculin reactivity temporarily. The TST should be administered either any time before, simultaneously with, or at least 4–6 weeks after any measles-containing vaccine.

## 3 Provide Vaccine Information Statements

Provide all patients with a copy of the most current federal Vaccine Information Statement (VIS). Provide non-English speaking patients with a copy of the VIS in their native language, if one is available and desired; these can be found at www.immunize.org/vis. (For information about how to document that the VIS was given, see section 6 titled "Document Vaccination.")

## 4 Prepare to Administer Vaccine

MMR II (Merck) may be administered via either the intramuscular (IM) or subcutaneous (Subcut) route; Priorix (GSK) may only be administered by the Subcut route.

If vaccine is to be administered by the **intramuscular route**, choose the needle gauge, needle length, and injection site according to the following chart:

| AGE OF CHILD/TEEN | NEEDLE GAUGE | NEEDLE LENGTH | INJECTION SITE |
|---|---|---|---|
| Age 1 through 2 years | 22–25 | 1–1¼" | Anterolateral thigh muscle* |
| | | ⅝†–1" | Deltoid muscle of arm |
| Age 3 through 10 years | 22–25 | ⅝†–1" | Deltoid muscle of arm* |
| | | 1–1¼" | Anterolateral thigh muscle |
| Age 11 years and older | 22–25 | ⅝†–1" | Deltoid muscle of arm* |
| | | 1–1½" | Anterolateral thigh muscle |

* Preferred site.

† A ⅝" needle may be used for children for IM injection in the deltoid muscle only if the skin is stretched tight, the subcutaneous tissue is not bunched, and the injection is made at a 90-degree angle.

If vaccine is to be administered by the **subcutaneous route**, choose the needle gauge, needle length, and injection site according to the following chart:

| NEEDLE GAUGE | NEEDLE LENGTH | INJECTION SITE |
|---|---|---|
| 23–25 | ⅝" | Fatty tissue over triceps or fatty tissue over anterolateral thigh muscle |

Reconstitute the vaccine with the manufacturer-supplied diluent just prior to administration.

CONTINUED ON THE NEXT PAGE ▶

**5 Administer Measles, Mumps, and Rubella Vaccine (MMR),** 0.5 mL according to the following criteria and schedule:

| HISTORY OF PREVIOUS MMR VACCINATION | AGE GROUP | SCHEDULE FOR ADMINISTRATION OF MMR VACCINE |
|---|---|---|
| 0 documented doses, or none known | 12 months to 4 years | Give dose #1. |
| 0 documented doses, or none known | 4 years and older | Give dose #1. Give dose #2 at least 4 weeks later. |
| 1 previous dose given before age 12 months | 12 months and older | Give dose #1. Give dose #2 at least 4 weeks later. |
| 1 previous dose of MMR given at age 12 months or older | 4 years and older | Give dose #2 at least 4 weeks after dose #1. |
| 2 previous doses of MMR and identified by public health to be at increased risk during a mumps outbreak | Any age | Give dose #3 at least 4 weeks after dose #2 |

### 6 Document Vaccination

Document each patient's vaccine administration information and follow up in the following places:

***Medical record:*** Document the date the vaccine was administered, the manufacturer and lot number, the vaccination site and route, and the name and title of the person administering the vaccine. You must also document, in the patient's medical record or office log, the publication date of the VIS and the date it was given to the patient. Note that medical records/charts should be documented and retained in accordance with applicable state laws and regulations. If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal); discuss the need for vaccine with the patient (or, in the case of a minor, their parent or legal representative) at the next visit.

***Personal immunization record card:*** Record the date of vaccination and the name/location of the administering clinic.

***Immunization Information System (IIS) or "registry":*** Report the vaccination to the appropriate state/local IIS, if available.

### 7 Be Prepared to Manage Medical Emergencies

Be prepared for management of a medical emergency related to the administration of vaccine by having a written emergency medical protocol available, as well as equipment and medications. For Immunize.org's "Medical Management of Vaccine Reactions in Children and Teens in a Community Setting," go to www.immunize.org/catg.d/p3082a.pdf. For "Medical Management of Vaccine Reactions in Adults in a Community Setting," go to www.immunize.org/catg.d/p3082.pdf. To prevent syncope, vaccinate patients while they are seated or lying down and consider observing them for 15 minutes after receipt of the vaccine.

### 8 Report All Adverse Events to VAERS

Report all adverse events following the administration of MMR vaccine to the federal Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov. To submit a VAERS report online (preferred) or to download a writable PDF form, go to https://vaers.hhs.gov/reportevent.html. Further assistance is available at (800) 822-7967.

## Standing Orders Authorization

This policy and procedure shall remain in effect for all patients of the _____ (NAME OF PRACTICE OR CLINIC)

effective _____ (DATE) until rescinded or until _____ (DATE) .

Medical Director _____ (PRINT NAME) / _____ (SIGNATURE) _____ (DATE)