
Standing Orders for Administering Varicella Vaccine to Children & Teens

Purpose: To reduce morbidity and mortality from varicella (chickenpox) 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: Under these standing orders, eligible nurses and pharmacists, where allowed by state law, may vaccinate children and teens who meet any of the criteria below.

Procedure

1. Identify children and teens ages 12 months and older in need of vaccination against varicella.
2. Screen all patients for contraindications and precautions to varicella vaccine:
 - a. **Contraindications:**
 - a history of a serious reaction (e.g., anaphylaxis) after a previous dose of varicella vaccine or to a varicella vaccine component. For a list of vaccine components, go to www.cdc.gov/nip/publications/pink/appendices/b/excipient-table-2.pdf.
 - pregnant now or may become pregnant within 1 month
 - substantial immunosuppression (e.g., HIV infection, prolonged [14 days or longer] high-dose steroid therapy, cancer chemotherapy)
 - b. **Precautions:**
 - recent receipt (within the previous 11 months) of antibody-containing blood product (specific interval depends on product)
 - moderate or severe acute illness with or without fever
3. Provide all patients (parent/legal representative) with a copy of the most current federal Vaccine Information Statement (VIS). You must 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 (parent/legal representative). Provide non-English speaking patients with a copy of the VIS in their native language, if available; these can be found at www.immunize.org/vis.
4. Provide routine vaccination with varicella vaccine at ages 12–15 months and at 4–6 years. Administer 0.5 mL varicella vaccine subcutaneously (23–25g, 5/8" needle) in the posterolateral fat of the upper arm for children and teens.
5. For children and teens who have not received two doses of varicella vaccine (generally given at the ages specified in #4), give a dose at the earliest opportunity and then schedule a second dose, if needed. Observe minimum intervals of 12 weeks between doses for children ages 12 years or younger and 4 weeks between doses for teens 13 years and older.
6. Document each patient’s vaccine administration information and follow up in the following places:
 - a. **Medical chart:** Record 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. If vaccine was not given, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal).
 - b. **Personal immunization record card:** Record the date of vaccination and the name/location of the administering clinic.
7. 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.
8. Report all adverse reactions to varicella vaccine to the federal Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov or by calling (800) 822-7967. VAERS report forms are available at www.vaers.hhs.gov.

This policy and procedure shall remain in effect for all patients of the _____ until rescinded or until _____ (date).
(name of practice or clinic)

Medical Director’s signature: _____ Effective date: _____