

# 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 and other healthcare professionals (e.g., pharmacists) 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 no documentation of MMR vaccine
- Age 4 years or older with no documentation of two doses of MMR vaccine
- Age 6 months or older with pending international travel
- Age 12 months or older with documentation of only 1 dose of MMR vaccine given when younger than age 12 months
- 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/packageinserts](http://www.immunize.org/packageinserts)) or go to [www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf](http://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 or may become pregnant within 1 month (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 hematologic and solid tumors, receipt of chemotherapy, congenital immunodeficiency, long-term immunosuppressive therapy).
- Do not give MMR vaccine to a child or teen receiving prolonged (14 days or longer) high-dose steroid therapy, or severely immunocompromised from HIV infection. (*HIV infection is not a contraindication to MMR for those children and teens who are not severely immunocompromised [i.e., CD4+ T-lymphocyte counts greater than or equal to 200 cells per microliter for 6 months or more].*)
- Do not give MMR vaccine to a child or teen with a family history of congenital or hereditary immunodeficiency 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.

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**Precautions**

- 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)
- History of thrombocytopenia or thrombocytopenic purpura
- 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 the measles-containing vaccine (e.g., MMR, MMRV).

**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](http://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**

Choose the needle gauge, needle length, and injection site according to the following chart:

NEEDLE GAUGE	NEEDLE LENGTH	INJECTION SITE
23–25	5/8"	Fatty tissue over triceps or fatty tissue over anterolateral thigh muscle

**5 Administer Measles, Mumps, and Rubella Vaccine (MMR), 0.5 mL, via the subcutaneous (Subcut) route, 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). Offer this vaccine at the next visit.

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**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 IAC’s “Medical Management of Vaccine Reactions in Children and Teens,” go to [www.immunize.org/catg.d/p3082a.pdf](http://www.immunize.org/catg.d/p3082a.pdf). For “Medical Management of Vaccine Reactions in Adult Patients,” go to [www.immunize.org/catg.d/p3082.pdf](http://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). 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 _____			
<small>NAME OF PRACTICE OR CLINIC</small>			
effective _____	_____	until rescinded or until _____	_____
<small>DATE</small>		<small>DATE</small>	
Medical Director _____	_____	/ _____	_____
<small>PRINT NAME</small>		<small>SIGNATURE</small>	<small>DATE</small>