Standing Orders for Administering Human Papillomavirus Vaccine to Adults

Purpose: To reduce morbidity and mortality from human papillomavirus (HPV) infection by vaccinating all adults 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 other healthcare professionals (e.g., pharmacists), where allowed by state law, may vaccinate adults who meet the criteria below.

Procedure
1. Identify adults in need of vaccination against human papillomavirus (HPV) based on the following criteria:
   a. Female, age 26 years or younger
   b. Male, age 21 years or younger
   c. Male, age 22 through 26 years meeting any of the following conditions:
      i. Immunocompromised as a result of infection (including HIV), disease, or medications
      ii. Has sex with other males
      iii. Wants to be vaccinated and lacks any of the above criteria

2. Screen all patients for contraindications and precautions to HPV vaccine:
   a. Contraindication: a history of a severe allergic reaction (e.g., anaphylaxis) after a previous dose of HPV vaccine or to a HPV vaccine component (e.g., yeast for quadrivalent HPV vaccine [HPV 4: Gardasil, Merck] or latex for bivalent HPV vaccine [HPV2: Cervarix, GSK]). For information on vaccine components, refer to the manufacturers’ package insert (www.immunize.org/packageinserts) or go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
   b. Precautions:
      • Moderate or severe acute illness with or without fever
      • Pregnancy; delay vaccination until after completion of the pregnancy

3. Provide all patients 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. Provide non-English speaking patients with a copy of the VIS in their native language, if available and preferred; these can be found at www.immunize.org/vis.

4. Provide 1) either HPV2 or HPV4 to women or 2) HPV4 to men. Provide either vaccine in a 3-dose schedule at 0, 2, and 6 calendar months. Administer 0.5 mL HPV vaccine intramuscularly (22–25g, 1–1½” needle) in the deltoid muscle; the anterolateral thigh muscle may be used if deltoid is inadequate. (Note: a ½” needle may be used for adults weighing less than 130 lbs [60 kg] for injection in the deltoid muscle only if the subcutaneous tissue is not bunched and the injection is made at a 90˚ angle.)

5. For adults who have not received HPV vaccine at the intervals specified in #4, administer subsequent doses of HPV vaccine to complete each patient’s 3-dose schedule by observing a minimum interval of 4 weeks between the first and second doses, 12 weeks between the second and third dose, and at least 24 weeks between the first and third doses. Men age 27 years and older who meet the criteria of 1.c.i. or 1.c.ii. above and women age 27 years and older who have received at least 1 dose before their 27th birthday should complete the 3-dose series as soon as feasible. Men age 22 years and older who have received at least 1 dose before their 22nd birthday should also complete the 3-dose series as soon as feasible.

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 administered, 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. To prevent syncope, vaccinate patients while seated or lying down and consider observing them for 15 minutes after receipt of the vaccine.

8. Report all adverse reactions to HPV 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).

Medical Director’s signature: __________________________ Effective date: __________________________

For standing orders for other vaccines, go to www.immunize.org/standing-orders

Technical content reviewed by the Centers for Disease Control and Prevention