# Standing Orders for Administering Hepatitis B Vaccine (Pediatric)

**Purpose:** To reduce morbidity and mortality from hepatitis B virus by vaccinating all individuals 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 this standing order, eligible healthcare professionals working within their scope of practice may vaccinate patients who meet the criteria below.

**Procedure:**

1. Identify persons birth – 17 years of age in need of vaccination against hepatitis B virus (HBV) based on the following criteria:
    - No documented receipt of a complete hepatitis B vaccine (HepB) series at the appropriate ages and intervals

2. Using DD Form 3110, screen all patients for contraindications and precautions to HepB:

    **Contraindications:**
    - History of a serious reaction (e.g., anaphylaxis) after a previous dose of HepB or to a vaccine component (including neomycin and yeast)
    - For information on vaccine components, refer to the manufacturer's package insert or The CDC Pink Book, Appendix B.

    **Precautions:**
    - Moderate or severe acute illness with or without fever
    - Recombivax HB: vial stopper, syringe plunger stopper, and tip cap contain dry natural latex rubber .
    - Syncope (fainting) can occur in association with administration of injectable vaccines. Have procedures in place to avoid a falling injury (e.g., 15-minute observation after administration) and to restore cerebral perfusion.
    - For questions or concerns, consider consulting the DHA Immunization Healthcare Support Center at (877) 438-8222, Option 1 or DSN 312-761-4245.

3. Prior to vaccine administration, provide all patients (or their parent/legal representative) with a copy of the current federal Vaccine Information Statement (VIS). Provide non-English speaking patients with a copy of the VIS in their native language, if available and preferred.

4. Provide HepB as follows:
    - Prior to administration, consult the manufacturer's package insert for storage, handling, and preparation instructions.
    - Administer a single dose intramuscularly (IM) according to Tables 1 & 2.

| TABLE 1. IM Needle Length and Injection Site Guide | | |
|---|---|---|
| Use a 22 – 25-gauge needle. Choose needle gauge and length appropriate to the patient's age | | |
| **Patient age** | **Needle Length** | **Injection Site** |
| Neonates (0 – 28 days) | 5/8 inch (16 mm)* | Anterolateral thigh |
| Infants, 1-12 months | 1 inch (25 mm) | Anterolateral thigh |
| Toddlers, 1-2 years | 1-1.25 inch (25-32 mm) | Anterolateral thigh† |
| | 5/8*-1 inch (16-25 mm) | Deltoid muscle of arm |
| Children, 3-10 years | 5/8*-1 inch (16-25 mm) | Deltoid muscle of arm† |
| | 1-1.25 inches (25-32 mm) | Anterolateral thigh |
| Children & Adolescents, 11-18 years | 5/8*-1 inch (16-25 mm) | Deltoid muscle of arm† |
| | 1-1.5 inches (25-38 mm) | Anterolateral thigh |

Adapted from General Best Practice Guidelines for Immunization: Vaccine Administration. https://www.cdc.gov/vaccines/hcp/imz-best-practices/vaccine-administration.html
*If skin is stretched tightly and subcutaneous tissues are not bunched.
† Preferred site.

| TABLE 2. Schedule for hepatitis B vaccine primary series by vaccine type, 0-17 years of age | | | | |
|---|---|---|---|---|
| | **Monovalent vaccine*** | | **Combination vaccine** | |
| | Engerix | Recombivax | Pediarix† | Vaxelis‡ |
| **Dose volume** | 0.5 mL | 0.5 mL | 0.5 mL | 0.5 mL |
| **Number of doses** | 3 | 3# | 3¶ | 3¶ |
| **Recommended intervals§** | 0, 1, 6 months | 0, 1, 6 months# | 0, 2, 4 months | 0, 2, 4 months |
| **Minimum intervals** | Dose 1 to dose 2: 4 weeks<br>Dose 2 to dose 3: 8 weeks<br>Dose 1 to dose 3: 16 weeks# | | See current ACIP guidelines | |

* Use monovalent vaccine for doses administered before age 6 weeks.
† Pediarix is approved for use in persons aged 6 weeks through 6 years (prior to the 7th birthday).
‡ Vaxelis is approved for use in persons aged 6 weeks through 4 years (prior to the 5th birthday).
§ Time in months from first dose.
¶ Administration of 4 doses of hepatitis B-containing vaccine is permitted when combination vaccines are given after the monovalent HepB birth dose. Substitute "dose 4" for "dose 3" intervals in the CDC Catch-up Schedule
#Adolescents age 11–15 years may use an alternative 2-dose schedule (with at least 16 weeks between doses) using adult formulation Recombivax HB (10mcg/mL) only.

- Certain situations are not covered under this standing order: these patients must obtain a written order from a privileged provider. This includes:
  - Revaccination and booster doses (e.g., post-exposure prophylaxis, travelers to high-risk areas, immunocompromised patients, infants born to HBsAg-positive or HBsAg-unknown mothers)
  - Primary series, booster doses, and revaccination for patients on hemodialysis

5. 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) or VIS-equivalent date, and the identification of the person administering the vaccine. If vaccine was not given, record the reason for non-receipt.

6. 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.

7. Adverse events occurring after administration of any vaccine should be reported to the Vaccine Adverse Event Reporting System (VAERS) online at https://vaers.hhs.gov. Additional VAERS information is available by telephone at (800) 822-7967.

8. This standing order must be signed by a privileged physician with medical oversight over the clinic or activity administering immunizations. It is valid for one year from the date of signature and remains in effect for all patients of the _____ until rescinded, expired, or upon a change in the privileged physician, whichever is earlier.

_____ _____

Privileged Physician's Signature Date