

*Mercyhealth System*  
**Medical Guidelines**

## 2.53 VACCINE ADMINISTRATION

**Note:**

- This procedure is only to be used by Paramedics, Intermediate EMTs(I99), AEMTs, PHRNs, PAs, and APRNs who are trained and credentialed to perform vaccinations/ immunizations by the EMS Medical Director during a declared state of emergency.
- A non-patient specific order authorizes credentialed Paramedics, Intermediate EMTs(I99), PHRNs, PAs, and APRNs to administer specified immunizations / vaccinations for a specified period of time to a group of persons (e.g. pandemic vaccination clinic, etc.) under the guidance of on-site administration of Point of Distribution (POD) personnel
- Immunizations listed in the Centers for Disease Control and Prevention (CDC) guidelines or Food and Drug Administration (FDA) Emergency Use Authorization fall (EUA) under this protocol.
- This protocol is specific to immunization/ vaccination of adults and children 6 years of age and above following all recommendations and guidelines identified by vaccination inclusion and exclusion criteria.
- Prior to vaccine administration obtain consent for the immunization from the potential recipient.
  - In cases of minors (children older than 6 years of age) and /or persons incapable of personally consenting to immunization, consent must be gained by informing the legally responsible person of the potential side effects and adverse reactions in writing and obtaining a written consent prior to administering the immunization.

<b>Priorities</b>	<b>Assessment Findings</b>
Chief Complaint	Presentation to vaccination site
Associated Symptoms/ Pertinent Negatives	May include obtaining information regarding status of current illness per recommendations
SAMPLE	Contraindications to vaccination, screening questions
Detailed Focused Exam	<b>Skin:</b> No signs of infection overlying intramuscular administration site?
Data	Screening Form(s) Consent Form Vaccination Record Vaccine Storage Log Vaccine Information Sheet, Manufacture Information Package Insert Vaccine Lot Number, Manufacturer and Expiration Patient Demographics
Goals of Therapy	Mass immunization during declared emergency
Monitoring	Vaccine Adverse Event Reporting System Post Vaccination Monitoring

**Identified Credentialed Personnel (Paramedics, AEMT, RNs, PAs)**

- Screen potential immunization recipient for indication and contraindications
- Inform each potential immunization recipient of the potential side effects and adverse reactions, orally and in writing, prior to immunization and the appropriate course of action in the event of an untoward or adverse event.
- Obtain Consent
- Store, Prepare and Administer in accordance with manufacture guidance
- For IM Injection ensure patient is seated
  - Administer IM injection at 90<sup>0</sup> angle with appropriate needle as below. The needle length for IM injections depends upon the age, gender, and/or weight of the vaccine recipient. (See Table attachment below). Administer intramuscularly (IM), according to the recommended age-specific dose and schedule.
- Observe patient for an allergic reaction for 20 minutes after administering vaccine. If an anaphylactic/allergic reaction occurs, refer to *Allergy and Anaphylaxis Guidelines* and report to POD administrator
- Report clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS) at 1-800-822-7967 or <http://www.vaers.hhs.gov/>.
- Provide immunization recipient/record
- Document vaccine administration as directed
- All vaccinations must be documented in the Wisconsin Immunization Registry(WIR)

**FOOTNOTES:**

Pediatric	Needle Gauge	Needle Length	Injection Site
Age 6 through 10 years	22-25	5/8"-1"	Deltoid muscle of arm
		1-1 1/4"	Anterolateral thigh muscle
Age 11 and older	22-25	5/8"-1"	Deltoid muscle of arm
		1-1 1/2"	Anterolateral thigh muscle

Adult

GENDER AND WEIGHT OF PATIENT	NEEDLE GAUGE	NEEDLE LENGTH	INJECTION SITE
Female or male less than 130 lbs	22-25	5/8*-1"	Deltoid muscle of arm
Female or male 130-152 lbs	22-25	1"	Deltoid muscle of arm
Female 153-200 lbs	22-25	1-1 1/2"	Deltoid muscle of arm
Male 153-260 lbs	22-25	1-1 1/2"	Deltoid muscle of arm
Female 200+ lbs	22-25	1 1/2"	Deltoid muscle of arm
Male 260+ lbs	22-25	1 1/2"	Deltoid muscle of arm

\* A 5/8" needle may be used in patients weighing less than 130 lbs (<60 kg) 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 to the skin.