NEW YORK STATE OF OPPORTUNITY. Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

Non-Patient Specific Order for the Administration of Influenza Vaccine (2017-2018 Season)

Purpose: To reduce morbidity and mortality from influenza virus infection by vaccinating children between two years and eighteen years of age who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices.

Policy: Under this non-patient specific order, a licensed pharmacist with a certificate of administration issued by the New York State (NYS) Education Department may vaccinate patients between two years and eighteen years of age against seasonal influenza. Pharmacists opting to immunize those in the pediatric population must have completed appropriate immunization training pertinent to this population (e.g. pediatric CPR). New York State Education Law §§ 6527, 6801, 6802, 6909 and associated regulations allow licensed pharmacists with a certificate of administration to vaccinate patients eighteen years of age and older against seasonal influenza. Per Governor Andrew M. Cuomo's Executive Order (EO) No. 176, issued January 25, 2018, pharmacists may also administer influenza vaccinations to patients between two years and eighteen years of age. A copy of the EO is available at:

https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/EO_176.pdf

Executive Order No. 176 expires on February 23, 2018; if emergency conditions continue, the EO may be extended for an additional 30 day period. Unless it is extended, when EO No. 176 expires, pharmacists will no longer have the authority to vaccinate children between two years and eighteen years of age. Pharmacists must follow all pertinent NYS laws and regulations. Regulations specific to pharmacist administration of vaccines can be found at http://www.op.nysed.gov/prof/pharm/part63.htm

Procedure:

1. *Identify children between two years and eighteen years of age who have not received their influenza vaccination(s) for the current (2017-2018) influenza season and children two years through eight years who received a first dose of influenza vaccine four or more weeks prior and did not receive at least two doses prior to July 1, 2017.*

2. *Provide an area for immunization that provides for a patient's privacy.*

3. *Screen all child and adolescent patients for contraindications and precautions to influenza vaccine* (reminder: only children and adolescents between two years and eighteen years of age can be vaccinated pursuant to EO No. 176).
   a) Do not vaccinate patients with a history of serious systemic or anaphylactic reaction to a prior dose of the vaccine or any of its components. For a list of vaccine components, refer to the manufacturer's package insert (www.immunize.org/packageinserts) or go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
      - **Note regarding patients with eggs allergy:** People with an egg allergy of any severity can receive any licensed and recommended influenza vaccine (e.g., any inactivated influenza vaccine [IIV] or recombinant influenza vaccine [RIV]) that is otherwise appropriate for the patient's age and health status. For people with a history of severe allergic reaction to egg

involving any symptom other than hives (e.g., angioedema, respiratory distress, light-headedness, or recurrent emesis), or who required epinephrine or another emergency medical intervention, the selected vaccine should be administered in a medical setting (e.g., health department or physician office). Vaccine administration should be supervised by a healthcare provider who is able to recognize and manage severe allergic conditions.

b) Do not vaccinate patients with moderate or severe acute illness with or without fever (until symptoms have abated).

c) Do not vaccinate persons with a history of Guillain-Barré syndrome.

4. *Provide all patients, or other persons legally responsible when the patient is incapable of consenting to immunization, with a copy of the most current federal Vaccine Information Statement (VIS) before administering the immunization:* You must document, in the patient's medication profile, 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. These documents can be found at www.immunize.org/vis. In instances where a patient medication profile is not required, this information must be recorded on a separate form retained by the pharmacist who has administered the immunization

5. *Inform all patients, or other persons legally responsible when the patient is incapable of consenting to the immunization, of the total cost of the immunization or immunizations, subtracting any health insurance subsidization, if applicable.* In the case where the immunization is not covered, the pharmacist shall inform the patient, or other person legally responsible for the patient when the patient is incapable of consenting to the immunization, that the immunization may be covered when administered by a primary care physician or health care practitioner.

6. *Obtain consent for immunization:* You must inform each patient of potential side effects and adverse reactions, orally and in writing, prior to immunization. You shall not administer the immunization unless the patient is adequately informed and consents to the immunization. For patients incapable of consenting to the administration of an immunization, before an immunization may be administered, either a person legally responsible for the patient must give prior written consent to the immunization after having been informed in writing of potential side effects and adverse reactions, or a person legally responsible for the patient must be present during the immunization and consent to the immunization after having been informed of potential side effects and adverse reactions.

7. *Advise Patient About Adverse Events:* You must provide each patient, or other persons legally responsible for the patient, if applicable, with written instructions to call the patient's primary care physician or seek care at the local emergency department if the patient has an adverse reaction to the vaccine.

8. *Administer Vaccine*. For complete vaccination information, please visit: https://www.cdc.gov/mmwr/volumes/66/rr/rr6602a1.htm

a) Prepare to administer:
For vaccine that is to be administered intramuscularly, choose the needle gauge, needle length, and injection site according to the following table:

Age of Child	Needle Gauge	Needle Length	Injection Site
Age 2 years	22–25	1–1¼"	Anterolateral thigh muscle
Age 3 through 10 years	22–25	5⁄8*–1"	Deltoid muscle of arm
		1–1¼"	Anterolateral thigh muscle
Age 11 years and older	22–25	5⁄8*–1"	Deltoid muscle of arm
		1–1½"	Anterolateral thigh muscle
*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.			

b) Administer influenza vaccine according to the age of the patient and desired route of vaccination described below:

Type of Vaccine	Age Group	Dose*	Route	Instructions
Inactivated influenza vaccine (IIV)	24-35 months	Fluzone: 0.25 mL FluLaval: 0.5 mL Fluarix: 0.5 mL	Intramuscular (IM)	Administer vaccine in anterolateral thigh muscle
Inactivated influenza vaccine (IIV)	3 years and older	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoid muscle or, alternatively, in anterolateral thigh muscle.
Cell culture-based IIV (ccIIV)	4 years and older	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoid muscle.
***Note:** For children age 2 through 8 years who are receiving influenza vaccine for the first time or who did not get at least 2 doses before July 1, 2017, administer two doses separated by at least 4 weeks.				

9. *Recommendations for Future Vaccines:* Notify the patient that the influenza vaccine must be taken annually. **For children age 2 years through 8 years,** notify the parent or guardian that the child should receive a second dose of vaccine four weeks or more after the first dose if he or she (a) is receiving influenza vaccine for the first time or (b) did not get at least two doses of seasonal influenza vaccine before July 1, 2017.

10. *Document each patient's vaccine administration information and follow up in the following places:*

    a) **Patient medication profile**: Record the patient's name, date, address of administration, administering pharmacist, immunization agent, the publication date of the VIS and date it was given to the patient, and manufacturer and lot number. If vaccine was not given, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal). In instances where a patient medication profile is not required, this information must be recorded on a separate form retained by the pharmacist who has administered the immunization, in a retrievable format available to the State Education Department and the patient. The information, whether in a patient medication profile or separately kept, must be recorded and maintained in accordance with 8 NYCRR section 29.2(a)(3).

    b) **Immunization Record Card**: You must provide a signed immunization record card to the patient or a person legally responsible when the patient is incapable of consenting to immunization. Record the patient's name, date of vaccination, address of administration, name of the administering pharmacist, manufacturer and lot number of the vaccine, and recommendations for future immunizations, if applicable.

    c) **Patient 's primary care physician**: With the consent of the patient or a person legally responsible when the patient is incapable of consenting, communicate this information to the patient's primary health care practitioner, if one exists, within one month of the administration of such immunization. Such communication should be transmitted in electronic or facsimile format.

    d) **New York State Department of Health (NYSDOH):** All doses administered by pharmacists in New York State (NYS) must be reported to the NYSDOH in a manner required by the Commissioner of Health. Immunization information must be submitted to the New York State Immunization Information System (NYSIIS), for doses administered in NYS outside of New York City (NYC) or the New York City Immunization Registry (CIR), for doses administered in NYC, for all patients less than 19 years old. More information about NYSIIS is available at https://www.health.ny.gov/prevention/immunization/information_system/; and information about the CIR at https://immunize.nyc/provider-client/servlet/PC.

11. *Advise patient on importance of having a primary care provider*. More information can be found on the NYSDOH website: https://www.health.ny.gov/prevention/immunization/having_a_medical_home.htm.

12. *Be prepared for management of a medical emergency related to the administration of vaccine*: Have a written emergency medical standing order and protocol available, as well as equipment and medications, including emergency anaphylaxis treatment agents, related syringes and needles available at the location at which immunizations will be administered. Vaccine Adverse Event Reporting System (VAERS): Report all adverse reactions to influenza vaccine to VAERS. Contact VAERS through www.vaers.hhs.gov or (800) 822-7967.

In accordance with Governor Cuomo's EO No. 176 issued on January 25, 2018 and New York State Education Law §§ 6527, 6801, 6802, 6909 and associated regulations, and subject to the Purpose, Policy, and Procedure set forth herein, I am prescribing this state-wide non-patient specific order to allow vaccination of patients two years through eighteen years old against seasonal influenza by all licensed pharmacists with a certificate of administration issued by the NYS Department of Education. Licensed pharmacists employed by or under contract with a pharmacy and possessing a certificate of administration issued by NYS Department of Education are authorized to administer influenza vaccines (inactivated) and anaphylaxis treatment agents only in connection with their employment or contract with said pharmacy. As set forth in the Policy section above, EO No. 176 expires on February 23, 2018; if emergency conditions continue, the Executive Order may be extended for an additional 30 day period.

This non-patient specific order will expire at the earlier of (i) the expiration of EO No. 176 or any extension of that EO; or (ii) my discontinuance of this non-patient specific order, which I may do at my discretion. In the event I discontinue this non-patient specific order prior to expiration of EO No. 176 or any extension of that EO, notice of discontinuance will be posted at http://www.health.ny.gov

Signature: Howard Zucker M.D. Date: January 27, 2018

Name of Physician: Howard A. Zucker, M.D., J.D.

Title: Commissioner of Health

Institution: New York State Department of Health

NYS License No.: 170243

Effective Date of Order: January 27, 2018