

STANDING ORDERS FOR Administering Tdap to Pregnant Women

Purpose

To reduce morbidity and mortality from tetanus, diphtheria, and pertussis by vaccinating all pregnant women 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 and vaccinate pregnant women who meet any of the criteria below.

Procedure

1 Assess pregnant women, including teens, for need of vaccination against tetanus, diphtheria, and pertussis based on the following criteria:

- Currently pregnant and no documentation of receiving a dose of tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap) during current pregnancy
- Lack of documentation of receiving at least 3 doses of tetanus- and diphtheria-containing toxoids (Tdap/Td)

2 Screen for contraindications and precautions

Contraindications

- Do not give Tdap vaccine to a pregnant woman or teen who has experienced a serious systemic or anaphylactic reaction to a prior dose of the vaccine or to any of its components. For information on 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.
- Do not give Tdap to a pregnant woman or teen who has experienced encephalopathy within 7 days following DTP/DTaP/Tdap not attributable to another identifiable cause.

Precautions

- Moderate or severe acute illness with or without fever
- History of Guillain-Barré syndrome within 6 weeks of a previous dose of tetanus toxoid-containing vaccine
- History of an Arthus-type hypersensitivity reaction after a previous dose of tetanus or diphtheria toxoid-containing vaccine; in such cases, defer vaccination until at least 10 years have elapsed since the last tetanus toxoid-containing vaccine
- Progressive or unstable neurologic disorder, uncontrolled seizures or progressive encephalopathy until the patient's treatment regimen has been established and the condition has stabilized

3 Provide Vaccine Information Statements

Provide all patients with a copy of the most current federal Vaccine Information Statement (VIS) available at www.immunize.org/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 one is available and desired; these can be found at www.immunize.org/vis.

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4 Prepare to Administer Vaccine

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

WEIGHT OF FEMALE PATIENT	NEEDLE GAUGE	NEEDLE LENGTH	INJECTION SITE
Less than 130 lbs	22–25	5/8"*-1"	Deltoid muscle of arm
130–152 lbs	22–25	1"	Deltoid muscle of arm
153–200 lbs	22–25	1–1½"	Deltoid muscle of arm
200+ lbs	22–25	1½"	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.

5 Administer Tdap Vaccine, 0.5 mL, IM, according to the table below:

HISTORY OF PREVIOUS DTP, DTaP, Td, or Tdap VACCINATION	DOSE AND SCHEDULE FOR ADMINISTRATION OF Tdap (DURING CURRENT PREGNANCY) AND SUBSEQUENT Td
0 documented doses, or none known	Give Tdap* as dose #1. Give dose #2 (Td) at least 4 weeks later, and dose #3 (Td) 6–12 months after dose #2.
1 previous dose (not Tdap)	Give Tdap* as dose #2 at least 4 weeks after dose #1. Give dose #3 (Td) 6–12 months after dose #2.
1 previous dose (as Tdap) given before current pregnancy	Give Tdap* as dose #2 and at least 4 weeks after dose #1. Give dose #3 (Td) 6–12 months after dose #2.
2 previous doses (none Tdap)	Give Tdap* as dose #3.
2 previous doses (including 1 Tdap given before current pregnancy)	Give Tdap* as dose #3.
3 or more previous doses (none Tdap)	Give Tdap.*
3 or more previous doses (including 1 dose of Tdap given before current pregnancy)	Give Tdap.*

*Tdap should be administered early in the third trimester of each pregnancy.

If any of these doses become due earlier than the third trimester, wait until the early part of the third trimester and administer Tdap as the needed dose. Then, administer any subsequent dose(s) needed following the pregnancy.

6 Document Vaccination

Document each patient’s vaccine administration information and any needed follow-up in the following places:

Medical record: Record the date the vaccine was administered, the manufacturer and lot number, the vaccination site and route, and the name and address and, if appropriate, the title of the person administering the vaccine. 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). Discuss the need for vaccine with the patient at the next visit.

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.

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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 Adults,” go to 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 Adverse Events to VAERS

Report all adverse events following the administration of Tdap 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

<p>This policy and procedure shall remain in effect for all patients of the _____ <small>NAME OF PRACTICE OR CLINIC</small></p> <p>until rescinded or until _____ . <small>DATE</small></p> <p>Medical Director’s signature _____ Signature date _____ Effective date _____</p>
