

---

## Standing Orders for Administering Human Papillomavirus Vaccine to Adults

---

**Purpose:** To reduce morbidity and mortality from human papillomavirus (HPV) infection by vaccinating all women 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 pharmacists, where allowed by state law, may vaccinate women who meet the criteria below.

### Procedure

1. Identify all women age 26 years and younger who have not completed a human papillomavirus (HPV) vaccination series.
2. Screen all patients for contraindications and precautions to HPV vaccine:
  - a. **Contraindication:** a history of a serious reaction after a previous dose of HPV vaccine, to yeast, or to a HPV vaccine component. For a list of vaccine components, go to [www.cdc.gov/nip/publications/pink/appendices/b/excipient-table-2.pdf](http://www.cdc.gov/nip/publications/pink/appendices/b/excipient-table-2.pdf).
  - b. **Precautions:**
    - a 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). Although not required by federal law, it is prudent to 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; these can be found at [www.immunize.org/vis](http://www.immunize.org/vis).
4. Provide a 3-dose schedule of HPV vaccine to women on a schedule of 0, 2 and 6 months. Administer 0.5 mL HPV vaccine intramuscularly (22–25g, 1–1½" needle) in the deltoid muscle.
5. For women who have not received HPV vaccine at the intervals specified in #4, provide 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 and 12 weeks between the second and third dose.
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 given, 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, consider observing patients for 15 minutes after they receive HPV vaccine.
8. Report all adverse reactions to HPV vaccine to the federal Vaccine Adverse Event Reporting System (VAERS) at [www.vaers.hhs.gov](http://www.vaers.hhs.gov) or by calling (800) 822-7967. VAERS report forms are available at [www.vaers.hhs.gov](http://www.vaers.hhs.gov).

This policy and procedure shall remain in effect for all patients of the \_\_\_\_\_ until rescinded or until \_\_\_\_\_ (date).  
(name of practice or clinic)

Medical Director’s signature: \_\_\_\_\_ Effective date: \_\_\_\_\_