All nurses who administer flu vaccinations at this event must sign.
Return to TotalWellness after this event with your paperwork.

TOTALWELLNESS

FOR REGISTERED NURSES AND DELEGATED PERSONNEL TO THE INFLUENZA AND EPINEPHRINE PROTOCOL STANDING PRESCRIPTION ORDER AND AGREEMENT TO ADMINISTER INJECTIONS

By signing below, you hereby agree and acknowledge as follows:

1. You have received a copy of the "Influenza and Epinephrine Protocol Standing Prescription Order and Agreement to Administer Injections" (the "Standing Order").
2. You understand that you are a Nurse or Delegated Personnel as defined in the Standing Order.
3. You have had sufficient time to review and do understand the terms and conditions of the Standing Order.
4. You agree to be bound by all obligations contained in the Standing Order to Nurses or Delegated Personnel (as defined in the Standing Order), as applicable.
5. In the event you are no longer able to comply with all applicable terms and obligations of the Standing Order, you will cease providing services under the Standing Order and immediately notify the Overseeing Registered Nurse identified below.

Primary Nurse: **Event ID #:**_____

Printed Name & Title	Signature	Date
_____	_____	_____

Secondary Nurses:

Printed Name & Title	Signature	Date
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____

INFLUENZA AND EPINEPHRINE PROTOCOL
STANDING PRESCRIPTION ORDER[1] AND AGREEMENT TO ADMINISTER INJECTIONS

The undersigned physician (the "Physician"), a duly licensed medical doctor[2], hereby authorizes the below named Nurse (defined below) to dispense and administer the vaccine and the vaccine protocol as set forth below, in accordance with the law of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, the District of Columbia, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Maryland, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin or Wyoming ("State"), in his or her respective State(s) of licensure.

The undersigned nurse ("Nurse")[3], a duly licensed Registered Nurse, or the undersigned Delegated Personnel[4] according to and in compliance with the applicable State law, may administer the following influenza vaccines to the designated eligible persons pursuant to the vaccine manufacturer's prescribing information contained with the vaccine, which may change from time to time. The Nurse shall review the prescribing information for each lot of vaccine prior to use. As of the date of this Protocol and as otherwise updated from time to time, the relevant prescribing information is set forth on the Schedule A attached hereto.

The Nurse's, or Delegated Personnel's (defined below), administration of a vaccine will comply with the current guidelines from the Advisory Committee on Immunization Practices of the U.S. Centers for Disease Control and Prevention ("CDC").

The records of patients should be available for periodic review by the Physician. When required by the law of the State where the vaccination is to be administered, the Nurse, or Delegated Personnel, should carry out this standing order only when a physician consultation is immediately available.

The Nurse shall delegate the administration of the injection only to another Registered Nurse or other licensed person eligible to administer the injection as set forth by the law of the State where the vaccination is to be administered ("Delegated Personnel")[5] that have agreed to be bound by all applicable obligations of this standing order. The Nurse, or other Delegated Personnel, shall provide to the patient prior to vaccination, or in the case of a minor patient, to the minor patient's parent or guardian, a current Vaccine Information Sheet ("VIS").

The Nurse and each Delegated Personnel must be currently certified in CPR by the American Red Cross, American Heart Association. The Nurse and each Delegated Personnel shall have successfully completed, and as necessary, re-completed, an approved educational program meeting the standards on injection administration and vaccination as required by the law of the State in which the vaccination is to be administered. The program should include reference material and hands-on training in techniques for administering injections, require testing with a passing score, comply with current CDC guidelines, and provide instruction and experiential training in the following competencies:

- Standards for Injections Practices;
- Basic Immunologic and Vaccine Protection;
- Vaccine-preventable diseases;
- Recommended Injection Schedules;
- Storage and Management of Injectables;
- Informed Consent;
- Physiology and Techniques for Injection Administration;
- Pre- and Post-injection Assessment and Counseling;
- Documentation and Record Management; and
- Management of Adverse Events, including identification, appropriate response documentation and reporting.

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[1] This Standing Order is written based upon CDC standards, incorporating specific State requirements for promoting vaccination against influenza.
[2] In California, "physician" includes surgeons in reference to those authorized to issue standing orders.
[3] If the undersigned is a Nurse, then the Nurse warrants that he/she is licensed under the law of the State in which the vaccination is to be administered and within the counties set forth herein and authorized to assess need and administer influenza vaccination based upon this standing order and in accordance with all applicable laws.
[4] If the undersigned is a Delegated Personnel, then the Delegated Personnel warrants that he/she has independently secured a person to lawfully perform the role of a Nurse, as defined herein, based upon this standing order and in accordance with all applicable laws. In the event the foregoing is or becomes untrue, then the Delegated Personnel is directed to immediately cease performing services under this standing order and contact the Physician.
[5] Each Designated Personnel shall be licensed under the law of the State in which the vaccination is to be administered and within the counties set forth herein and authorized to assess need and administer influenza vaccination based upon this standing order and in accordance with all applicable laws.

The Nurse or Delegated Personnel shall question or receive in writing from injection candidates information regarding previous adverse events following an injection, food or drug allergies (in particular eggs), current health status, pregnancy status, and underlying diseases, including history of Guillain-Barre Syndrome. The Nurse or Delegated Personnel shall not provide, without first receiving specific authority from the Physician, an injection to any candidate:

- That has a history of systemic hypersensitive reactions to egg or chicken proteins, neomycin or polymyxin;
- That has had life-threatening reactions to previous influenza vaccinations;
- That has a fever, cold or flu symptoms;
- That is allergic to thimerosal (unless being provided thimerosal-free dose vaccine); or
- That has had the occurrence of Guillain-Barre syndrome within six (6) weeks prior to receipt of the influenza vaccine.

An injection candidate that is pregnant may only receive a thimerosal-free vaccination.

The Nurse shall maintain perpetual records of all injections for a minimum of six (6) years. Records are to be stored at TotalWellness headquarters or other location designated by TotalWellness. Records shall include name, address, phone number, and signature of each patient receiving an injection. If a patient is a minor, the patient's parent or guardian must provide a signature and the vaccination will be dispensed and administered under the parent or guardian's consent. The minor child's parent or guardian must be present at the time of inoculation. The Nurse is also responsible for ensuring documentation of the patient's primary care physician, provision of a current VIS, vaccine injected, date of injection, dosage administered, injection site and route, manufacturer and lot number, and the name and title of the Nurse, or other Delegated Personnel, administering the injection.

The Nurse will monitor each patient for not less than 15 minutes immediately subsequent to the administration of the vaccine if it is the patient's first flu vaccination, if indicated based on patient's medical history, and/or based on the Nurse's clinical judgment. The Nurse or Delegated Personnel shall follow the management of vasovagal reaction (fainting) procedure in the case of non-life-threatening reactions:

1. Place patient in the recumbent position and elevate feet;
2. Check airway and monitor vital signs; and
3. Refer for further medical care if question of injury.

The Nurse or Delegated Personnel shall follow the management of anaphylaxis (allergic reaction) procedure in the case of life-threatening reactions:

1. Maintain airway, breathing and circulation;
2. Activate emergency medical services by calling 911;
3. Epinephrine use:
   a. Epinephrine 1:1000, 0.3mL–0.5 mL injected SC or IM for individuals > 66 pounds OR
   b. Epinephrine 1:1000, 0.01mL–0.3mL injected SC or IM for individuals ≤ 66 pounds;
   c. Dose may be repeated every five to ten minutes if symptoms are not noticeably improved; and
4. Advise patient to follow-up with further medical attention as biphasic anaphylaxis may occur.

The Nurse shall fax, mail or communicate by other suitable means a roster of patients who have received injections to the Physician within at least thirty (30) days of injection and make any other reports or notifications required under the law of the State in which the vaccine was administered. The Nurse can accomplish this by sending all completed consent forms to TotalWellness at 9320 H Court, Omaha, NE 68127 after each event.

The Nurse shall notify the Physician and the primary care provider of the patient within twenty-four (24) hours in the event of serious complications following the administration of an injection. A serious complication is one that requires further medical or therapeutic intervention to effectively protect the patient from further risk, morbidity or mortality.

The Nurse shall submit within twenty-four (24) hours a Vaccine Advisory Event Reporting System report and any additional report or information required under the law of the State in which the vaccine was administered following any adverse reaction to a vaccine. Delegated Personnel shall provide the Nurse with all information necessary for the Nurse to complete the filings, reports and other similar notices required herein.

This standing order shall remain in effect for one (1) year from the date of the Physician's signature below. Facsimile and other scanned or copied signatures shall be effective. This Standing Order may be photocopied and used for more than one State and with more than one Nurse within each State.

(Remainder of this page left blank. Signature page to follow.)

INFLUENZA AND EPINEPHRINE PROTOCOL
STANDING PRESCRIPTION ORDER AND AGREEMENT TO ADMINISTER INJECTIONS
SIGNATURE PAGE

Physician Signature	William Brendan Hayes, M.D. Physician Printed Name	08/13/2024 Date

Overseeing Registered Nurse, TotalWellness Director of Nursing:

Overseeing Nurse Signature	Melissa Medley, R.N. Overseeing Nurse Printed Name	08/13/2024 Date

402-964-0542 x1210
Overseeing Nurse Phone

SCHEDULE A
VACCINE PROTOCOL

As of the date of this Protocol and as otherwise updated from time to time, the relevant prescribing information for each vaccine authorized is as follows:

***Afluria® Trivalent (Multi-Dose & Prefilled Syringes)* 2024-2025 Formula**

To eligible persons without contraindications ages six (6) months and older, based upon standing orders approved by the Physician, injections in the deltoid muscle of 0.25 mL or 0.5 mL of injectable influenza vaccine using the prefilled syringe or a small syringe (0.5 mL or 1 mL) for the multi-dose vials. The number of needle punctures should not exceed 20 per multi-dose vial. The preferred injection site is the anterolateral aspect of the thigh in children between the ages of six (6) and eleven (11) months, as well as those between the ages of twelve (12) and thirty-five (35) months if the muscle mass of the deltoid muscle of the upper arm is inadequate. Those thirty-six (36) months and older should receive injections in the deltoid muscle.

Children between the ages of six (6) and thirty-five (35) months old should receive one (1) dose of 0.25 mL or two (2) doses of 0.25 mL at least one (1) month apart by needle and syringe.

Children thirty-six (36) months through eight (8) years old should receive one (1) dose of 0.5 mL or two (2) doses of 0.5 mL at least one (1) month apart by needle and syringe.

Those nine (9) years and older should be provided with one (1) dose of 0.5 mL by needle and syringe. For those eighteen (18) through sixty-four (64) years old, a PharmaJet® Stratis® Needle-Free Injection System may be used.

***Fluad® Trivalent* 2024-2025 Formula**

To eligible persons without contraindications ages sixty-five (65) and older, based upon standing orders approved by the Physician, injections in the deltoid muscle of 0.5 mL of injectable influenza vaccine using the single-dose prefilled syringes.

***Fluzone® High-Dose Trivalent* 2024-2025 Formula**

To eligible persons without contraindications ages sixty-five (65) and older, based upon standing orders approved by the Physician, injections in the deltoid muscle of 0.5 mL of injectable influenza vaccine using the single-dose prefilled syringes.

***Flulaval® Trivalent* 2024-2025 Formula**

To eligible persons without contraindications ages six (6) months and older, based upon standing orders approved by the Physician, injections in the deltoid muscle of 0.5 mL of injectable influenza vaccine using the single dose prefilled TIP-LOK syringes. The preferred injection site is in the anterolateral thigh for children between the ages of six (6) and eleven (11) months. Those twelve (12) months and older should receive injections in the deltoid muscle.

Children between the ages of six (6) months and eight (8) years who have not previously been vaccinated with an influenza vaccine should receive two (2) doses of 0.5 mL at least four (4) weeks apart using the single-dose prefilled syringes.

Children between the ages of six (6) months and eight (8) years who have previously been vaccinated with an influenza vaccine in a previous season should receive one (1) dose of 0.5 mL or two (2) doses of 0.5 mL at least four (4) weeks apart using the single-dose prefilled syringes.

Those nine (9) and older should be provided with one (1) dose of 0.5 mL using the single-dose prefilled syringes.

***Flucelvax® Trivalent* 2024-2025 Formula**

To eligible persons without contraindications ages six (6) months and older, based upon standing orders approved by the Physician, injections in the deltoid muscle of 0.5 mL of injectable influenza vaccine using the single-dose Luer Lock prefilled syringes or a small syringe (0.5 mL or 1 mL) for the multi-dose vials. No more than 10 doses (0.5 mL) should be withdrawn from the multi-dose vials. The preferred injection region is the deltoid muscle of the upper arm, however, younger children with insufficient deltoid mass should be vaccinated in the anterolateral aspect of the thigh.

Children between the ages of six (6) months and eight (8) years should receive one (1) dose of 0.5mL or receive two (2) doses of 0.5 mL at least four (4) weeks apart using the single-dose prefilled syringes or multi-dose vials.

Those nine (9) and older should be provided with one (1) dose of 0.5 mL using the single-dose prefilled syringes or multi-dose vials.

***Fluarix® Trivalent* 2024-2025 Formula**

To eligible persons without contraindications ages six (6) months and older, based upon standing orders approved by the Physician, injections in the deltoid muscle of 0.5 mL of injectable influenza vaccine using the single dose prefilled syringes. The preferred injection site is in the anterolateral thigh for children between the ages of six (6) and eleven (11) months and the deltoid muscle of the upper arm for persons aged twelve (12) months and older if muscle mass is adequate.

Children between the ages of six (6) months and eight (8) years who have not previously been vaccinated with an influenza vaccine should receive two (2) doses of 0.5 mL at least four (4) weeks apart using the single-dose prefilled syringes.

Children between the ages of six (6) months and eight (8) years who have previously been vaccinated with an influenza vaccine in a previous season should receive one (1) dose of 0.5 mL or two (2) doses of 0.5 mL at least four (4) weeks apart using the single-dose prefilled syringes.

Those nine (9) and older should be provided with one (1) dose of 0.5 mL using the single-dose prefilled syringes.