

Vaccination Toolkit for EMS Medical Directors

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Historical Perspective

In the past, vaccine administration has not been considered part of the routine scope of practice of EMS providers in the Commonwealth

EMS providers have generally been held to function within a scope of practice that enables them to provide immediate care in emergencies, not elective or preventive care



Historical Perspective

EMS providers could administer vaccine only in the circumstance of an emergency declared by the Governor and following specific authorization and direction provided by the Commissioner of Health



Historical Perspective

During the recent H1N1 epidemic concerns arose regarding the ability of existing mechanisms and resources to adequately meet the needs for delivery of influenza vaccine both to first responders, including fire/rescue personnel and law enforcement, and to the general public raising the possibility of utilizing EMS providers as vaccinators



Current Legal Basis

Recent changes in the Code of Virginia amended the previous language of laws pertaining to the administration of vaccines, including language specific to the administration of vaccine to minors, that included certain EMS providers as approved vaccinators



Current Legal Basis

§ 32.1-46.02. Administration of influenza vaccine to minors. The Board shall, together with the Board of Nursing and by August 31, 2009, develop and issue guidelines for the administration of influenza vaccine to minors by licensed pharmacists, registered nurses, or licensed practical nurses, certified emergency medical technicians-intermediate, or emergency medical technicians-paramedic pursuant to § 54.1-3408. Such guidelines shall require the consent of the minor's parent, guardian, or person standing in loco parentis, and shall be consistent with applicable guidelines developed by the Centers for Disease Control and Prevention.



Current Legal Basis

§ 54.1-3408. Professional use by practitioners.

- I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is not physically present, *by* (i) by licensed pharmacists, (ii) by registered nurses, or or (iii) licensed practical nurses under the immediate and direct supervision of a registered nurse. A prescriber acting on behalf of and in accordance with established protocols of the Department of Health may authorize the administration of vaccines to any person by a pharmacist or, nurse, *certified emergency medical technician-intermediate, or emergency medical technician-paramedic under the direction of an operational medical director* when the prescriber is not physically present. *Emergency medical services personnel shall provide documentation of the vaccines to be recorded in the Virginia Immunization Information System.*



Developing an EMS Vaccination Program

Although the recent H1N1 epidemic was the catalyst for the amendments made in the code, the language of the code is not specific to influenza vaccine

Thus EMS providers could be authorized by their medical director to administer a broad range of vaccines



Developing an EMS Vaccination Program

A physician participating in the development of an EMS vaccination program must:

- Hold current endorsement as an EMS physician by the Office of EMS

- Be affiliated with the EMS agency developing the program

- Be willing to assume responsibility for the vaccination program as the “prescriber” identified in Code



Developing an EMS Vaccination Program

To be considered for participation in a vaccination program, EMS providers must:

- Have valid Virginia certification as an EMT-Intermediate or EMT-Paramedic

- Be affiliated with an ALS agency licensed in Virginia

- Be individually authorized to administer vaccine under a specific protocol approved by their Operational Medical Director



Developing an EMS Vaccination Program

Prescribers developing a vaccination program must ensure that:

- The vaccine is properly stored and maintained

- Vaccinators are properly trained in the administration of the specific vaccine being given

- Vaccinators are trained to provide appropriate pre- and post-vaccination education and educational materials to vaccine recipients

- Appropriate records are kept concerning vaccine administration and any adverse occurrences



Developing an EMS Vaccination Program

The materials presented to the vaccine recipient should include documentation of informed consent, including documentation of consent by parents or guardians for minors



Developing an EMS Vaccination Program

The Centers for Disease Control (CDC) and the Virginia Department of Health (VDH) have extensive resources that describe not only vaccination programs in general, but specific information regarding individual vaccines including storage and administration

CDC information:

<http://www.cdc.gov/vaccines/default.htm>

VDH information:

<http://www.vdh.virginia.gov/epidemiology/immunization/providers.htm>



Developing an EMS Vaccination Program

The Virginia Board of Nursing has also developed a set of Model Protocols for vaccine administration by Pharmacists, who are also approved vaccinators under Virginia Code, which is a valuable overview of vaccine storage requirements, screening criteria for recipients, and precautions for vaccinators as well as recipients

<http://www.virginia-pharmacists.org/associations/7940/files/updated%202006%20Immunization%20Protocol.doc>



Developing an EMS Vaccination Program

The CDC has developed a set of Vaccine Information Statements (VISs) that are available for download to be used by vaccinators and provided to recipients

<http://www.cdc.gov/vaccines/pubs/vis/default.htm>

As the CDC points out, Federal law requires provision of VIS prior to the administration of each dose of vaccine in some cases



Developing an EMS Vaccination Program

As specified in the Code, EMS providers who administer vaccine shall provide documentation of the vaccine administration as described by the Virginia Immunization Information System (VIIS)

EMS vaccination programs must first register with the VIIS:

<http://www.vdh.virginia.gov/epidemiology/immunization/viis/index.htm>



Developing an EMS Vaccination Program

Vaccine administration programs should also be familiar with the Vaccine Adverse Event Reporting System (VAERS) and the requirements and mechanisms for reporting adverse vaccine reactions

<http://www.cdc.gov/vaccinesafety/vaers/>



Review

EMS providers may only administer vaccine under a specific protocol approved by their OMD

Providers must be appropriately certified and affiliated

OMD's, as the prescriber, must ensure that the vaccine is appropriately stored, that vaccinators are appropriately trained, and that vaccine recipients are screened prior to vaccine administration, and that they receive appropriate, vaccine specific information and documentation of informed consent prior to vaccination

EMS vaccination programs must be registered with and follow record keeping guidelines of the Virginia Immunization Information System (VIIS)



Summary of Resources

Virginia code sections:

§ 32.1-46.02. Administration of influenza vaccine to minors.

§ 54.1-3408. Professional use by practitioners.

General vaccination information:

CDC

<http://www.cdc.gov/vaccines/default.htm>

VDH

<http://www.vdh.virginia.gov/epidemiology/immunization/providers.htm>

Model vaccination protocols for pharmacists:

<http://www.virginia-pharmacists.org/associations/7940/files/updated%202006%20Immunization%20Protocol.doc>



Summary of Resources

CDC Vaccine Information Statements (VISs)

<http://www.cdc.gov/vaccines/pubs/vis/default.htm>

Virginia Immunization Information System (VIIS)

<http://www.vdh.virginia.gov/epidemiology/immunization/viis/index.htm>

Vaccine Adverse Event Reporting System (VAERS)

<http://www.cdc.gov/vaccinesafety/vaers/>