INJECTABLE INFLUENZA VACCINE ADMINISTRATION COMPETENCY ASSESSMENT

Patient Population Served: Infant/Toddler (6 – 35 months) Child (3 – 5 yrs) School Age (5 – 12 yrs) Adolescents (13 – 17 yrs) Adults (18 yrs +)

Required Competency or Skill	* Self Assessment	Orientation (Preceptor initials & date)	+ Evaluation Method	Competency Validated by Supervisor (Signature & date)	Comments/Additional Resources		
Patient Screening	CRITICAL THINKING: Recognizes normal and abnormal values for all age groups and takes appropriate action in a timely manner. Documents findings appropriately. Recognizes unique age and language appropriate communication needs of patients and responds appropriately. Assures the confidentiality of patient information and their rights to privacy (i.e., auditory and visual privacy).						
A. Understands the actions, implications, precautions and age groups for the administration of the trivalent influenza vaccine (TIV):							
(1) Vaccine screening sheet is reviewed for vaccine contraindications / precautions a. Age (younger than 6 mo) b. Hypersensitivity to eggs, egg proteins, neomycin, polymyxin, formaldehyde, sodium deoxycholate, thimerosal or a previous life threatening reaction to the influenza vaccine c. An acute febrile illness d. History of Guillan-Barré							
 (2) Select appropriate product based on age of patient a. Afluria – ages 18 yrs and older b. Fluzone – 6 mo and older (different dose based on age) 							
(3) Familiarity with Afluria and Fluzone package insert for this flu season. B. Verbalizes understanding of the standing order for the administration of the injectable influenza							
vaccine to adults and pediatric patients C. Provides patient/guardian a current TIV Vaccination Information Statement (VIS) sheet to read prior to administration of immunization							
D. Children under age 18 must be accompanied by parent or legal guardian							

* Self Assessment: 1=Experienced 2=Needs Practice/Assistance 3=Never Done N/A= Not Applicable

+ Evaluation / Validation Methodologies: T=Tests D=Demonstration/Observation V=Verbal I=Interactive Class Updated 21 Jul 09

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Patient Care Procedures for RN, LPN, Medic, Corpsman	CRITICAL THINKING: Recognizes unique needs of patients of all age groups and performs influenza vaccine administration accordingly. Gathers age and diagnosis appropriate supplies and equipment. Explains all procedures in an age appropriate manner according to the level of understanding of the child and the parent/guardian. Approaches child in non-threatening manner and comforts at completion.						
A. Understands importance of the care and handling of influenza vaccine							
(1) Must be stored in a refrigerator (2-8°C) upon arrival, during transportation and until use. DO NOT FREEZE.							
(2) Must be used by labeled expiration date							
(3) Afluria multi-dose vial will expire 28 days after stopper is punctured							
(4)Verbalizes procedures to protect vaccine after temperature compromise is noted (segregate product, label as "potentially compromised", place in functioning refrigerator, contact DSCP, USMMA or the manufacturer to verify stability, prepare EXUM for loss as necessary)							
B. Demonstrates proper technique for administration of the injectable influenza vaccine							
(1) Selects 22-25g needle and appropriate length based on body size							
(2) Shakes syringe and vial before each withdraw of vaccine							
(3) Selects appropriate product based on age a. 6 – 35 mo = Fluzone b. 3 -18 yrs = Fluzone c. 18 yrs and older = Afluria or Fluzone							
(4) Administers appropriate dose based on age a. 6-35 months = 0.25mL b. 3 yrs and older = 0.5 mL							
(5) Using aseptic technique administer vaccine in appropriate anatomical site at 90° angle a. infants and toddlers (lacking adequate deltoid mass) = anterolateral thigh b. toddler, children, teens, adults = deltoid muscle							

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(6) All children 6mo-8yrs who are receiving the		initials a date)		date	
influenza vaccine for the first time should receive two					
doses separated by 4 weeks.					
a. 6 – 35 months = 0.25 mL					
b. 3 – 8 yrs = 0.5 mL					
(7) Document date, type of vaccine, dose,					
manufacturer, lot number, VIS date and the person					
who administered the vaccine					
C. Demonstrates ability to recognize signs and					
symptoms of a patient experiencing an					
anaphylactic reaction and responds appropriately					
(1) Verbalizes understanding of the standing order for					
the medical management of vaccine adverse events.					
(2) Positions patient on litter/ floor					
(3) Calls for assistance and administers epinephrine					
per protocol					
(4) Monitors vital signs / assess breathing					
(5) Proper documentation of event					
a. Annotates a temporary medical exemption in					
MEDPROS, AFCITA, MRRS					
b. Document incident in AHLTA					
c. Completes a VAERS form for submission,					
www.vaers.hhs.gov					
D. Demonstrates ability to recognize signs and					
symptoms of a patient experiencing a vasovagal					
reaction and responds appropriately					
(1) Verbalize signs and symptoms of a vasovagal					
reaction					
(2) Position patient on litter/ floor and elevate legs					
(3) Monitor vital signs / assess breathing					
(4) Administer ammonia inhalant as needed					
E. Explains policy and procedure for waiting at					
least 15 min after vaccination for monitoring of					
possible adverse event					
* Preceptor's Initials: Printed Name:			Signature: _		
I understand the topics listed, I will be allowed to pe	rform only those t	for my skill level/sco	ne of practice and o	only after I have successfully demo	nstrated competency
i understand the topics listed, I will be allowed to pe	itorin omy mose	or my skin ievenscoj	pe or practice and 0	my arter r have successiving delito	istrated competency.
Employee Signature:		Г	Date:		