How to Safely Administer Vaccines During the COVID-19 Pandemic

American College of Physicians
Leading Internal Medicine, Improving Lives

I Raise the Rates

- **Ensure your practice is ready for reopening with appropriate infection control protocols and staffing and workflow modifications.**
  - ACP's COVID-19 Physician's Guide: Ambulatory Care Reopening and Recovery section includes some resources to help guide practices in plans for reopening. Resources include guides, checklists, staffing and workflow modifications, and materials for communicating with patients.

- **Take a team-based approach.**
  - Use a standing orders protocol.
  - Authorize trained nonphysician clinical staff (as allowed by state law) to assess patients' immunization status and administer vaccinations.
  - Use standing orders as approved by a medical director or authorized practitioner.
  - Access standing orders templates from the Immunization Action Coalition for the following adult vaccines:
    - Influenza
    - Pneumococcal
    - Td/Tdap
    - Zoster
    - Other available templates

- **Apply best practices for vaccinating in practice during the COVID-19 pandemic (adapted recommendations from the CDC), with support from the CVO.**
  - Provide specific appointment times or other strategies to manage patient flow and avoid crowding.
  - Ensure sufficient staff and resources to help move patients through the clinic as quickly as possible. Use ACP's innovative staffing models resource to address your staffing needs.
  - Limit the overall number of patients at any given time, particularly for populations at higher risk for severe illness from COVID-19.
  - Reduce crowding in waiting areas by asking patients to remain outside (e.g., request that they stay in their vehicles, if applicable) until they are called into the facility for their appointment.

  - Set up a one-way flow through the site, and use signs, ropes, or other measures to direct patient traffic and ensure physical distancing between patients.
  - Arrange a separate vaccination area or separate hours for persons at increased risk for severe illness from COVID-19, such as older adults and persons with underlying medical conditions, when feasible.
  - Select a space large enough to ensure a minimum distance of 6 feet between patients in line or in waiting areas for vaccination, between vaccination stations, and in postvaccination monitoring areas (the Advisory Committee on Immunization Practices recommends that providers consider observing patients for 15 minutes after vaccination to decrease the risk for injury should they faint).
  - Wear gloves when administering intranasal or oral vaccines because of the increased likelihood of coming into contact with a patient's mucous membranes and body fluids.
  - Change gloves between patients in addition to performing hand hygiene.
  - Use electronic communications as much as possible (e.g., fill out needed paperwork online in advance) to minimize time in the office as well as reuse of materials (e.g., clipboards and pens).

- **Consider options for satellite, temporary, or offsite testing.**
  - CDC Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations
  - Immunization Action Coalition Checklist for Off-Site Vaccination Best Practices