Patient Group Direction for
Pneumococcal polysaccharide vaccine
(PneumoVax II®)
Version: Pneumococcal Poly-2015.1
Start Date: 1\textsuperscript{st} May 2015
Expiry Date: 30\textsuperscript{th} April 2018

THIS PATIENT GROUP DIRECTION HAS BEEN AGREED BY THE FOLLOWING ORGANISATIONS:
BLACKPOOL TEACHING HOSPITALS NHS FOUNDATION TRUST
CUMBRIA PARTNERSHIP NHS FOUNDATION TRUST
EAST LANCASHIRE HOSPITALS NHS TRUST
LANCASHIRE CARE NHS FOUNDATION TRUST
NORTH CUMBRIA UNIVERSITY HOSPITALS NHS TRUST
UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST
CLINICAL COMMISSIONING GROUPS:
BLACKBURN WITH DARWEN
BLACKPOOL
CHORLEY AND SOUTH RIBBLE
EAST LANCASHIRE
FYLDE AND WYRE
GREATER PRESTON
LANCASHIRE NORTH
WEST LANCASHIRE

Change history
<table>
<thead>
<tr>
<th>Version number</th>
<th>Change details</th>
<th>Date</th>
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<tbody>
<tr>
<td>2013.1</td>
<td>Review</td>
<td>6 Jan 2015</td>
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</table>
### Clinical Details

#### Indication

This PGD is to be followed by all nurses and pharmacists who carry out immunisations in hospitals, clinics, schools, surgeries, patients’ homes or other locations. Facilities for treating anaphylaxis must be available.

Immunisation against disease caused by the pneumococcal serotypes included in the vaccine. The vaccine is recommended for individuals 2 years of age and over in whom there is an increased risk of pneumococcal disease.

#### Inclusion criteria

- Aged 65 year and over
- Those aged two years to 64 years in whom there is an increased risk of pneumococcal disease i.e.-
  - Asplenia or severe dysfunction of the spleen including homozygous sickle cell disease and coeliac syndrome that may lead to splenic dysfunction.
  - Nephrotic syndrome, chronic kidney disease at stages 4 and 5 and those on kidney dialysis or with kidney transplantation
  - Immuno-deficiency/suppression due to disease or treatment, including HIV at all stages.
  - Patients undergoing chemotherapy leading to immunosuppression. Individuals on or likely to be on systemic steroids for more than one month at a dose equivalent to prednisolone at 20mg or more per day (any age), or for children under 20kg, a dose of 1mg or more per kg per day.
  - Chronic disease such as cardiovascular/pulmonary/liver disease including cirrhosis, or diabetes mellitus.
  - Cochlear implants.
  - Cerebrospinal Fluid shunts including those with leakage of cerebrospinal fluid such as following trauma or major skull surgery.
  - Those at risk of frequent or continuous occupational exposure to metal fume (e.g. welders)

Can be given at the same time as other vaccines such as influenza vaccine

#### Exclusion criteria

- Confirmed anaphylactic reaction to any component or a preceding dose of Pneumococcal polysaccharide vaccine.
- Within 5 years of a previous dose of pneumococcal polysaccharide vaccine or within 2 months of a pneumococcal conjugate vaccine.
- Within three months of completion of chemotherapy and/or radiation therapy
- Children under 2 years of age
- Check the manufacturers’ information prior to administration of any vaccine/immunoglobulin re its latex content. If latex is a component of the vaccine/immunoglobulin or the administration system (e.g. vial or syringe etc.) then a latex-free alternative must be offered to patients with latex sensitivity.
- Absence of valid consent

#### Precautions

Immunisation must be postponed in patients with acute febrile illness/infection.

#### Management of excluded patients

Give information about when the vaccine may/may not be given or give a further appointment to attend for vaccination, or in the case of a previous severe allergic reaction be referred to the appropriate medical officer, e.g. CMO, GP

#### Action for patients not wishing/unable to receive care under this PGD

Make patient aware of alternative, risks and potential consequences of not being vaccinated. Document refusal. Give advice about pneumococcal disease, how to recognise symptoms and action required if suspected

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**CLINICAL COMMISSIONING GROUPS:** BLACKBURN WITH DARWEN, BLACKPOOL, CHORLEY AND SOUTH RIBBLE, EAST LANCASHIRE, FYLDE AND WYRE, GREATER PRESTON, LANCASHIRE NORTH, WEST LANCASHIRE, BLACKPOOL TEACHING HOSPITALS NHS FOUNDATION TRUST, CLUMBRIA PARTNERSHIP NHS FOUNDATION TRUST, EAST LANCASHIRE HOSPITALS NHS TRUST LANCASHIRE CARE NHS FOUNDATION TRUST, NORTH CUMBRIA UNIVERSITY HOSPITALS NHS TRUST, UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST
### Description of Treatment

<table>
<thead>
<tr>
<th>Name of medicine</th>
<th>Pneumococcal Polysaccharide Vaccine B.P (PneumoVax II®)</th>
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<tbody>
<tr>
<td><strong>Formulation and route</strong></td>
<td>Intramuscular injection into the deltoid muscle. Vaccination by deep subcutaneous route must be reserved <em>only</em> for individuals with a bleeding disorder. Prepare as per manufacturers' instructions.</td>
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<tr>
<td><strong>Strength</strong></td>
<td>Not applicable</td>
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<tr>
<td><strong>Dosage</strong></td>
<td>0.5ml</td>
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<td><strong>Repeated dose instructions</strong></td>
<td>For adults and children aged 2 years &amp; over- Pneumococcal polysaccharide vaccine - single dose of vaccine. <strong>NB:</strong> All children at increased risk of pneumococcal disease who have received pneumococcal conjugate vaccine should also receive a single dose of Pneumococcal polysaccharide vaccine after their 2nd birthday at least 2 months after the final dose of Pneumococcal conjugate vaccine. Re-immunisation is only advised after 5 years in patients whom antibody levels are likely to decline e.g. asplenic, splenic dysfunction or chronic renal disease. Testing of antibody levels prior to vaccination is not required. <strong>Please note:</strong> Re-vaccination using a Pneumococcal polysaccharide vaccine at an interval of less than 3 years is not recommended because of increased risk of adverse reactions</td>
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<tr>
<td><strong>Duration of treatment</strong></td>
<td>As above</td>
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<tr>
<td><strong>Quantity to supply</strong></td>
<td>See above</td>
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<tr>
<td><strong>Legal status</strong></td>
<td>Prescription only medicine (POM)</td>
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<tr>
<td><strong>Special Precautions</strong></td>
<td>Explain indications, contraindications and cautions (refer to Green Book)</td>
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<td><strong>Adverse effects</strong></td>
<td>Injection site reaction (erythema, induration/swelling/pain/tenderness). Fever, irritability, drowsiness, restless sleep. Vomiting, diarrhoea, decreased appetite. Reactions are more common in people with higher concentrations of antibodies to pneumococcal polysaccharides, as in the case of re-vaccination. <strong>This list is not exhaustive. Refer to BNF and SPC for complete list.</strong></td>
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<td><strong>Advice necessary</strong></td>
<td>Ensure that the patient information leaflet is available &amp; offered to every patient/parent/guardian. Advice on the prevention and management of fever and local reactions and other adverse effects. Common post-vaccination adverse effects.</td>
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### Records and Follow Up

| Referral arrangements | Prior to vaccinating, any health professional administering a vaccination must be able to identify and contact an appropriate medical officer, e.g. CMO, consultant paediatrician, GP, as necessary, e.g. in the case of an immunocompromised child. |
| Records to be kept | As per local documentation requirements. Record the brand name of the vaccine given, date and time of administration, batch number, expiry date and immunisation site, supply/administration under PGD. Document any reaction in patient’s medical notes. |
| Follow up | Subsequent vaccination as required as per UK schedule |

*Patient Group Direction, organisation and individual authorisation signatures can be found on the managerial content sheet along with other non-clinical details relating to this patient group direction.*
**Managerial Content of Patient Group Direction for Pneumococcal Polysaccharide Vaccine**

**Version:** Pneumococcal POLY-2015.1 (PneumoVax II®) (Page 3 of 4)

### Patient Group Direction Owner

| Details of Patient Group Direction owner | Name: Martin Samangaya  
Position: Screening and Immunisation Manager  
Contact Address: Public Health England, Lancashire Area Team  
Contact Telephone: 01138 254815  
Contact Email: msamangaya@nhs.net |

### Patient Group Direction Details

| Date comes into effect | 1st May 2015 |
| Date of expiry + review | 30th April 2018 or sooner in the light of significant changes in best practice |

**Staff characteristics**

- Registered nurse or Pharmacist employed by the NHS organisations above or independent contractors within them, who has completed immunisation and vaccination training (theoretical and practical) as per local policy, training in the recognition and treatment of anaphylaxis, including practical training in Basic Life Support (annual practice update session to be undertaken) and working under PGDs. Access to adrenaline and access to the complete updated relevant chapters in the current edition of the “Green Book” Immunisation against Infectious Disease. [https://www.gov.uk/government/organisations/public-health-england/series/immunisation-against-infectious-disease-the-green-book](https://www.gov.uk/government/organisations/public-health-england/series/immunisation-against-infectious-disease-the-green-book)

>> YOU MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION <<  
>> OF THIS PGD BEFORE WORKING UNDER IT <<

### Patient Group Direction Authorisation

#### Lead Doctor

| Name: Dr John Astbury  
Position: Consultant in Health Protection, C&LPHEC |

#### Lead Pharmacist

| Name: Julie Lonsdale  
Position: Head of Medicines Performance, Midlands and Lancashire CSU |

#### Lead Nurse

| Name: Ms Kate Brierley  
Position: Consultant Nurse Health Protection, C&LPHEC |

### Organisational Authorisation for Lancashire CCGs by

| Name: Dr A Manning  
Position: Deputy Medical Director, Lancashire Area Team, NHS England |

### Organisational Authorisation by

| Name:  
Position: |

### Authorisation by Independent Contractor (for PGDs being used by the staff of Independent Contractors only)

| Name:  
Position: |

### Patient Group Direction Peer Reviewed By

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<th>Name</th>
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<tr>
<td>Cumbria and Lancashire Vaccine PGD Sub-Group</td>
<td>(on behalf of group)</td>
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**Individual Authorisation**

BY SIGNING THIS PATIENT GROUP DIRECTION YOU ARE INDICATING THAT YOU AGREE TO ITS CONTENTS AND THAT YOU WILL WORK WITHIN IT

PGDs DO NOT REMOVE INHERENT PROFESSIONAL OBLIGATIONS OR ACCOUNTABILITY

IT IS THE RESPONSIBILITY OF EACH PROFESSIONAL TO PRACTICE ONLY WITHIN THE BOUNDS OF THEIR OWN COMPETENCE

IF THIS IS AN UPDATED OR REPLACEMENT PGD ENSURE THAT ALL OLDER VERSIONS ARE WITHDRAWN FROM USE WITH IMMEDIATE EFFECT

IT IS YOUR RESPONSIBILITY TO MAKE SURE YOU ARE USING THE CURRENT VERSION

**NOTE TO AUTHORISING MANAGERS: AUTHORISED STAFF SHOULD BE PROVIDED WITH AN INDIVIDUAL COPY OF THE CLINICAL CONTENT OF THE PGD AND A PHOTOCOPY OF THE AUTHORISATION SHEET SHOWING THEIR AUTHORISATION**

<table>
<thead>
<tr>
<th>Name of Professional</th>
<th>Signature</th>
<th>Authorising Manager</th>
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**References**
