Post Exposure Prophylaxis (PEP) for Invasive Haemophilus Influenzae Type b (Hib) Disease

Standing Order: All registered nurses and licensed practical nurses employed or contracted by [name of local health department] may administer post-exposure prophylaxis as outlined below to contacts of patients diagnosed with Invasive Haemophilus Influenzae Type b (Hib) disease.

Assessment:
1. Subjective Findings:
   Suspected contact to diagnosed case of Hib disease presenting to health department requesting evaluation for PEP.

2. Objective Findings: Provide PEP to the following contacts of persons diagnosed with invasive Hib disease:
   - All household contacts in households with at least one member younger than 4 years of age who is unimmunized or incompletely immunized
   - All household contacts in households with a child younger than 12 months of age who has not received the primary series
   - All household contacts in households with a member who is an immunocompromised child, regardless of that child’s Hib immunization status

Plan of Care:
1. Implementation:
   o Administer Rifampin 20mg/kg orally once a day for 4 days (maximum dose, 600 mg).
   o Contact [name of local health department] medical director regarding Rifampin dose for neonates under 1 month of age.

2. Nursing Action:
   o PEP should be initiated as soon as possible. The benefit of prophylaxis is decreased if administered more than 14 days after exposure.
   o Rifampin should not be used in pregnant women, as its effect on the fetus has not been established.
   o For those unable to swallow capsules, rifampin may be mixed with several teaspoons of applesauce immediately before administration. Rifampin in a suspension form is also available.
   o Inform contact that possible side effects of rifampin include nausea, vomiting, diarrhea, headache, or dizziness.
   o Inform adult contacts that rifampin can cause orange discoloration of urine, discoloration of soft contact lenses, and decreased effectiveness of oral contraceptives
   o When providing PEP in day-care centers, ensure that all classroom contacts receive rifampin during the same time period.
   o Unimmunized or partially immunized children should complete age specific immunizations.
   o Notify the [name of county health department] Health Director and Public Information Officer (PIO) if a significant number of contacts are suspected.
   o Document administration of PEP to identified contacts in the N.C. Electronic Disease Surveillance System (NC EDSS).

3. Criteria for Notifying Physician:
   o Contact [name of local health department] medical director if there is any question about whether to carry out any treatment or other provision of the standing order.
   o Contact [name of local health department] medical director to determine if PEP will be provided to all regulated nursery school and child care facility attendees and staff when 2 or more cases of Hib invasive disease have occurred within 60 days and unimmunized or incompletely immunized children attend the nursery school or child care facility.
   o Consult an epidemiologist at the Communicable Disease Branch if there is a question regarding the prophylaxis of contacts when serotype is not yet known.
4. Follow-up Requirements: None noted

Approved by: ______________________________ Date Signed _____________
Local Health Department Medical Director

Effective Date: _____________
Expiration Date: _____________

Legal Authority: Nurse Practice Act, G.S. 90-171.20(7)(f)&(8)(c)

References: