

INSTRUCTIONS-LOCAL HEALTH DEPARTMENT STAFF ONLY

Use the approved language in this standing order to create a customized standing order to be used exclusively by your agency. A customized standing order is usually printed on your agency's letterhead and signed by your medical director with effective start and end dates.

Post Exposure Prophylaxis (PEP) for Invasive Meningococcal 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 meningococcal disease.

Assessment:

1. **Subjective Findings:** Suspected contact to diagnosed case of invasive meningococcal disease presenting to health department requesting evaluation for PEP.
2. **Objective Findings: Provide PEP to the following contacts of persons diagnosed with invasive meningococcal disease:**
 - Household contacts
 - Child care or preschool contacts at any time during the 7 days before onset of illness.
 - Persons with direct exposure to the index patient's secretions (kissing, sharing toothbrushes or eating utensils, any close social contact) at any time during the 7 days prior to onset of illness.
 - Persons who frequently slept in the same dwelling as the index patient at any time during the 7 days prior to onset of illness.
 - Airline passengers seated directly next to the index patient during a flight lasting more than 8 hours.
 - Healthcare workers with intimate exposure to respiratory secretions (unprotected mouth-to-mouth resuscitation, suctioning, or intubation before or less than 24 hours after antimicrobial therapy was initiated).

Plan of Care:

Note: Chemoprophylaxis ideally should be initiated within 24 hours after the index patient is identified; prophylaxis given more than 2 weeks after exposure has little value.

1. **Implementation:**
 - If one month of age or older, administer ciprofloxacin 20 mg/kg (maximum 500 mg), orally in a single dose.
 - This medication is not recommended routinely for people younger than 18 years of age or for pregnant women; use may be justified after assessment of risks and benefits for the individual.
2. **Nursing Action:**
 - Teach contact the signs and symptoms of invasive meningococcal disease (sudden onset of fever, intense headache, nausea, vomiting and photophobia). Advise contact to notify physician should he/she experience any of these signs or symptoms.
 - Ask if contact is pregnant as this drug is not recommended for pregnant women.
 - Document any allergies to medications that the contact may have.
 - Advise contact to seek medical attention immediately if he/she experiences severe allergic reactions (rash, hives, itching, difficulty breathing, tightness in the chest, swelling of the mouth, face, lips or tongue).
 - Notify the [name of county health department] Health Director and Public Information Officer (PIO) if a significant number of contacts are suspected.
 - Document administration of PEP to identified contacts in the N.C. Electronic Disease Surveillance System (NC EDSS).
3. **Criteria for Notifying Physician:**
 - Contact [name of local health department] medical director if there is any question about

- whether to carry out any treatment, lab or other provision of this standing order.
- Contact [name of local health department] medical director if contact reports an allergy to the drug designated for prophylaxis.

4. **Follow-up Requirements:**

Follow-up with any contact who has contacted his/her physician to report signs or symptoms of invasive meningococcal disease.

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:

APHA Control of Communicable Diseases Manual, 19th ed., pp 414 - 421.

CDC MMWR: Prevention and Control of Meningococcal Disease, Recommendations of the ACIP. May 27, 2005; 54(RR07).

Red Book, 2009 Report of the Committee on Infectious Diseases, 28th ed., pp 455 – 463.

NC Division of Public Health Communicable Disease Manual
<http://www.epi.state.nc.us/epi/gcdc/manual/toc.html>