



Date: July 7, 2025

BCD 2025-01

To: Wisconsin Vaccinators

From: Dr. Jasmine Zapata, M.D., DHS Medical Officer

## **Statewide COVID-19 Vaccination Standing Order for Individuals Who are Pregnant**

### **PLEASE DISTRIBUTE WIDELY**

#### **Background**

To reduce morbidity and mortality from COVID-19 by SARS-CoV-2, this Statewide COVID-19 Vaccination Standing Order for Individuals Who are Pregnant (the “order” or “standing order”) authorizes qualified personnel, as defined below, to vaccinate patients who are pregnant (“patients”) who are eligible to receive a COVID-19 vaccine based on criteria recommended by the CDC (Centers for Disease Control and Prevention) Advisory Committee on Immunization Practices (ACIP) 2025 schedule as approved by ACIP in October 2024 and published November 21, 2024.

#### **Statewide standing order**

A standing order is defined in [Wis. Stat. § 450.01\(21p\)](#) as an order transmitted electronically or in writing by a practitioner for a drug or device for multiple patients or for one or more groups of patients.

#### **Subject**

Statewide Standing Order for COVID-19 Vaccination for Individuals Who are Pregnant

#### **Effective date**

July 7, 2025 (supersedes all previous versions)

#### **Expiration of standing order**

The standing order shall remain in effect until withdrawn by the Department of Health Services (DHS) Medical Officer, DHS Secretary, or either’s designee, or on July 7, 2026, whichever comes first. DHS retains the right to modify, rescind, or supplement this order as needed.

**Approved for use as a standing order by:**

Wisconsin Department of Health Services (DHS)

**Purpose**

This statewide standing order delegates authority to qualified personnel, as defined below, and outlines the policies and procedures necessary for administering the COVID-19 vaccination for individuals who are pregnant without a patient-specific prescription to authorized individuals.

**Policy**

To be valid under this order, all COVID-19 vaccines must be administered by qualified personnel, as defined below, in strict accordance with procedures specified in the product's Food and Drug Administration (FDA) approval. Additionally, COVID-19 vaccination must be conducted in accordance with requirements related to patient eligibility, staff training, and an appropriate plan of care, as described in detail below.

**Authority**

As the state lead agency for public health, this standing order is issued pursuant to [Wis. Stat. § 250.04\(1\)](#), which permits DHS to execute what is reasonable and necessary for the prevention and suppression of disease; and pursuant to [Wis. Stat. § 250.03\(1\)\(L\)\(1\) and \(7\)](#), which states DHS' role at performing or facilitating the monitoring of health status of populations to identify and solve community health problems and facilitating links for individuals to needed personal health services.

**Procedures**

1. Staffing requirements:
  - a. A COVID-19 vaccine can be obtained, ordered, and administered under this order. Only appropriately trained and qualified medical providers, working in their Wisconsin scope of practice, may administer COVID-19 vaccines under this order ("qualified personnel"). Providers, as defined under this order, include licensed in good standing physicians, nurse practitioners, physician assistants, and pharmacists.
2. Training requirements: COVID-19 vaccines may be administered by the above-listed qualified personnel who meet the required training per their Wisconsin scope of practice.
3. Patient eligibility:
  - a. COVID-19 vaccines may be administered to patients per the ACIP schedule published November 21, 2024.
  - b. COVID-19 vaccines may only be administered to patients who do not have any contraindications for the COVID-19 vaccine product, as specified in the published ACIP recommendations.
  - c. The COVID-19 vaccine recipient patient (and their parent or guardian, if applicable) must receive the Vaccine Information Statement (VIS) from the vaccine administrator, prior to

- receiving the COVID-19 vaccine.
- d. The recipient patient or their parent or guardian has the option to accept or refuse the COVID-19 vaccine.
4. Plan of care requirements:
- a. Qualified personnel administering COVID-19 vaccines under this order must ensure that all of the following requirements specified in the full FDA approval are met:
    - i. Provide non-English speaking patients with a copy of the VIS in their native language, if available and preferred.
    - ii. The COVID-19 vaccine information must be entered into the Wisconsin Immunization Registry (WIR) within seven business days of administration, unless the patient has opted out of WIR.
    - iii. Any mandatory reporting of the following to the Vaccine Adverse Event Reporting System (VAERS):
      1. COVID-19 vaccine administration errors, whether or not associated with an adverse event.
      2. Serious adverse events (irrespective of attribution to COVID-19 vaccination)
      3. Cases of Multi-system Inflammatory Syndrome (MIS) in adults
    - iv. The administering qualified provider is responsible for responding to FDA requests for information about COVID-19 vaccine administration errors, adverse events, cases of MIS in children and adults and cases of COVID-19 that result in hospitalization or death following administration of COVID-19 vaccine to recipient patients.
5. Instructions to staff:
- a. Screen all patients for contraindications and precautions to the COVID-19 vaccine.
  - b. Check the expiration date prior to preparing or administering the COVID-19 vaccine. Expired or diluent COVID-19 vaccine should **never** be used. As additional stability data become available, the expiration dates for some products may change.
  - c. Provide vaccine per COVID-19 vaccine prescribing information to include:
    - i. Proper dosage prescription.
    - ii. Adherence to vaccine freezing storage, thawing and refrigeration requirements prior to administration.
    - iii. Adherence to dosing schedule for two dose COVID-19 vaccines and additional third dose, when applicable.
    - iv. Record date and time of first use on COVID-19 vaccination vial and discard as prescribed.
  - d. Monitor COVID-19 vaccine patient after vaccination for occurrence of immediate adverse reactions according to DHS and CDC guidance.
  - e. Be prepared to manage medical emergency related to the administration of COVID-19 vaccines. Ensure the statewide 911 system and emergency medical service (EMS) information is located at the vaccination site. The name and telephone number of the service must be in the possession of personnel staffing each vaccination site and clearly

- posted. A telephone, landline or cell phone, shall be readily available to the staff. Epinephrine in prefilled auto injector or prefilled syringe for adult and pediatric anaphylaxis should be available.
- f. Ensure the minimum interval of recommended days between the first and second dose for COVID-19 vaccine is observed with plans to complete the primary COVID-19 vaccine series when applicable.
  - g. Document all immunizations administered to COVID-19 vaccine recipients into the WIR data system, unless the patient has opted out of WIR. Include date, immunization given, dose, and anatomical location of administration, lot number, manufacturer and identification of the qualified personnel administering the COVID-19 vaccine.
  - h. Adverse events occurring after administration of any vaccine should be reported to VAERS. Reports can be submitted to VAERS online, by fax or by mail. Additional information about VAERS is available by telephone (800-822-7967) or online on the [VAERS website](#).
  - i. Before vaccination with the second or third COVID-19 dose, verify the patient's previous dose history by reviewing WIR and the CDC vaccination record card received during the initial COVID-19 vaccination.