

**STANDARDIZED ORDER FOR
PROPHYLACTIC MEDICATION FOR EXPOSURE
TO HEMOPHILUS INFLUENZAE**

A. PROPHYLAXIS RECOMMENDATIONS:

Rifampin prophylaxis is recommended for all household contacts if there is another child in the household (other than patient) who is less than four years of age.

When a single case of H. Flu occurs in a day-care setting, no prophylaxis is recommended. Prophylaxis is recommended for day-care staff and children only if two cases occur in the same center within a 60 day period.

B. Prophylaxis is given up to 14 days following the exposure.

C. Rifampin Prophylaxis Dosages:

Adults: 600 mgs. PO QD x 4 days

Children: 20 mg/kg (max. 600 mgs.) PO QD x 4 days

Special Note:

Infants under one month: 10 mg/kg PO QD x 4 days requires a prescription for a suspension to be obtained.

On an emergency basis, Rifampin is available from TB stock at Health Centers.

PHYSICIAN ORDER

MD SIGNATURE/DATE

- Rifampin 600 mg PO bid x 4 days
 Rifampin _____mg PO bid x 4 days

Administered by: _____ **RN/LVN**

DATE:

PATIENT NAME

DOB

WEIGHT

PF#: _____

COMMENTS: _____