

**Outpatient Primary Care Management and Referral Guidelines**  
**San Antonio Military Medical Center and Wilford Hall Ambulatory Surgical Center**  
**Allergy and Immunology Service**

**Overview**

**There are very few consults that warrant ASAP or Urgent status.** If this is entered by the referring provider, it will be downgraded to Routine unless that provider calls and directly speaks with an allergist either at SAMMC or WHASC and it is confirmed as an urgent consult.

Of note, at time of publication of these guidelines, the standard for **active duty** is for Air Force active duty to be seen at Wilford Hall and Army active duty to be seen at SAMMC due to the differences in service specific requirements and paperwork.

**Wilford Hall Ambulatory Surgical Center – Immunization Clinic Guidelines**

Immunizations and PPDs do NOT require a consult

- These are provided on a walk-in basis for patients of all ages
- Refer to our **walk-in hours** to avoid patients being turned away
  - o 0730-1600 Monday, Tuesday, Wednesday, and Friday
  - o 0730-1500 Thursday
- Located on the **1<sup>st</sup> floor**, Room 1G07
- **Smallpox vaccination:** Report to Bldg #4600 Tuesday or Friday; arrive between 1245-1300

**San Antonio Military Medical Center – Immunization Guidelines**

Immunizations and PPDs do NOT require a consult.

- These are provided on a walk-in basis for **adult** beneficiaries.
- Refer to our **walk-in hours** to avoid patients being turned away
  - o Immunizations:
    - 0730-1115 Monday-Friday
    - 1315-1545 Monday, Tuesday, Thursday
  - o PPDs:
    - 0730-1115 Monday-Wednesday and Friday
    - 1315-1545 Monday-Wednesday and Friday
    - **\*\*Cannot place PPDs on Thursdays because of required return for reading 48-72 hours after placement\*\***
- Located on the **3<sup>rd</sup> floor** near the medical mall between Cardiac Rehab and Nephrology
- **Routine vaccinations** do not require a prescription
  - o Hepatitis A and/or Hepatitis B

- HPV
- Meningococcal (18-21 year booster only)
- Prevnar 13 and Pneumococcal 23 (for ages 65 years and older only)
- Tdap (1 adult dose or with each pregnancy 27-36 weeks gestation)
- Td (every 10 years booster)
- Zoster (1 dose  $\geq$  50 years)
- Patients presenting for MMR or Varicella require **titers** to be drawn first by their primary care or other referring provider
  - If negative, then send patient with copy of negative titers for vaccination
- **Hand written prescriptions** are required for:
  - **Special patient populations** (few examples below)
    - Asplenia patients needing meningococcal, Hib, and pneumococcal vaccines
    - Patients at high risk for pneumococcal disease (ie. Asthmatic) needing Pneumovax 23
    - Transplant, cancer, or other immunosuppressed patients needing Prevnar 13 and Pneumovax 23
  - Any **off-label dosing** that does NOT meet CDC guidelines
    - <http://www.cdc.gov/vaccines/schedules/hcp/adult.html>
  - Hand written prescriptions should include:
    - Patient's demographics
    - The indication for the vaccine
    - Precisely which vaccine is being requested
    - Ordering providers name, level of training (staff/fellow/resident), clinic, department, contact number, date, and signature
    - Copies are published with these guidelines

### **Services we are unable to provide**

- Walk-in pediatric vaccination services
- Travel or deployment vaccinations (refer patients to travel clinic or medical readiness)
- Print vaccination records unless a vaccine is being provided in our clinic (refer patients to medical records)
- Transcribe vaccinations that were not administered in our clinic or as part of a series that is being administered in our clinic
- Provide vaccines to non-Tricare beneficiaries unless advised by occupational health as a requirement for duty assignment