

MCI PRACTICE GUIDELINE: INFLUENZA VACCINATION

1. Routine influenza vaccination should be offered annually as soon as the vaccine is available to:
 - All persons age 50 and older, and all children and teens age 6 months -18 years
 - All women who will be pregnant during the influenza season
 - All health-care personnel
 - All persons who want to reduce the risk of becoming ill with or transmitting influenza
 - All persons who live with or care for those at high risk for flu related complications, including contacts of children < 6 mos.
2. All high risk persons should receive inactivated influenza vaccination annually as they are at increased risk for severe complications from influenza. High risk persons include:
 - Children age 6 months - 18 years receiving long-term aspirin therapy
 - Children and adults diagnosed with chronic respiratory or cardiovascular disorders, including asthma
 - Children and adults diagnosed with chronic metabolic diseases (diabetes), renal dysfunction, hemoglobinopathies, immunodeficiency; hepatic, cognitive, neurologic/neuromuscular disorders
 - Children and adults diagnosed with any condition compromising respiratory function
 - Children and adults living in long term care facilities.
3. Regarding children less than 9 years of age:
 - Previously unvaccinated children less than 9 years of age should receive **two doses** of Influenza Vaccine to achieve satisfactory antibody responses.
 - The doses of either the injectable or nasal influenza vaccine should be administered at least 4 weeks apart.
 - Children age less than 9 years of age who received influenza vaccine for the first time during the 2008-2009 influenza season, and received only one dose, require two doses of vaccine during this 2009-2010 influenza season.
 - Children aged less than 9 years of age who were given influenza vaccine during any other influenza season (prior to the 2008-2009 season) should receive only one dose.
4. Trivalent, Inactivated Influenza Vaccine (TIV, the flu shot):
 - Please refer to the table for TIV preparations, indications, doses and administration routes:

Inactivated, Injectable Influenza Vaccine (TIV)					
Trade Name	Manufacturer	Age Group	Dose/Presentation	Number of Doses	Route
Fluzone®	Sanofi Pasteur	6 through 35 months	0.25 mL prefilled syringe	1 or 2	Intramuscular ¹
		36 months and older	0.5 mL prefilled syringe		
		6 months and older	0.5 mL vial		
Fluvirin™	Novartis Vaccine	4 years and older	5.0 mL multi dose vial	1 or 2	Intramuscular ¹
FLUARIX®	GlaxoSmithKline	18 years and older	0.5mL prefilled syringe	1	Intramuscular ¹
FluLaval™	GlaxoSmithKline	18 years and older	5.0 mL multi dose vial	1	Intramuscular ¹

¹For adults and older children, the recommended site of vaccination is the deltoid muscle. The preferred site for infants and younger children is the anterolateral aspect of the thigh.

5. Live, Attenuated Influenza Vaccine (LAIV, FluMist)
 - FluMist is recommended for healthy non-pregnant people age 2 through 49 years of age.
 - Children younger than 5 years of age with recurrent wheezing should not receive LAIV.
 - Please refer to the table below for LAIV preparations, indications, doses and administration routes:

Live, Attenuated Nasal Spray Influenza Vaccine (LAIV)					
Trade Name	Manufacturer	Age Group	Dose/Presentation	Number of Doses	Route
FluMist™	Medimmune	Healthy non-pregnant people age 2 through 49 years	0.2 mL sprayer	1 or 2	Intranasal (0.1 mL in each nostril)

6. Influenza vaccine, both TIV and LAIV can be administered at the same time as other routine vaccinations.

Reference: Department of Health and Human Services Centers for Disease Control and Prevention. July 24, 2009 Prevention and Control of Seasonal Influenza. Recommendations of the Advisory Committee on Immunization Practices (ACIP) 2009. MMWR 2009, 58(Early Release): 1-52.

Variation from this guideline is always acceptable if in the opinion of the attending physician individual circumstances require it.