

2011–12 Influenza Vaccine Pocket Information Guide

Who Should Be Vaccinated?

Annual vaccination against influenza is recommended for all people age 6 mos and older who do not have a contraindication to the vaccine.

Important Points for Healthcare Providers

- Vaccination should begin as soon as vaccine becomes available in late summer and should continue until the supply is gone.
- Six manufacturers will produce approximately 170 million doses of vaccine for the 2011–12 U.S. influenza season; five of the six will produce vaccine for children.
- Vaccine recommendations have been updated to include new information concerning 1) vaccination of people with egg allergies and 2) number of vaccine doses for children age 6 mos through 8 yrs (see reverse side).
- It is important that you and everyone in your healthcare setting be vaccinated to protect patients, other healthcare workers, your family—and to set the right example.

Talking Points with Patients

- Influenza is a serious respiratory disease caused by a virus. It is not the same as the common cold or an intestinal illness.
- Influenza may be contagious for 24 hours before any symptoms develop. Though everyday preventive actions (e.g., handwashing) can help prevent transmission of many types of germs, the best way to avoid influenza infection is to get vaccinated.
- People who were vaccinated in the previous season (2010–11) will still need to be vaccinated with the 2011–12 vaccine even though the vaccine viruses did not change. The primary reason is that a person's immune protection from vaccination declines over time, so protection for the subsequent season will be reduced.
- It is important that everyone age 6 mos and older be vaccinated for their own protection, as well as the protection of those they love and those who are especially vulnerable to the serious and sometimes deadly complications of influenza.

**Influenza is a serious and unpredictable disease!
Vaccinate everyone age 6 months and older,
even if they were vaccinated last season.**

Contraindications and Precautions*

- Do not give influenza vaccine (TIV or LAIV) to a person who has had a serious systemic or anaphylactic reaction to a prior dose of the vaccine or any of its components (e.g., eggs). TIV may be given to people who have experienced only hives following exposure to eggs; observe person for at least 30 minutes following vaccination for signs of a reaction. Minor illnesses with or without fever do not contraindicate use of influenza vaccine.
- Do not give nasal-spray LAIV to people who have a hypersensitivity (anaphylactic or non-anaphylactic) to eggs, are younger than age 2 yrs, age 2 through 4 yrs with possible reactive airways disease (e.g., history of recurrent wheezing or a recent wheezing episode**), age 50 yrs or older, pregnant; have a high-risk medical condition*; or are a child or teen receiving long-term aspirin therapy. Injectable TIV may be preferred for people who have close contact with severely immunosuppressed people during periods when the immunocompromised person requires protective isolation due to theoretical concerns over transmission of a live virus.
- Guillain-Barré syndrome within 6 wks following a previous dose of influenza vaccine is a precaution for vaccination with TIV or LAIV.

Vaccine Dosing and Administration

- Give 2 doses of influenza vaccine (TIV or LAIV) separated by at least 4 wks to all children younger than age 9 yrs who are receiving influenza vaccine for the 1st time or who did not get or are unsure if they got at least 1 dose of influenza vaccine last year, regardless of their previous influenza vaccination history.
- TIV intramuscular (IM): Give 0.25 mL if age 6–35 mos; give 0.5 mL if age 3 yrs or older. Give IM with a 22–25g, 1–1½" needle. Choose vaccine according to patient's age (i.e., Fluzone: 6 mos & older; Fluarix: 3 yrs & older; Fluvirin: 4 yrs & older; Afluria: 9 yrs & older***; FluLaval: 18 yrs & older; Fluzone [high-dose]: option for 65 yrs & older).
- TIV intradermal (ID); option for adults age 18 through 64 yrs: Give 0.1 mL FluZone (intradermal) via prefilled microinjection system.
- LAIV intranasal (IN): Give 0.2 mL FluMist (0.1 mL sprayed into each nostril) to healthy non-pregnant people age 2 through 49 yrs.

Side Effects

- TIV's most common side effects are soreness, redness, and (for TIV-ID only) itching at the injection site, lasting 1–2 days.
- LAIV's most common side effects are runny nose & nasal congestion.

*For details, go to www.cdc.gov/flu/professionals/vaccination.

**Ask parents of children age 2–4 yrs: "In the past 12 months, has a healthcare provider ever told you that your child had wheezing or asthma?" If yes, do not give LAIV; instead give TIV.

***If no other age-appropriate TIV is available, Afluria may be considered for a child age 5–8 yrs at high risk for influenza complications, after risks and benefits have been discussed with the parent or guardian.