How to Administer Intramuscular and Intranasal Influenza Vaccines

Intramuscular injection (IM)
Inactivated Influenza Vaccines (IIV), including recombinant hemagglutinin (RIV), cell culture-based vaccine (ccIIV), adjuvanted influenza vaccine (aIIV), and egg culture-based inactivated influenza vaccines.

1 Use a needle long enough to reach deep into the muscle. Infants age 6 through 11 mos: 1"; 1 through 10 yrs: 1–1¼"; and children and adults 11 years and older: 1–1½".
2 With your non-dominant hand, bunch up the muscle.
3 With your dominant hand, insert the needle at a 90° angle to the skin with a quick thrust.
4 Push down on the plunger and inject the entire contents of the syringe. There is no need to aspirate.
5 Remove the needle and then apply pressure to the injection site with a dry cotton ball or gauze. Hold in place for several seconds.
6 If there is any bleeding, cover the injection site with a bandage.
7 Put the used needle and syringe in a sharps container.

Intranasal administration (NAS)
Live Attenuated Influenza Vaccine (LAIV)

1 FluMist (LAIV) is for intranasal administration only. Do not inject FluMist.
2 Remove rubber tip protector. Do not remove dose-divider clip at the other end of the sprayer.
3 With the patient in an upright position, place the tip just inside the nostril to ensure LAIV is delivered into the nose. The patient should breathe normally.
4 With a single motion, depress plunger as rapidly as possible until the dose-divider clip prevents you from going further.
5 Pinch and remove the dose-divider clip from the plunger.
6 Place the tip just inside the other nostril, and with a single motion, depress plunger as rapidly as possible to deliver the remaining vaccine.
7 Dispose of the applicator in a sharps container.