**standing orders for**

Standing orders for other vaccines are available at [www.immunize.org/standing-orders](http://www.immunize.org/standing-orders). **note:** This standing orders template may be adapted per a practice’s discretion without obtaining permission from Immunize.org. As a courtesy, please acknowledge Immunize.org as its source.

Administering Influenza Vaccine to Children and Teens

# Purpose

To reduce morbidity and mortality from influenza by vaccinating all children and adolescents who meet the criteria established by the Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices (ACIP).

# Policy

Where allowed by state law, standing orders enable eligible nurses, pharmacists, and other healthcare professionals to assess the need for vaccination and to vaccinate children and adolescents who meet any of the criteria below.

# Procedure

## Assess Children and Adolescents for Need of Vaccination against Influenza

* + All people 6 months of age and older are recommended to receive influenza vaccination each year.
  + A second dose of influenza vaccine is recommended 4 weeks or more after the first dose for children age 6 months through 8 years if they have not or don’t know if they have received 2 doses in prior years (not necessarily in the same season).
  + A second dose is needed for a 9-year-old child who received one dose in the current season when they were age 8 years, if they have not or don’t know if they have received 2 doses in prior years.
  + Children and teens who recently received or are planning to receive COVID-19 vaccine may be administered influenza vaccine either simultaneously (on the same day) or at any time before or after COVID-19 vaccine. Interim clinical considerations and detailed current guidance for the use of COVID-19 vaccines are available at [www.cdc.gov/vaccines/covid](http://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html)-19/clinical-considerations/covid-19-vaccines-us.html. Information on coadmin- istration of all vaccines can be found at [www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html](http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html).

## Screen for Contraindications and Precautions

### *Contraindications for use of all influenza vaccines*

* + Do not give any egg-based inactivated influenza vaccine (IIV4) to a child or teen who has experienced a serious systemic or anaphylactic reaction to any component of the vaccine (except egg), or to a prior dose of any influenza vaccine (i.e., egg-based IIV, cell culture-based IIV [ccIIV], recombinant influenza vaccine [RIV], or live attenuated influenza vaccine [LAIV]).
  + Do not give ccIIV4 to a child or teen who has experienced a serious systemic or anaphylactic reaction to any component of ccIIV4 or to a prior dose of any ccIIV.
  + Do not give any RIV4 to a teen age 18 years or older who has experienced a serious systemic or anaphylactic reaction to any component of RIV4 or to a prior dose of RIV.
  + Do not give any LAIV4 to a child or teen who has experienced a serious systemic or anaphylactic reaction to any component of LAIV4 or to a prior dose of any influenza vaccine (egg-based IIV, ccIIV, RIV, or LAIV).

For a list of vaccine components, refer to the manufacturer’s package insert ([www.immunize.org/](http://www.immunize.org/fda)fda) or go to [www.fda.gov/vaccines](http://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states)-blood-biologics/vaccines/vaccines-licensed-use-united-states.

### *Additional contraindications for use of LAIV only*

Do not give LAIV4 to a child or adolescent who

* + is pregnant
  + is age 2 through 4 years who has received a diagnosis of asthma or who has experienced wheezing or asthma within the past 12 months, based on a healthcare provider’s statement or medical record
  + has functional or anatomic asplenia, or a cochlear implant
  + has active communication between CSF and the oropharynx, nose, or ear or any other cranial CSF leak

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**FOR PROFESSIONALS** [www.immunize.org](http://www.immunize.org/) / **FOR THE PUBLIC** [www.vaccineinformation.org](http://www.vaccineinformation.org/)



[www.immunize.org/catg.d/p3074a.pdf](https://www.immunize.org/catg.d/p3074a.pdf)

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* + is immunocompromised due to any cause (including immunosuppression caused by medications or HIV infection)
  + is age 6 months through 17 years and is receiving aspirin- or salicylate-containing medicine
  + received influenza antivirals *before* scheduled vaccination (zanamivir or oseltamivir within 48 hours; peramivir within 5 days; baloxavir within 17 days). If any of these antiviral drugs are taken within 14 days *after* LAIV4, revaccinate with IIV4 or RIV4.
  + is a close contact of a severely immunosuppressed person who requires a protected environment

### *Precautions for use of all influenza vaccines*

* + Moderate or severe acute illness with or without fever
  + History of Guillain-Barré syndrome within 6 weeks of a previous influenza vaccination

### *Precautions for use of ccIIV and RIV*

* + History of a serious systemic or anaphylactic reaction to a previous dose of any egg-based IIV, LAIV, or RIV is a precaution to use of ccIIV4.
  + History of a serious systemic or anaphylactic reaction to a previous dose of any egg-based IIV, ccIIV, or LAIV, is a precaution to use of RIV4.

Influenza vaccine contraindications and precautions for children and teens with a history of serious systemic or anaphylactic reaction to a previous dose of an influenza vaccine are summarized in the table below.

|  |  |  |  |
| --- | --- | --- | --- |
| **vaccine associated with previous serious or**  **anaphylactic reaction** | **available 2022–23 influenza vaccines** | | |
| **Egg-based IIV4s and LAIV4** | **ccIIV4** | **RIV4** |
| Any egg-based IIV or LAIV | Contraindication | Precaution\* | Precaution\* |
| Any ccIIV | Contraindication | Contraindication | Precaution |
| Any RIV | Contraindication | Precaution\* | Contraindication |
| Unknown influenza vaccine | Allergist consultation recommended | | |

\* Use of ccIIV4 and RIV4 in such instances should occur in an inpatient or outpatient medical setting under the supervision of a healthcare provider (HCP) who can recognize and manage severe allergic reaction. HCPs may consider consulting with an allergist to help identify the vaccine component responsible for the reaction.

### *Precautions for use of LAIV4 only*

* Age 5 years or older with asthma
* Other chronic medical conditions that might predispose the person to complications of influenza infection (e.g., other chronic pulmonary, cardiovascular [excluding isolated hypertension], renal, hepatic, neurological/ neuromuscular, hematologic, or metabolic disorders [including diabetes mellitus])

**note regarding patients with egg allergy**: People with egg allergy of any severity can receive any recommended and age-appropriate influenza vaccine (i.e., any IIV4, RIV4, or LAIV4) that is otherwise appropriate for their health status. Most influenza vaccines (except RIV4 and cell-cultured IIV4) are egg cultured and may have trace amounts of egg protein. If a vaccine other than ccIIV4 or RIV4 is used, children and teens with a history

of reactions to egg involving any symptom other than hives (e.g., angioedema or swelling, respiratory distress, lightheadedness, or recurrent emesis), or who required epinephrine or another emergency medical intervention, the selected vaccine should be administered in a medical setting (e.g., health department or physician office).

Vaccine administration should be supervised by a healthcare provider who is able to recognize and manage severe allergic conditions.

## Provide Vaccine Information Statements

Provide all patients (or, in the case of minors, their parent, or legal representative) with a copy of the most current federal Vaccine Information Statement (VIS). Provide non-English speaking patients with a copy of the VIS in their native language, if one is available and desired; these can be found at [www.immunize.org/vis](http://www.immunize.org/vis). (For information about how to document that the VIS was given, see section 6 titled “Document Vaccination.”)

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## Prepare to Administer Vaccine

**For vaccine that is to be administered intramuscularly**, choose the needle gauge, needle length, and injection site according to the following chart:

|  |  |  |  |
| --- | --- | --- | --- |
| **age of child** | **needle gauge** | **needle length** | **injection site** |
| Infants age 6 through 11 months | 22–25 | 1" | Anterolateral thigh muscle |
| Age 1 through 2 years | 22–25 | 1–1¼" | Anterolateral thigh muscle† |
| 5 ⁄8‡–1" | Deltoid muscle of arm |
| Age 3 through 10 years | 22–25 | 5 ⁄8‡–1” | Deltoid muscle of arm† |
| 1–1¼" | Anterolateral thigh muscle |
| Age 11 years and older | 22–25 | 5 ⁄8‡–1" | Deltoid muscle of arm† |
| 1–1½" | Anterolateral thigh muscle |

† Preferred site.

‡ A 5 ⁄8" needle may be used in patients weighing less than 130 lbs (<6 0 kg) for IM injection in the deltoid muscle only if the skin is stretched tight, the subcutaneous tissue is not bunched, and the injection is made at a 90-degree angle to the skin.

**For LAIV4, which is administered intranasally,** prepare the vaccine according to directions in the package insert.

1. **Administer Influenza Vaccine** according to the age of patient and desired route of vaccination described below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **type of vaccine** | **age group** | **dose** | **route** | **instructions** § |
| Inactivated influenza vaccine (IIV4) | 6–35 months | Afluria: 0.25 mL  Fluarix: 0.5 mL  Flucelvax: 0.5 mL  FluLaval: 0.5 mL  Fluzone: 0.25 or 0.5 mL | Intramuscular (IM) | Administer vaccine in anterolateral thigh muscle; alternatively, children age 12 through 35 months may re- ceive injection in deltoid muscle. |
| Inactivated influenza vaccine (IIV4) | 3 years and older | 0.5 mL | Intramuscular (IM) | Administer vaccine in deltoid muscle or, alternatively, in anterolateral thigh muscle. |
| Recombinant influ- enza vaccine (RIV4) | 18 years and older | 0.5 mL | Intramuscular (IM) | Administer vaccine in deltoid muscle. |
| Live attenuated influ- enza vaccine (LAIV4) | Healthy, age 2 years and  older (except if pregnant) | 0.2 mL (0.1 mL into each nostril) | Intranasal spray (NAS) | Spray half of vaccine into each nostril while the patient is in an upright position. |

**note:** For children age 6 months through 8 years who 1) are receiving influenza vaccine for the first time,

2) have had fewer than two prior doses of influenza vaccine in all previous years, or 3) don’t know their influenza vaccine history, administer two doses separated by at least 4 weeks.

§ For complete instructions on how to administer influenza vaccine, see “How to Administer Intramuscular and Intranasal Influenza Vaccines” at [www.immunize.org/catg.d/p2024.pdf](http://www.immunize.org/catg.d/p2024.pdf).

## Document Vaccination

Document each patient’s vaccine administration information and follow up in the following places:

***Medical record:*** Record the date the vaccine was administered, the manufacturer and lot number, the vaccination site and route, and the name and address and, if appropriate, the title of the person administering the vaccine. You must also document, in the patient’s medical record or office log, the publication date of the VIS and the date it was given to the patient (parent/legal representative). Note that medical records/charts should be documented and retained in accordance with applicable state laws and regulations. If vaccine was not administered, record the

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reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal); discuss the need for vaccine with the patient (or, in the case of a minor, their parent or legal representative) at the next visit.

***Personal immunization record card:*** Record the date of vaccination and the name/location of the administering clinic.

***Immunization Information System (IIS) or “registry”:*** Report the vaccination to the appropriate state/local IIS.

## Be Prepared to Manage Medical Emergencies

Be prepared for management of a medical emergency related to the administration of vaccine by having a written emergency medical protocol available, as well as equipment and medications. For Immunize.org’s “Medical Management of Vaccine Reactions in Children and Teens in a Community Setting,” go to [www.immunize.org/](http://www.immunize.org/catg.d/p3082a.pdf) [catg.d/p3082a.pdf](http://www.immunize.org/catg.d/p3082a.pdf). For Immunize.org’s “Medical Management of Vaccine Reactions in Adult Patients in a Community Setting,” go to [www.immunize.org/catg.d/p3082.pdf](http://www.immunize.org/catg.d/p3082.pdf). To prevent syncope in older children, vaccinate patients while they are seated or lying down and consider observing them for 15 minutes after receipt of the vaccine.

## Report All Adverse Events to VAERS

Report all adverse events following the administration of influenza vaccine to the federal Vaccine Adverse Event Reporting System (VAERS). To submit a VAERS report online (preferred) or to download a writable PDF form, go to <https://vaers.hhs.gov/reportevent.html>. Further assistance is available at (800) 822-7967.

**Standing Orders Authorization**

This policy and procedure shall remain in effect for all patients of the

**NAME OF PRACTICE OR CLINIC**

effective until rescinded or until .

**DATE DATE**

Medical Director /

**PRINT NAM**E **SIGNATURE DATE**