

Injectable Vaccine Administration for Adults 19 years & Older¹

Vaccine	Age/Reminders	Route	Site ²	Needle Size	Contraindications ²
Tetanus, diphtheria (Td)	May give more than 1 dose for age 7 years & older	IM	Deltoid	1" – 1.5" 22-25g	Anaphylactic reaction to prior dose or component; For Tdap: encephalopathy within 7 days of previous pertussis vaccine dose without other known cause
Tetanus, diphtheria, pertussis (Tdap) ³	Give as a single (one-time) dose; Given to all adults, including those age 65 years & older when indicated				
Hepatitis B (hep B)	3-dose series; No routine booster dose	IM	Deltoid	1" – 1.5" 22-25g	Anaphylactic reaction to prior dose or component (baker's yeast)
Hepatitis A (hep A)	2-dose series; 2 nd dose 6 months after 1 st dose	IM	Deltoid	1" – 1.5" 22-25g	Anaphylactic reaction to prior dose or component; hypersensitivity to alum (Havrix® only: 2-phenoxyethanol)
Measles, Mumps, Rubella (MMR)	If born in 1957 or later, assure 1 dose given; persons at high risk, give 2 doses	SC	Lateral Upper Arm	5/8" 23-25g	Anaphylactic reaction to prior dose or component (neomycin, gelatin); pregnancy
Varicella (Var)	If born in 1980 or later, assure 2 doses given or have other evidence of immunity	SC	Lateral Upper Arm	5/8" 23-25g	Anaphylactic reaction to prior dose or component (neomycin, gelatin); pregnancy
Influenza (TIV) "flu shot"	Age 6 months and older	IM	Deltoid	1" – 1.5" 22-25g	Anaphylactic reaction to prior dose or component
Influenza High Dose (TIV high dose)	Age 65 years & older				
Influenza Intradermal (TIV ID)	Aged 18 through 64 years Must use TIV ID prefilled syringe only	ID	Over Deltoid Area	Use special pre-filled syringe	Anaphylactic reaction to prior dose or component
Pneumococcal Polysaccharide (PPSV23)	No more than 2 lifetime doses Space at least 5 years apart	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to prior dose or component
		IM	Deltoid	1"– 1.5" 22-25g	
Meningococcal Conjugate (MCV4) ⁴	Use for aged 9 months through 55 years when a meningococcal vaccine is needed	IM	Deltoid	1" – 1.5" 22-25g	Anaphylactic reaction to prior dose or component
Meningococcal Polysaccharide (MPSV4) ⁴	Use for age 56 years & older when a meningococcal vaccine is needed	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to prior dose or component
Human Papillomavirus (HPV4: Gardasil®) (HPV2: Cervarix®)	HPV4: females or males HPV2: females only Both: For aged 9 through 26 years	IM	Deltoid	1" – 1.5" 22-25g	Anaphylactic reaction to prior dose or component (HPV4: baker's yeast)
Herpes Zoster (zoster)	Adults 60 years and older	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to prior dose or component (neomycin, gelatin); pregnancy

¹ For details, including information on risk groups, dosing & minimum intervals, refer to www.cdc.gov/vaccines; Travel vaccines information at: www.cdc.gov/travel

² Vaccines should never be administered in the buttocks. See package insert for complete contraindication/component listing; components may vary by brand of vaccine

³ Tdap licensure ages: Boostrix® (GSK) age 10 yrs & older; ADACEL® (sanofi pasteur) aged 11-64 yrs; Either brand may be used for age 65 yrs and older when indicated

⁴ MCV4 licensure ages: Menactra® (sanofi pasteur) aged 9 mos-55 yrs & Menveo® (Novartis) aged 2-55 yrs; MPSV4 licensure ages: Menomune® (sanofi pasteur) age 2 yrs & older