

Seasonal Influenza Vaccines 2012-2013



Trivalent Influenza Vaccine (TIV) Intramuscular (IM) “Flu Shot”					
Age	Dosage ¹	Route	Site ²	Needle Length ²	Needle Gauge
6-35 months	0.25 mL	IM injection	Anterolateral thigh muscle	1 inch	22-25 g
3-8 years	0.5 mL	IM injection	Anterolateral thigh or deltoid muscle	1 inch	22-25 g
9 yrs & older	0.5 mL	IM injection	Anterolateral thigh or deltoid muscle	1-1.5 inches	22-25 g
Live Attenuated Influenza Vaccine (LAIV) “Nasal”					
Age	Dosage ¹			Route	Site
2-49 years	0.2mL; Spray 0.1mL into each nostril as indicated by the divider clip on the sprayer			Intranasal	Each nostril
Trivalent Influenza Vaccine (TIV) Intradermal (ID)					
Age	Dosage ¹	Route	Site	Needle Length/Needle Gauge	
18-64 years	0.1 mL	ID injection	Deltoid area upper arm	Needle is attached to prefilled syringe by manufacturer	

¹ Children needing 2 doses of flu vaccine should receive an age appropriate vaccine/dosage each time. Refer to: “Who needs 2 doses of 2012-13 Flu Vaccine” at www.michigan.gov/flu

² Needle size and site of injection assessment must be made for each person on the basis of the size of the muscle and the thickness of adipose tissue at the injection site

Use the Correct Product and Presentation Based on the Patient’s Age and Status

Manufacturer	Product ¹	Vaccine ¹	Presentation	Thimerosal	Age Group	CPT Code ²
sanofi pasteur	Fluzone®	TIV	Prefilled 0.25 mL syringe	No	6 months through 35 months	90655
			Prefilled 0.5 mL syringe or vial	No	3 years & older	90656
			5.0 mL multi-dose vial	Yes	6 months through 35 months	90657
	3 years & older	90658				
	Fluzone HighDose®	TIV High Dose	Prefilled 0.5 mL syringe	No	65 years & older	90662
Intradermal Fluzone®	TIV ID	Prefilled 0.1mL syringe	No	18 years through 64 years	90654	
Novartis Vaccines	Fluvirin™	TIV	Prefilled 0.5 mL syringe	Trace	4 years & older	90656
			5.0 mL multi-dose vial	Yes	4 years & older	90658
GlaxoSmithKline	Fluarix™	TIV	Prefilled 0.5 mL syringe	No	3 years & older	90656
	FluLaval™	TIV	5.0 mL multi-dose vial	Yes	18 years & older	90658
CSL Biotherapies	Afluria®	TIV	Prefilled 0.5 mL syringe	No	9 years & older ³	90656
			5.0 mL multi-dose vial	Yes	9 years & older ³	90658
MedImmune	FluMist™	LAIV	Prefilled 0.2 mL nasal sprayer	No	Healthy, non-pregnant persons 2 through 49 years	90660

¹TIV (0.5mL) & nasal influenza vaccines contain 15 mcg of A/California/7/2009 (H1N1)-like, A/Victoria/361/2011 (H3N2), and B/Wisconsin/1/2010(Yamagata lineage). TIV High-Dose: 0.5 mL dose contains 60 mcg and TIV ID contains 9 mcg respectively of each of these antigen types

² Current Procedural Terminology (CPT) is a registered trademark of the American Medical Association (AMA)

³ Refer to ACIP Recommendations for the Use of CSL Influenza Vaccine, MMWR VOL 59, August 13, 2010: <http://www.cdc.gov/flu>

For more information: Contact your local health department or visit: MI Department of Community Health www.michigan.gov/flu or CDC www.cdc.gov/flu. Updates to this form will be posted at www.michigan.gov/flu
Prevention and Control of Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2012-13 Influenza Season, MMWR Vol.61/No.32/August 17,2012 at www.cdc.gov/mmwr
General Recommendations on Immunization, Recommendations of the ACIP, MMWR, Vol. 60, January 28, 2011 at www.cdc.gov/mmwr
August 17, 2012