Flu vaccine dosage is based on the person’s age and the flu vaccine product that is used.\(^1\) A study in 2016 found that flu vaccine was most frequently involved in reported vaccine errors (20%) and was the most common type of vaccine implicated in age-related vaccine errors.\(^2\) It is important to prevent flu vaccine administration errors to ensure children are adequately protected against flu.

For children aged 6 through 35 months, vaccine dosage is dependent on the flu vaccine product that is administered. There are multiple licensed inactivated influenza vaccines (IIV) available for children aged 6 through 35 months: Afluria\(^{*}\) Quadrivalent, FluLaval\(^{*}\) Quadrivalent, Fluarix\(^{*}\) Quadrivalent, and Fluzone\(^{*}\) Quadrivalent.

<table>
<thead>
<tr>
<th>If You’re Using This Vaccine...(^1)</th>
<th>Dosage for Ages 6-35 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afluria (Seqirus)</td>
<td>0.25 mL</td>
</tr>
<tr>
<td>FluLaval or Fluarix (GSK)</td>
<td>0.5 mL</td>
</tr>
<tr>
<td>Fluzone (Sanofi Pasteur)</td>
<td>0.25 mL OR 0.5 mL</td>
</tr>
</tbody>
</table>

*No preference is expressed for either dose volume.

Refer to the Flu Vaccine Presentation Chart (see footnote 1) for available presentations of each of these vaccines.

For all persons aged 3 years and older, IIV dosage is 0.5 mL regardless of the flu vaccine product being administered.

If 2 doses of 2019-20 flu vaccine are needed\(^3\), the same vaccine product does not need to be used for both doses. Use any age-appropriate flu vaccine that is available that day, ensuring you use the correct dosage for the product you are administering. Don’t miss an opportunity to vaccinate! Dosage is based on the child’s age on the day of vaccine administration. For example:

- If a child is aged 2 years and 11 months for dose 1, use the above table to determine dosage based on the IIV product used.
- When the child returns 4 weeks later for dose 2 and is now aged 3 years, the dosage is 0.5 mL regardless of the IIV product used.

For IIV, the needed volume for a child aged 6 through 35 months may be administered from a prefilled syringe containing the appropriate volume (as supplied by the manufacturer), a single-dose vial, or a multi-dose vial. However, if a 0.5 mL single-dose vial is used for a 0.25 mL dose for a child aged 6 through 35 months, only half the volume should be administered, and the other half should be discarded.

Examples of how to correct pediatric flu vaccine dosage administration errors\(^4,5\):

1.) A 6-month-old was inadvertently given a 0.25 mL dose of FluLaval/Fluarix rather than the recommended 0.5 mL dose. What should I do?

**If the error is recognized on the same clinic day, you can give a second 0.25 mL dose of the product that was used (FluLaval or Fluarix) to correct this vaccine error. If the error is not discovered until the following day,**
you should revaccinate with a full dose of IIV (0.25 mL of Afluria, 0.5 mL of FluLaval or Fluarix, or either 0.25 mL or 0.5 mL of Fluzone) as soon as possible. Revaccinating the day after the initial substandard dose was administered is safe and recommended if feasible.

2.) A 2-year-old was inadvertently given 0.5 mL from an Afluria multi-dose vial rather than the recommended 0.25 mL dose. What should I do?

This is more than an age-appropriate dose. The dose should be counted as valid. Notify the parent/guardian about the error. Ensure that office staff receive education to prevent vaccine administration errors. If the child needs a second dose according to the 2-dose algorithm\(^3\), administer an age-appropriate IIV dose (use the table above) 4 weeks later. Alternatively, healthy children aged 2 years and older may receive LAIV\(^4\) intranasally.

3.) A 5-year-old was inadvertently given a 0.25 mL dose of Afluria rather than the recommended 0.5 mL dose. What should I do?

If the error is recognized on the same clinic day, you can give a second 0.25 mL dose of Afluria to correct this vaccine error. If the error is not discovered until the following day, you should revaccinate the 5-year-old with a 0.5 mL dose of IIV as soon as possible. Revaccinating the day after the initial substandard dose was administered is safe and recommended if feasible. Alternatively, healthy children aged 2 years and older may receive LAIV\(^4\) intranasally.

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\(^1\) Refer to “2019-20 Seasonal Influenza Vaccine Presentation Chart” at www.michigan.gov/flu.
\(^3\) Refer to “Who Needs 2 Doses of 2019-20 Seasonal Influenza Vaccine” at www.michigan.gov/flu.
\(^4\) Report all vaccine administration errors to the Vaccine Adverse Event Reporting System (VAERS): https://vaers.hhs.gov.
\(^5\) Contact your local health department or MDHHS regarding the vaccine error, so the status of the error can be determined and marked accordingly in MCIR.


For more information on flu vaccine and how to correct vaccine administration errors, visit Immunization Action Coalition’s Ask the Experts influenza page at www.immunize.org/askexperts/experts_inf.asp.