RECOMMENDED PEDIATRIC INFLUENZA VACCINE

Available from the Idaho Immunization Program for the 2012-2013 Season*

VACCINE	TRADE NAME	Manufacturer	Presentation	MERCURY CONTENT (mcg Hg/0.5mL dose)	AGE GROUP	NUMBER OF DOSES	Route	NDC	CVX CODES (for electronic exports)
TIV	Fluzone [®]	Sanofi Pasteur	0.25mL pre- filled syringe	0	6-35 months	1 or 2	IM**	49281-0112-25	140
			0.5mL pre-filled syringe	0	≥ 36 months	1 or 2	IM**	49281-0112-10	140
			0.5mL vial	0	≥ 36 months	1 or 2	IM**	49281-0112-50	140
			5.0mL multi- dose vial	25	≥ 6 months	1 or 2	IM**	49281-0390-15	141
TIV	Fluvirin [®]	Novartis	0.5mL pre-filled syringe	< 1.0	<u>></u> 4 years	1 or 2	IM**	66521-0115-02	140
TIV	Fluarix [®]	GlaxoSmithKline	0.5mL pre-filled syringe	0	<u>></u> 3 years	1 or 2	IM**	58160-0879-52	140
TIV	Afluria®	CSL Biotherapies (distributed by Merck)	0.5mL pre-filled syringe	0	<u>></u> 9 years¶	1	IM**	33332-0012-01	140
LAIV	FluMist [®] §	MedImmune	0.2mL sprayer	0	2-18 years§§	1 or 2	IN	66019-0110-10	110

Abbreviations: TIV=trivalent inactivated vaccine; LAIV=live-attenuated influenza vaccine; IM=intramuscular injection; IN=intranasal.

¶ Age indication per package insert is \geq 5 years; however, the Advisory Committee on Immunization Practices recommends that Afluria not be used in children aged 6 months through 8 years because of increased risk of febrile reactions noted in this age group with CSL's 2010 Southern Hemisphere TIV. If no other age-appropriate, licensed inactive seasonal influenza vaccine is available for a child aged 5 through 8 years who has a medical condition that increases the child's risk for influenza complications, Afluria can be used; however, vaccination providers should discuss with the parents or caregivers the benefits and risks of influenza vaccinations with Afluria before administering the vaccine. Afluria may be used in persons aged \geq 9 years.

§ FluMist is shipped refrigerated and stored in the refrigerator at 35°F–46°F (2°C–8°C) after arrival in the vaccination clinic. The dose is 0.2 mL divided equally between each nostril. Healthcare providers should consult the medical record, when available, to identify children aged 2 through 4 years with asthma or recurrent wheezing that might indicate asthma. In addition, to identify children who might be at greater risk for asthma and possibly at increased risk for wheezing after receiving LAIV, parents or caregivers of children aged 2–4 years should be asked: "In the past 12 months, has a health-care provider ever told you that your child had wheezing or asthma?" Children whose parents or caregivers answer "yes" to this question and children who have asthma or who had a wheezing episode noted in the medical record within the past 12 months should not receive FluMist.

§§ FluMist is indicated for healthy, non-pregnant persons aged 2 through 49 years. Persons who care for severely immunosuppressed persons who require a protective environment should not receive FluMist given the theoretical risk for transmission of the live-attenuated vaccine virus.

^{*}Vaccination providers should consult Food and Drug Administration-approved prescribing information for 2012-2013 influenza vaccines for the most updated information, including indications, contraindications, and precautions.

^{**}For adults and older children, the recommended site of vaccination is the deltoid muscle. The preferred site for infants and young children is the anterolateral aspect of the thigh.