



Influenza A (H1N1)

2009 Monovalent Vaccine

Pocket Information Guide

Further information on pandemic (H1N1) influenza can be found at www.cdc.gov/h1n1flu

Indications

Unless local or state conditions and/or vaccine availability specify otherwise, the need for the influenza A (H1N1) 2009 monovalent vaccination for children and adults is based on the following priority groups (group a, then b, then c):

- a.
 - i. Age 6 months through 24 years
 - ii. Age 25 through 64 years with any of the following conditions: chronic pulmonary (including asthma), cardiovascular (excluding hypertension), renal, hepatic, cognitive, neurologic/neuromuscular, hematologic, or metabolic (e.g., diabetes) disorders; immunosuppression, including that caused by medications or HIV; long-term aspirin therapy (applies to a child or adolescent age 6 months through 18 years)
 - iii. Being pregnant during the influenza season
 - iv. All healthcare and emergency medical services personnel
 - v. All adults, children, and teens who are household contacts or caregivers of infants younger than age 6 months.
- b. All other (e.g., healthy) adults ages 25 through 64 years
- c. Adults ages 65 years and older

Contraindications and Precautions

Screen all patients for contraindications and precautions to influenza A (H1N1) vaccine:

Contraindications:

- * Do not give influenza A (H1N1) vaccine to a person who has had a serious reaction (e.g., anaphylaxis) after ingesting eggs or after receiving a previous dose of influenza vaccine or an influenza vaccine component. For a list of vaccine components, go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
- * Do not give live attenuated influenza vaccine (LAIV; nasal spray) to pregnant women; children younger than age 2 years; children age 2 through 4 years who have experienced wheezing or asthma within the past 12 months, based on a healthcare provider's statement; children or adults with any of the conditions described in 1.a.ii. above, or to children or adults who received seasonal LAIV at any time within the preceding 4 weeks, including the date of the current visit.

Precautions:

- * Moderate or severe acute illness with or without fever.
- * History of Guillain-Barré syndrome within 6 weeks of a previous influenza vaccination.
- * For LAIV only, close contact with an immunosuppressed person when the person requires protective isolation.

Vaccine Dosing and Administration

* **MIV:** Administer injectable inactivated H1N1 vaccine intramuscularly in the vastus lateralis for infants (and toddlers lacking adequate deltoid mass) or in the deltoid muscle (for older children, and adults). Use 22-25 g needle.

Needle length appropriate to person's age and body mass:

- * Infants 6 through 11 months: 1"
- * Children 1 through 2 yrs: 1-1 ¼"
- * Children 3 yrs and older: 1-1½"

Dosage amount:

- * 0.25 mL if age 6-35 months
- * 0.5 mL if age 3 years or older

Choose vaccine according to patient's age:

- * Sanofi Pasteur: 6 mos and older
- * Novartis Vaccines and Diagnostics: 4 yrs and older
- * CSL Limited: 18 yrs and older

*(Note: A 5/8" needle may be used for patients weighing less than 130 lbs (<60kg) for injection in the deltoid muscle **only** if the skin is stretched tight, subcutaneous tissue is not bunched, and the injection is made at a 90-degree angle.)*

- * **LAIV:** Give 0.2 mL (0.1 mL sprayed into each nostril while patient is in upright position) to healthy, non-pregnant persons ages 2 through 49 years.
- * **Children through 9 years of age need a second dose of H1N1 vaccine 4 weeks after the first dose.**

Side Effects

Severe Problems:

- * **Life threatening allergic reactions to vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the shot.**
- * **In 1976, an earlier type of inactivated swine flu vaccine was associated with cases of Guillain-Barré Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS. LAIV has not been linked to GBS.**

Mild Problems:

The risks for 2009 H1N1 LAIV and inactivated 2009 H1N1 vaccine are expected to be similar to those from seasonal LAIV and seasonal inactivated flu vaccine:

2009 H1N1 LAIV:

Some children and adolescents 2-17 years of age have reported:

- * Runny nose, nasal congestion or cough
- * Headache and muscle aches
- * Abdominal pain or occasional vomiting and diarrhea
- * Fever
- * Wheezing

Some adults 18-49 years of age have reported:

- * Runny nose or nasal congestion
- * Cough, chills, tiredness/weakness
- * Sore throat
- * Headache

2009 H1N1 MIV:

- * Soreness, redness, tenderness or swelling where the shot was given
- * Headache, muscle aches
- * Fainting (mainly adolescents)
- * Fever
- * Nausea

Talking Points with Patients

- * 2009 H1N1 influenza (also called Swine Flu) is caused by a new strain of influenza virus, different than the seasonal flu.
- * Most people have little or no immunity to 2009 H1N1 flu.
- * Like other flu viruses, 2009 H1N1 spreads from person to person through coughing, sneezing, and sometimes through touching objects contaminated with the virus.
- * 2009 H1N1 influenza vaccines are made just like seasonal flu vaccines.
- * 2009 H1N1 influenza vaccines will not prevent "influenza-like" illnesses caused by other viruses.
- * 2009 H1N1 influenza vaccines will not prevent seasonal flu. A seasonal flu vaccine is needed to protect against the seasonal flu.
- * Unvaccinated healthy people who get influenza can spread their infection to others who are most vulnerable to its complications.