Influenza Vaccination Provider Toolkit

Updated March 2021
## Checklist timeline

<table>
<thead>
<tr>
<th>Due</th>
<th>Action</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Now</td>
<td>Obtain access to the Australian Immunisation Register (AIR) through PRODA. Further information can be found <a href="#">here</a>.</td>
<td>✔️</td>
</tr>
</tbody>
</table>
| By mid-March      | Discard previous year influenza vaccine stock and record on online ordering system (note some influenza vaccines expire before March) \[Identify all children 6 months to < 5 years and at-risk patients eligible for NIP vaccination programs.]
|                   | Check your fridge capacity to store the amount of vaccines you will need.                                                                                                                                 | ✔️       |
|                   | Check for email from NSW Vaccine Centre informing you it is time to check your pre-allocation order (GPs and Aboriginal Community Controlled Health Organisations), or time to pre-order (other providers) on the online ordering system. Acknowledge your pre-allocation order on online ordering system and revise down if you do not have adequate fridge storage space. Call the NSW Vaccine Centre on 1300 656 132 to discuss any queries. | ✔️       |
| 1 April           | Send communications to all patients reminding them of the importance of influenza vaccination from April / May onwards. Advise patients of the relative timing of receiving an influenza and COVID-19 vaccine based on the latest ATAGI advice. | ✔️       |
| Mid-April         | Check that all staff are trained in vaccine cold chain management (including receipt of vaccine deliveries). The NSW Health Vaccine Storage and Cold Chain Management online training module should be used to facilitate staff education and equip staff to effectively manage the cold chain. \[Acknowledge receipt of your first delivery on the online ordering system so you will be able to place your next order when required. Only order enough stock for use in a maximum 4-week period.\]
|                   | Send reminder messages to pre-identified patients advising of the influenza vaccination arrangements.                                                                                                                                                              | ✔️       |
|                   | Display influenza campaign posters in your clinic.                                                                                                                                                                                                            | ✔️       |
| Late April onwards| Commence influenza vaccination clinics.                                                                                                                                                                                                                       |          |
|                   | Report all vaccinations to the AIR.                                                                                                                                                                                                                           |          |
|                   | Report all adverse events following immunisation to your local public health unit on 1300 066 055.                                                                                                                                                            |          |
| Mid-May           | Review patient vaccine uptake – send reminders to patients who have not attended for vaccination. Reorder vaccines according to stock on hand and residual demand, taking into consideration the amount of 2020 expired stock that you discarded at the end of last season. If demand for the vaccine exceeds your last order, create a wait list for patients, so they know they can be vaccinated when you receive your next delivery | ✔️       |
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Introduction

There has been exceptionally high demand for the influenza vaccine across Australia in recent years with over 2.7 million doses of National Immunisation Program (NIP) influenza vaccine distributed during 2020 in NSW alone. NSW Health has developed this toolkit to assist providers with managing roll-out and implementation of their influenza vaccination program in 2021.

Influenza vaccines are also available on the private market. If you are a pharmacy in NSW, influenza vaccines must be ordered through your wholesaler. Patients who are eligible to receive influenza vaccine through the NIP should be encouraged to see their doctor.

2021 NIP influenza vaccines

The Australian Government, through the National Immunisation Program (NIP), provides a free seasonal influenza vaccine to those most at risk of complications from influenza. The following table provides information on the age-appropriate NIP vaccines for 2021:

Figure 1. 2021 Influenza vaccines available under the NIP by age

<table>
<thead>
<tr>
<th>Quadrivalent (QIV) vaccines</th>
<th>Vaxigrip Tetra® 0.50 mL (Sanofi)</th>
<th>Fluarix® Tetra 0.50 mL (GSK)</th>
<th>Afluria® Quad 0.50 mL (Seqirus)</th>
<th>Fluad® Quad 0.50 mL (Seqirus)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered age group</td>
<td>&lt;6 months</td>
<td>&lt;5 years</td>
<td>5-64 years</td>
<td>65 years and over</td>
</tr>
<tr>
<td>&lt;6 months</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
</tr>
<tr>
<td>6 months to &lt;5 years</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
</tr>
<tr>
<td>5-64 years</td>
<td>✗️</td>
<td>✗️</td>
<td>✗️</td>
<td>✗️</td>
</tr>
<tr>
<td>65 years and over</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
</tr>
</tbody>
</table>

Ticks indicate age at which a vaccine is registered and available. Shaded boxes represent funding under the NIP.

1 Funding only for Aboriginal and Torres Strait Islander people, pregnant women and people who have certain medical conditions.
2 Adjuvant QIV preferred over standard QIVs.

Before administering an influenza vaccine, CHECK you have the correct vaccine for the person’s age. Ages are identified on the syringe.

- The QIV Fluad® Quad (Seqirus) contains an adjuvant and is recommended for people ≥65 years of age over other available QIVs.
- Vaxigrip Tetra® and Fluarix® Tetra can be used for people from 6 months of age and are for the universal 6 month to <5 year program and for NIP eligible medically at risk patients 5 years to 64 years.
- Afluria® Quad is registered for 5 years and over.

Influenza vaccines are also available on the private market. In 2021 Fluad® Quad vaccine is the only influenza vaccine available for people aged 65 and over and is not available for private purchase.
Quadrivalent (QIV) influenza vaccines

There are two main types of influenza that cause disease in humans: A and B. Currently there are two influenza A subtypes and two influenza B lineages that are circulating globally.

<table>
<thead>
<tr>
<th>Influenza A – two subtypes</th>
<th>Influenza B – two lineages</th>
</tr>
</thead>
<tbody>
<tr>
<td>A/H1N1pdm09</td>
<td>Washington</td>
</tr>
<tr>
<td>A/H3N2</td>
<td>Phuket</td>
</tr>
</tbody>
</table>

Quadrivalent vaccines (QIV) protect against viruses for both influenza A subtypes and both influenza B lineages.

The composition of influenza vaccines for the Southern Hemisphere is reviewed by the World Health Organization annually in September, and then subsequently determined by the Australian Influenza Vaccine Committee (AIVC).

The AIVC recommended that the following viruses be used for influenza vaccines in the 2021 southern hemisphere influenza season:

Egg-based Quadrivalent influenza vaccines:
- a A/Victoria/2570/2019 (H1N1)pdm09-like virus
- a A/Hong Kong/2671/2019 (H3N2)-like virus
- a B/Washington/02/2019 (B/Victoria lineage)-like virus
- a B/Phuket/3073/2013 (B/Yamagata)-like virus.

Get prepared for 2021

2021 Influenza Vaccination campaign

Government programs promoting the 2021 Influenza Vaccination Program from April / May onwards ensure that people in the community are protected before winter and that providers have access to vaccine stocks. Providers may schedule clinics once supplies are received. All preparations may not be delivered at the same time. Once vaccines are received, providers should prioritise vaccinating pregnant women and people aged 65 years and over.

For pharmacies and practices that will be ordering influenza vaccines through their wholesaler, it is recommended that influenza vaccines be administered from mid-April/May onwards in accordance with the advice provided in the “Timing of vaccination” section in this Toolkit.

Government funded vaccine ordering

Based on provider advice in 2020, a pre-allocation system for the first order will replace the previous vaccine pre-order system for GPs and Aboriginal Community Controlled Health Organisations. Providers must confirm the quantity of their initial shipment through the online ordering system. Pre-allocation orders are now open for confirmation. You must confirm your pre-allocation shipment for it to be dispatched from the warehouse.

Deliveries will commence around late March / early April.

If you do not have an online account to order your vaccines, contact your public health unit on 1300 066 055 to apply for a vaccine account. Faxed orders will not be accepted.

Due to the large volume of orders at the beginning of the season, it takes approximately four weeks for the NSW Vaccine Centre to deliver all first orders. The checklist timeline at the front of this Toolkit will assist you to prepare for your influenza vaccination program.
Key points to consider when you confirm your pre-allocated order:

1. **Calculate how many vaccinations your service can provide each day.** Review the average number of patients each nurse and GP can vaccinate each day your practice is open, plus add a buffer of several days.

2. **Check your vaccine fridge storage space.** You may need to source an additional purpose-built vaccine specific fridge for additional storage space to maintain adequate vaccine stock during the influenza program. Check with the manufacturer about your fridge’s vaccine storage capacity. Remember that vaccines must remain in their original packaging. If you have submitted an EOI to administer COVID-19 vaccines, ensure that you have fridge capacity for both influenza and COVID-19 vaccines at approximately the same time.

3. **Review your patient age cohort.** For example, how many patients are aged 65 years and over, children aged 6 months to less than 5 years, Aboriginal people aged 6 months and over, pregnant, and medically at-risk individuals? Order vaccines appropriate to your patient age cohorts.

4. **Consider the number of 2020 influenza vaccines your practice discarded.**

5. **You will be able to confirm your allocation and you can reduce your allocation if you do not have fridge capacity to store the vaccines.**

**When placing subsequent orders**

How many vaccines can your practice feasibly administer each week, and order regularly thereafter, based on the number of remaining eligible patients?

Only order sufficient vaccines for use in a maximum 4-week period. Remember that children aged under 9 years of age require 2 doses at least 4 weeks apart in their first year of influenza vaccination.

Keep in mind that the demand for influenza vaccines will decrease after the first 4-6 weeks of the program.

**Providers should aim for no more than two orders per month.**

**Online ordering system messaging**

Messages regarding changes to influenza vaccine stock availability and any ordering restrictions will be regularly posted on the online ordering system. It is important to regularly check for new messages during the influenza vaccination program.

**Vaccine delivery**

**NIP Program**

Deliveries of funded vaccine will commence around **late March / early April 2021**, depending on the delivery of vaccines into the NSW Vaccine Centre. Advice on delivery dates for private market influenza vaccines should be sought directly from wholesalers.

Upon receipt of your delivery, you must acknowledge your order on the online ordering system. You will not be able to place another order until this is completed.

Providers must clearly label their influenza vaccine stock to minimise the risk of inappropriate administration to an incorrect age-group. To support providers, vaccine basket stickers will be sent with influenza vaccine deliveries (Figure 2).

**Pharmacies**

Please check with your regular wholesaler on expected delivery dates.
Figure 2. 2021 influenza vaccine basket stickers
Which patients should you target for funded vaccines?

Identify your at-risk and eligible patients and remind them about the importance of their annual influenza vaccination. In addition to your existing practice software recall/reminder process, consider using your practice webpage, social media (Facebook/Twitter) and your practice noticeboards to promote your influenza vaccination program.

Aboriginal and Torres Strait Islander people

Influenza vaccine is funded under the NIP for **ALL** Aboriginal and Torres Strait Islander people from 6 months of age and over.

Aboriginal children under 9 years of age should have two doses at least 4 weeks apart in the first year they are vaccinated. Both doses are funded.

See figure 1 for influenza vaccines available under the NIP, by age.

**Pneumococcal vaccine** (see [NSW Immunisation Schedule](#)) and **Zostavax** (70-79 years of age) vaccines should also be offered to eligible Aboriginal people at the time of their influenza vaccination.

Children 6 months to less than 5 years

Influenza vaccine is funded under the NIP for **ALL** children in this age group. Two doses are recommended in the first year of vaccination (at least 4 weeks apart). Both doses are funded.

**Childhood vaccines**: In 2021, two childhood vaccines will be available to order:

- Vaxigrip Tetra® (for universal childhood program 6 months to less than 5 years).
- Fluarix® Tetra (for universal childhood program 6 months to less than 5 years).

Even healthy children are vulnerable to catching influenza. In 2019, a large number of children who were hospitalised due to influenza, and those who died from influenza, had not been offered a influenza vaccine by their doctor or specialist. Since 2018, free influenza vaccine has been available for all children aged 6 months to less than 5 years with only 40% of NSW children recorded with at least 1 dose of influenza vaccine on the Australian Immunisation Register (AIR) in 2020. It is important to increase this uptake further in 2021 to protect all young children.

Children who need pneumococcal and influenza vaccine can have them at the same visit. The small increased risk of fever and febrile convulsions should be discussed with parents and carers, and the option provided of administering them at least 3 days apart.

**Providers should consider active initiatives to improve vaccine uptake in their child cohort.** Use reminder/recall systems to send SMS messages or emails to parents of children in your practice advising them of the opportunity to have their child vaccinated.

NSW Health has additional resources and information available such as an [evidence review](#), [posters](#) and [patient brochures](#).

Pregnant women

Influenza vaccination during pregnancy has been shown to be safe and effective. Vaccination during pregnancy protects pregnant women from influenza and its complications in pregnancy. It is also the best way to protect newborns against influenza during the critical early months of life.

**Did you know?**

Offering vaccine, or recommending vaccination, by an antenatal care provider is one of the strongest predictors of vaccine uptake by pregnant women and should be a routine part of antenatal care.
The timing of vaccination depends on the time of the year, vaccine availability and the anticipated duration of immunity. Influenza vaccine can be given at any stage of pregnancy and can be given at the same time as pertussis vaccination (between 20 and 32 weeks) but may be given earlier and should not be delayed if the winter influenza season has begun or is imminent. Ensure that the influenza vaccine is recorded on the woman’s antenatal record card and Australian Immunisation Register (AIR). See Figure 1 for vaccines available under the NIP. **Women who receive influenza vaccine before becoming pregnant should be revaccinated during pregnancy to protect the unborn infant.**

Additional information is available [here](#).

**Medically at-risk patients**

Influenza vaccine is funded under the NIP for children 5 years and over and adults with medical risk factors such as severe asthma, lung or heart disease, low immunity or diabetes. Refer to the digital *Australian Immunisation Handbook* for more information.

Children under 9 years of age should have two doses at least 4 weeks apart in the first year they are vaccinated. See figure 1 for vaccines available under the NIP, by age.

**People aged 65 years of age and over**

In 2021 Fluad® Quad, an adjuvanted quadrivalent vaccine, will be the only vaccine provided under the NIP for people ≥65 years of age. Fluad® Quad has been specifically designed to create a greater immune response amongst the elderly, who are known to have a weaker response to immunisation.

Did you know?

Fluad® Quad should be given in preference to other available QIVs as it has been specifically designed to create a greater immune response amongst the elderly, who are known to have a weaker response to immunisation.

All available influenza QIV vaccines can also be used amongst people aged 65 years and over. However, the specially-formulated QIV is the only funded vaccine available for this cohort through the NIP and is recommended in preference to other QIVs for this age group where available.

If a person aged 65 and over has been vaccinated with another QIV in the same year, revaccination with Fluad® Quad is not routinely recommended.

The risk of mild to moderate injection site reactions may be greater for those aged 65 years and over receiving Fluad® Quad. Fluad® Quad is not registered for use in people younger than 65 years – its effectiveness and safety has not been assessed in younger populations. Note that after shaking, the normal appearance of Fluad® Quad is a milky-white suspension.

**Once-off Prevenar® 13 (70 years and over) and Zostavax® (70-79 years of age) vaccines should also be offered to eligible people at the time of their influenza vaccination.**

**Health care workers and students**

NSW Health policy directive [PD2020_017 Occupational Assessment Screening and Vaccination Against Specified Infectious Diseases](#) requires health care workers and students in Category A high risk positions to receive the influenza vaccine annually by 1 June. NSW Health employees will be offered vaccine in their workplace, however if they choose to be vaccinated by their GP they will need to purchase private vaccine unless they are eligible for NIP vaccine. For more information refer to section *Annual Influenza Vaccination Program.*
Other patients

All patients aged 5 years and over who are not eligible for funded influenza vaccine should be advised that they can purchase private market influenza vaccine. These vaccines are available from GPs and authorised pharmacists (for people aged 10 years and over).

Optimum time for vaccination

Annual vaccination before the onset of each influenza season is recommended. The period of influenza circulation is typically June to September in NSW.

The Australian Technical Advisory Group on Immunisation (ATAGI) advises that optimal protection occurs within the first three to four months following vaccination. Therefore, vaccination from mid-April/May onwards is likely to result in peak immunity during the influenza season.

It is never too late to vaccinate, since influenza can circulate all year round. Vaccination should continue to be offered as long as influenza viruses are circulating and a valid vaccine (before expiration date) is available. Some vaccine brands now have an expiry date of February 2022.

Other considerations for vaccine timing:

• Pregnant women should be vaccinated at the earliest opportunity during pregnancy. In accordance with the Australian Immunisation Handbook, the 2021 influenza vaccine can be given to pregnant women if the 2020 vaccine was given earlier in the pregnancy. Women under the care of a private obstetrician should have their influenza vaccination status assessed as they may not have received it from their obstetrician.
• People travelling to a country where influenza is circulating can be vaccinated two weeks before travel, at any time of the year if they haven’t already received the 2021 vaccine.
• Young children aged 6 months to under nine years require two doses in their first year of vaccination (given at least four weeks apart). Vaccinate children as soon as stock becomes available. Should a child not receive two doses in their first year, they only require one dose the following year.

ATAGI advice on influenza and COVID-19 vaccines

• Routine scheduling and giving of an influenza vaccine with a COVID-19 vaccine on the same day is not recommended.
• The preferred minimum interval between a dose of seasonal influenza vaccine and a dose of Pfizer or Oxford/AstraZeneca is 14 days.
• There may be circumstances where co-administration or near administration (within days) of an influenza vaccine with a COVID-19 vaccine may be considered.
• There is no particular requirement regarding the order of receiving a dose of influenza vaccine and either the first or second dose of a COVID-19 vaccine.
• If an influenza vaccine has been inadvertently co-administered or given within a shorter interval than 14 days with a COVID-19 vaccine, revaccination with either vaccine is not considered necessary.

When scheduling influenza and COVID-19 vaccines, consider the following principles:

• People in phase 1a for COVID-19 vaccination should receive the COVID-19 vaccine as soon as it is available to them, and then receive their influenza vaccine.
• People in later phases for COVID-19 vaccination should receive their influenza vaccine as soon as it is available, and then receive their COVID-19 vaccine when it becomes available to them.

Further information can be found here.
Reporting to the Australian Immunisation Register

The Australian Government has advised that Influenza vaccinations must be reported to the Australian Immunisation Register (AIR) from 1 March 2021 while other NIP vaccines must be reported form 1 July 2021. This will ensure complete vaccination records for your patients including the availability of this information in their My Health Record.

How to report influenza vaccinations to the AIR

There are two ways to record information on the AIR:

1. Use your practice management software (PMS). The details you enter will be able to be transferred from your PMS to the AIR.
   - Make sure you are using the latest version of your PMS so you have up to date vaccine codes (contact your software vendor for further information).
   - Ensure you select the correct vaccine that has been given to the patient.
2. Use the AIR website via PRODA.

PRODA

All Immunisation Providers are now required to link AIR through their business PRODA account. If you are currently using the authentication file method of accessing AIR it is recommended that you transition to PRODA (HPOS) access as soon as possible.

Information for organizations and PRODA can be found here.

Each individual that works in the organisation and requires AIR access will also need to register for an individual PRODA account.

To register as a vaccination provider with the AIR:

GPs: Information is available here.

Other providers: Complete the application form and submit the form to MOH-vaccreports@health.nsw.gov.au

Pharmacists: Follow the steps in the link below to register as a vaccination provider with the AIR:

1. Review the NSW Pharmacy Standards.
2. Complete the form IM004 Australian Immunisation Register Application to Register as a Vaccination Provider, to register the pharmacy.
3. Complete the NSW Pharmacist application to register as a vaccination provider with the Australian Immunisation Register. Each pharmacist that will be administering vaccinations at the pharmacy must complete this form.
4. Submit the forms to MOH-vaccreports@health.nsw.gov.au for processing. NSW Health will submit the approved applications to Services Australia.

Further information is available here.
Influenza vaccine effectiveness

Vaccine effectiveness refers to improving a range of clinical outcomes such as disease incidence, hospitalisation or attendance at a GP practice.

The effectiveness of the influenza vaccine varies from season to season for a variety of reasons, mainly related to the match with the circulating influenza viruses that are infecting people.

In general, influenza vaccine effectiveness has been found to vary between 40-60 per cent. This means that on average, a vaccinated person is 40-60 per cent less likely to experience a negative health outcome, for example developing influenza and attending a GP practice or being hospitalised, than an unvaccinated person. The effectiveness of the vaccine may depend on other factors such as the age group affected and the health outcome being measured (e.g. hospitalisation or attendance at a GP).

Vaccine effectiveness is generally lower in older people than in younger adults and children.

The small number of influenza cases reported in 2020 makes it difficult to undertake meaningful analysis to estimate vaccine effectiveness. In previous years, the influenza vaccine in Australia has been estimated to be 68 per cent effective in preventing presentation at the GP or outpatient department and also 58 per cent effective in preventing hospitalisation. A full report is available here.

A useful Australian Government resource Questions About Vaccination.

Patients with allergies

**Egg allergy:** is not a contraindication to influenza vaccine. People with an egg allergy, including anaphylaxis, can be safely vaccinated with influenza vaccines. People with a history of anaphylaxis to egg should:

- receive their influenza vaccine in a medical facility with staff experienced in recognising and treating anaphylaxis
- remain under supervision in the clinic for at least 30 minutes after vaccination
- receive a full age-appropriate vaccine dose; do not split the dose into multiple injections (for example, a test and then the rest of the dose)

For further information please refer to the Australasian Society of Clinical Immunology and Allergy (ASCIA), Vaccination of the Egg-allergic Individual Guidelines

For children with severe egg allergy, vaccination under medical supervision can also be arranged at the NSW Immunisation Specialist Service by calling 1800 679 477.

**Latex allergy:** All influenza vaccines supplied under the NIP in 2021 are latex free.

*An influenza vaccination decision aid* is available at Appendix 1 to assist you with conducting pre-vaccination assessment with your patients.
**Reporting adverse events following immunisation**

An adverse event following immunisation (AEFI) is any untoward medical occurrence which follows immunisation and which does not necessarily have a causal relationship with the usage of the vaccine. It may be related to the vaccine itself or to its handling or administration. AEFIs are notifiable conditions under the *NSW Public Health Act* (2010). Suspected cases are to be notified by medical practitioners and other health professionals on diagnosis to your local public health unit on 1300 066 055.

To assist you to identify which patients experience an adverse event following immunisation, [SmartVax](#) is a program that extracts data from your practice software and sends SMS messages to your patients following vaccination.

Information is also available on the [NSW Health website](#)

NSW Health sends daily reports to the Therapeutic Goods Administration (TGA) of all adverse event reports received.

**Influenza vaccine safety**

Data on the safety of influenza vaccines is continuously monitored by the TGA and [AusVaxSafety](#). There is extensive surveillance that demonstrates that the influenza vaccines now used in Australia have an excellent safety profile. Weekly updates are available on the [AusVaxSafety website](#)

**Vaccine storage and cold chain management**

Vaccines must be stored within the recommended temperature range of +2°C to +8°C at all times. Correct storage and handling of vaccines is vital to maintaining vaccine potency and ensuring vaccines are safe and effective for patient administration.

The National Vaccine Storage Guidelines: [Strive for 5](#) (current edition) provides information and advice for vaccine storage management.

In the event that vaccine storage temperatures have been outside of the recommended range of +2°C to +8°C, you should follow your cold chain breach protocol. All cold chain breaches must be reported to your local public health unit on 1300 066 055. Your public health unit will provide advice regarding vaccine disposal and cold chain management.

For further information and resources on managing vaccine storage and cold chain breaches, including a cold chain training module for all providers, visit the NSW Health website: [Vaccine storage and cold chain management](#).

**Where you can find more information**

- Commonwealth website
- NCIRS website
- NSW Immunisation Specialist Service (NSWISS) website
- ATAGI statement 2021
- NSW Health influenza page

Public Health Unit contact number 1300 066 055
(this will connect you to the PHU in the area you are calling from).
Appendix 1

Influenza vaccination decision aid – adults

**INFLUENZA VACCINATION DECISION AID**

1. Have you had a flu vaccination since March 2021?
   - NO
   - YES

   2. Have you had anaphylaxis after a flu vaccination or to any component of the vaccine?
      - NO
      - YES

      3. Do you currently have a fever ≥38.5°C?
         - NO
         - YES

         4. Are you allergic to eggs?
            - NO
            - YES

            5. Are you immunocompromised?
               - NO
               - YES

               6. Do you have a past history of Guillain-Barre Syndrome?
                  - NO
                  - YES

                  7. Have you ever had a severe reaction after any vaccination?
                     - NO
                     - YES

                     8. Are you ≥65 years of age?
                        - NO
                        - YES

                           Patients aged ≥ 65 should receive Flumad Quad which is specifically for this age group.

                           The patient may be able to receive the flu vaccine however you will need to consider the reaction, possible cause and sequelae. Expert advice is available from NSWIS 1800 679 477.

                           The patient may be able to receive the flu vaccine however expert advice will need to be sought from the treating specialist or an immunisation expert such as NSWIS 1800 679 477.

                           Those who have had a haematopoietic stem cell transplant or solid organ transplant require 2 doses in their first year of vaccination. Refer to the Immunisation Handbook or seek advice from the patient’s specialist or NSWIS 1800 679 477.

                           You should delay administering the flu vaccine until the person no longer has a fever.

                           This patient can be vaccinated however dependent on allergy may need to be vaccinated in an alternate setting – see recommendations in the Immunisation Handbook or contact NSWIS 1800 679 477.

                           This patient should not receive the influenza vaccine.

                           This patient should not be vaccinated again. Only 1 influenza vaccine is required each year (unless it is a child < 9 years of age and it is the first year they are being vaccinated).
Appendix 2

2021 influenza vaccines poster (with images)

2021 Influenza Vaccine presentation and free vaccine eligibility

6 MONTHS TO LESS THAN 5 YEARS

**Vaxigrip Tetra® and Fluarix® Tetra**
Registered for use in people aged 6 months and over:
- For universal 6 months to less than 5 years influenza vaccination program
- Give two doses one month apart for children aged 6 months to less than 5 years if first year of receiving flu vaccine
- Available in 10 and single packs
- Children should receive a full dose (i.e. not a half dose)
- NIP vaccines do NOT contain latex

5 YEARS TO 64 YEARS

**Vaxigrip Tetra®, Fluarix® Tetra and Afluria® Quad**
- People 5 years and over with medical risk factors predisposing to severe influenza
- All Aboriginal persons 5 years to 64 years of age
- Pregnant women
- Give two doses one month apart for children aged 5 years to less than 9 years if first year of receiving flu vaccine
- Vaxigrip Tetra and Fluarix Tetra are available in 10 and single packs. Afluria Quad is only available in a 10 pack
- Children should receive a full dose (i.e. not a half dose)
- NIP vaccines do NOT contain latex
- Do not use Afluria Quad for children less than 5 years of age

65 YEARS AND OVER

**Fluad® Quad**
- Adjuvanted quadrivalent vaccine
- All persons aged 65 years and over
- Milky-white suspension
- Available in 10 packs
- NIP vaccines do NOT contain latex
- Do not use in pregnant women or children

For more information visit health.nsw.gov.au/immunisation