

Influenza Vaccination Provider Toolkit

Updated 1 May 2019



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SHPN (HPNSW) 190210
ISBN 978-1-76081-124-2

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April 2019



Checklist timeline

Due	Action	Complete ✓
By mid-March	Discard previous year flu vaccine stock (note some flu vaccines expire before March)	
	Identify at-risk and eligible patients for NIP and state-funded (6 months to < 5 years) vaccination programs - calculate how many vaccines are required for each cohort for your first order	
	Check your fridge capacity to store the amount of vaccines you will need	
	Place your first funded vaccine order (order enough for the first 3 weeks provided you have adequate fridge storage space)	
	Contact wholesalers to order private market vaccine	
1 April	Send communications to all patients reminding them of the importance of flu vaccination and commencement of the program on 1 May	
Mid-April	Check that all staff are trained in vaccine cold chain management (including receipt of vaccine deliveries)	
	First funded vaccine order deliveries received	
	Send reminder messages to pre-identified patients advising of your practice flu vaccination arrangements	
	Display flu campaign posters in your clinic	
Late April onwards	Commence flu vaccination clinics	
	Report all vaccinations to the Australian Immunisation Register (AIR)	
	Report adverse events following immunisation to your local public health unit	
mid-May	Review patient vaccine uptake - send reminders to patients who have not attended for vaccination and reorder according to stock on hand and residual demand	

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Introduction

There was exceptionally high demand for the flu vaccine across Australia in 2018 with over 2.3 million doses of National Immunisation Program (NIP) flu vaccine distributed in NSW alone. NSW Health has developed this toolkit to assist providers with managing roll-out and implementation of their flu vaccination program in 2019, based on your feedback.

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

2019 NIP Flu vaccines

The following table provides information on the age-appropriate **NIP vaccines** for 2019:

2019 INFLUENZA VACCINES AVAILABLE UNDER THE NIP, BY AGE					
 Before administering an influenza vaccine, CHECK you have the correct vaccine for the person's age. Ages are identified on the syringe.					
Registered age group	Quadrivalent vaccines ¹				Trivalent vaccine ² (for age ≥65 years only)
	FluQuadri Junior 0.25 mL (Sanofi)	FluQuadri 0.50 mL (Sanofi)	Fluarix Tetra 0.50 mL (GSK)	Afluria Quad 0.50 mL (Seqirus)	Fluad 0.50 mL (Seqirus)
<6 months	✗	✗	✗	✗	✗
6 to 35 months (<3 years)	✓	✗	✓	✗	✗
≥3 years to <5 years	✗	✓	✓	✗	✗
≥5 years to <65 years	✗	✓	✓	✓	✗
≥65 years	✗	✓	✓	✓	✓ (recommended)

¹ The QIVs cover two influenza A viruses: an A/Michigan/45/2015 (H1N1)pdm09-like virus and an A/Switzerland/8060/2017 (H3N2)-like virus; and two influenza B viruses: a B/Phuket/3073/2013-like virus and a B/Colorado/06/2017-like virus.

² The TIV is recommended for people aged 65 years and over and cover two influenza A viruses: the same A viruses covered by the QIVs; and one influenza B virus: a B/Colorado/06/2017-like virus.

Figure 1: 2019 Influenza vaccines available under the NIP by age

Note: Afluria Quad can be administered to people from 5 years of age (was previously 18 years and over) and Fluarix Tetra from 6 months of age (previously 3 years). Fluarix Tetra uses a 0.5mL dose for children aged 6 to 35 months. Do not give half a dose.

Influenza vaccines are also available on the private market. In 2019 Fluzone High Dose vaccine, which is registered for people aged 65 and over, is only available for private purchase.

What are Trivalent (TIV) and 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.

Influenza A – two subtypes	Influenza B – two lineages
A/H1N1pdm09	Victoria
A/H3N2	Yamagata

Trivalent influenza vaccines (TIV) contain viruses for both influenza A subtypes and one influenza B lineage.

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

The composition of flu vaccines for the Southern Hemisphere is reviewed in September each year by the World Health Organization, and then subsequently determined by the Australian Influenza Vaccine Committee.

Get prepared for 2019:

2019 Influenza Vaccination Campaign

Government programs promoting the 2019 Influenza Vaccination Program will commence on **1 May 2019** to ensure all providers have vaccine stocks. Providers may schedule clinics once supplies are received, however please note that all preparations may not be delivered at the same time. Once adult preparations are received, providers should prioritise vaccinating pregnant women.

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

Government Funded Vaccine ordering

Providers can place orders in the vaccine online ordering system from **11 March 2019** onwards at <https://nsw.tollhealthcare.com/> (deliveries will commence around mid-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.

The large volume of flu orders at the beginning of the season means that it takes around three weeks for the state vaccine centre to send out all first flu orders from the system. Flu orders will be open from 11 March 2019 but vaccines will not be delivered until around mid-April. Please refer to the Appendix 1 worksheet example to assist you with calculating your vaccine usage during the flu vaccination program. The Checklist timeline at the front of this Toolkit will assist you to prepare for your flu vaccination program.

You should consider the following issues **when placing your first flu order** such as:

- 1. Calculate how many vaccinations your service can provide each day and estimate how many vaccines are needed to maintain stock levels until the next delivery in three weeks’ time.**

For example, if you have one nurse immuniser who can vaccinate on average 50 patients/day and your practice operates 7 days/week, you will need to order 350 vaccines/week for **three weeks** in your initial order (i.e. 1,050 vaccines plus 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 flu program. Check with the manufacturer about your fridge's vaccine storage capacity.

3. Review your patient age cohort.

For example, how many patients does your practice have that are aged over 65, 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. Calculate how much vaccine you need for your remaining patient cohorts *before placing your next order*. A worksheet is provided in the Appendix 1 worksheet example to assist with calculating your vaccine usage.

When placing subsequent orders, remember to consider how many vaccines your practice can feasibly administer each week and order regularly thereafter, based on how many patients you estimate still need to be vaccinated. Remember that children aged under 9 years of age require 2 doses at least 4 weeks apart in their first year of flu vaccination.

Providers will be asked to report on how many vaccines they have in stock when placing all flu vaccine orders. The number of orders per month for flu vaccine is not restricted.

Online ordering system messaging

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

Vaccine delivery

NIP Program

Deliveries of funded vaccine will commence around **mid-April 2019**, depending on availability of vaccines from the Australian Government. Advice on delivery dates for private market flu vaccines should be sought from wholesalers.

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

Pharmacies

Please check with your regular wholesaler on expected delivery dates.

Figure 2: 2019 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 flu 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 flu vaccination program.

Aboriginal and Torres Strait Islander people

From 2019 flu 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.

Pneumovax 23 (50 years and over) and **Zostavax** (70-79 years of age) vaccines should also be offered to **eligible Aboriginal people** at the time of their flu vaccination.

Children 6 months to less than 5 years

Influenza vaccine is funded under the National Immunisation Program (NIP) for children in this age group who are Aboriginal or Torres Strait Islander, or who have a medical condition(s) that increases the risk for severe influenza. NSW Health will fund the vaccine for all other children aged 6 months to less than 5 years in 2019. Two doses are recommended in the first year of vaccination (at least 4 weeks apart). Both doses are funded.

Childhood vaccines: In 2019, three childhood vaccines will be available to order:

- FluQuadri Junior is the vaccine being supplied for all children 6 months to less than 3 years.
- FluQuadri is the vaccine being supplied for all children 3 years to less than 5 years.
- Fluarix Tetra may be used for children 6 months of age and older who have medical risk factors.

Note: Fluarix Tetra uses a 0.5mL dose for children aged 6 to 35 months.

Even healthy children are vulnerable to catching the flu. In 2018, a large number of children who were hospitalised due to the flu, and those who died from flu, had not been offered a flu vaccine by their doctor or specialist. NSW Health provided free flu vaccine for all children aged 6 months to less than 5 years with approximately 26% of children recorded on the Australian Immunisation Register as vaccinated in 2018. It is important to increase this uptake further in 2019 to protect all young children.

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, available at:

<https://www.health.nsw.gov.au/Infectious/Influenza/Pages/flu-vax-hcw-review.aspx> (evidence review)

<https://www.health.nsw.gov.au/Infectious/Influenza/Pages/default.aspx> (flu resources)

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, and is the best way to protect newborns against influenza during the critical early months of life. 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 (ideally at 28 weeks) but may be given earlier, and should not be delayed if the winter influenza season has begun or is imminent. Ensure that the flu vaccine is recorded on the woman's antenatal record card.

Refer to the Appendix 1 worksheet example to assist with ordering vaccines for this patient cohort.

Additional information is available at:

<https://www.health.nsw.gov.au/Infectious/Influenza/Pages/maternal-flu-immun-evidence.aspx>

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.

Medically at-risk patients

Flu vaccine is funded under the NIP for children and adults with medical risk factors such as severe asthma, lung or heart disease, low immunity or diabetes. Refer to The Australian Immunisation Handbook for more information at:

<https://immunisationhandbook.health.gov.au/vaccine-preventable-diseases/influenza-flu>

Children under 9 years of age with medical risk factors should have two doses at least 4 weeks apart in the first year they are vaccinated. Refer to the Appendix 1 worksheet example to assist with vaccine ordering for this cohort.

People ≥65 years of age

Fluad is a TIV and is the only enhanced vaccine provided under the NIP in 2019 for people ≥65 years of age (note that after shaking, the normal appearance of Fluad is a milky-white suspension).

Fluad 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 QIVs can also be used amongst people aged 65 years and over through the NIP. However, the specially-formulated TIV is recommended in preference to the QIVs for this age group where available. People aged 65 years and over should only receive a QIV **or** a TIV – not both.

Fluad contains an adjuvant which boosts the immune system's response to the vaccine and provides better protection for people aged 65 years and over.

Did you know?

Should a person ≥65 years of age advise you that they have already received a 2019 quadrivalent influenza vaccine, there is no need to administer a TIV.

The risk of mild to moderate injection site reactions may be greater for those aged 65 years and over receiving Fluad. Fluad is not registered for use in people younger than 65 years – its effectiveness and safety has not been assessed in younger populations.

Pneumovax 23 (65 years and over) and **Zostavax** (70-79 years of age) vaccines should also be offered to [eligible people](#) at the time of their flu vaccination.

Health care workers and students

NSW Health policy directive [PD2018_009 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 4 *Annual Influenza Vaccination Program*.

Other patients

All patients aged ≥ 5 years of age who are not eligible for funded flu vaccine should be advised that they can purchase private market flu vaccine. These vaccines are available from GPs and [authorised pharmacists](#) (for people aged 16 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 flu 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.

Other considerations for vaccine timing:

- Pregnant women should be vaccinated at the earliest opportunity during pregnancy. In accordance with the Australian Immunisation Handbook, the 2019 influenza vaccine can be given to pregnant women if the 2018 vaccine was given earlier in the pregnancy. Women under the care of a private obstetrician should have their flu vaccination status assessed as they may not have received it from their obstetrician.
- People travelling to a country where flu is circulating can be vaccinated two weeks before travel if they haven't already received the 2019 vaccine and it is in your fridge.
- Young children aged 6 months to under nine years require two doses in their first year of vaccination (given at least four weeks apart). Both of these doses are funded, so ideally 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.

Reporting to the Australian Immunisation Register

Providers should report all vaccinations (including flu vaccines) to the Australian Immunisation Register (AIR) which accepts data for people of all ages. This will ensure complete vaccination records for your patients including the availability of this information in the My Health Record.

How to report influenza vaccinations to the Australian Immunisation Register

There are three 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 site. You can record immunisation details using the Identify Individual and Record Encounter functions.
3. Complete the Australian Immunisation Register – immunisation encounter form.

The Department of Human Services (DHS) has published five AIR eLearning education modules to help vaccination providers understand how to access and use AIR site and record vaccination episodes. The five modules provide detailed steps and screen shots to help with:

- Registering and requesting access to the AIR site
- Accessing the AIR site for the first time
- Submitting information to the AIR
- Recording overseas immunisations
- Recording immunisation medical exemptions

The modules can be viewed at www.humanservices.gov.au/hpeducation

Additional information on the AIR is available at:

<https://www.humanservices.gov.au/organisations/health-professionals/services/medicare/australian-immunisation-register-health-professionals>

To register as a vaccination provider with the AIR: Complete the application form at:

<https://www.humanservices.gov.au/organisations/health-professionals/forms/im004> and forward it via email for the attention of the Manager of Immunisation at MOH-vaccreports@health.nsw.gov.au

Practice software: It is recommended that you check if your practice software needs to be updated to enable AIR reporting.

Pharmacist vaccinators are required to follow the steps in the link below to register as a vaccination provider with the AIR:

<https://www.health.nsw.gov.au/immunisation/Pages/Application-AIR-provider.aspx>

Flu 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, flu vaccine effectiveness has been found to vary between 30-60%. This means that on average, a vaccinated person is 30-60% less likely to experience a negative health outcome for example, developing the flu 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 2018 flu vaccine in Australia was estimated to be 68% effective in preventing presentation at the GP or outpatient department and also 58% effective in preventing hospitalisation. A full report is available at: [http://www.health.gov.au/internet/main/publishing.nsf/Content/CA086525758664B4CA25836200807AF9/\\$File/2018-Season-Summary.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/CA086525758664B4CA25836200807AF9/$File/2018-Season-Summary.pdf)

A useful Australian Government resource **Questions About Vaccination** is available that may help you answer patient questions and concerns about vaccination, particularly if patients have concerns that the flu vaccine gives them the flu. It is available at:

<https://beta.health.gov.au/resources/publications/questions-about-vaccination>

Flu vaccine safety

There is extensive surveillance that demonstrates that the influenza vaccines now used in Australia have an excellent safety profile, including [AusVaxSafety data](#).

More information on AusVaxSafety is available at:

<http://www.ncirs.org.au/ausvaxsafety/current-ausvaxsafety-surveillance-data>

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 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 vaccines supplied under the NIP in 2019 are latex free.

A *flu vaccination decision aid* is available at Appendix 2 to assist you with conducting pre-vaccination assessment with your patients.

Reporting adverse events following immunisation

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. More information is available at:

<http://www.smartvax.com.au/about-smartvax.html>

Adverse events following immunisation should be reported to your **local public health unit** on **1300 066 055**. Information is also available on the NSW Health website at:

<https://www.health.nsw.gov.au/immunisation/Pages/aefi.aspx>

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

Data on the safety of influenza vaccines is continuously monitored by the TGA and AusVaxSafety.

Weekly updates are available on the AusVaxSafety website at: www.ausvaxsafety.org.au

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:

<https://www.health.nsw.gov.au/immunisation/Pages/cold-chain-management.aspx>

Where you can find more information

Commonwealth website

<https://beta.health.gov.au/health-topics/immunisation>

NCIRS website

<http://www.ncirs.org.au/health-professionals>

NSW Immunisation Specialist Service (NSWISS) website

<http://www.ncirs.org.au/our-work/new-south-wales-immunisation-specialist-service-nswiss>

ATAGI statement 2019

<https://beta.health.gov.au/health-topics/immunisation>

NSW Health flu page

<https://www.health.nsw.gov.au/Infectious/Influenza/Pages/default.aspx>

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

Appendix 1: Funded vaccine ordering worksheet – example

A template worksheet in an Excel spreadsheet is provided with formulas to help calculate your usage and is available at <https://www.health.nsw.gov.au/immunisation/Pages/flu.aspx>

To calculate the number of vaccines you should order:

1. Enter the total number of patients in each cohort seen by your practice (Column C)
2. Enter the number of patients your clinic is able to vaccinate in a week (Column D row 18)

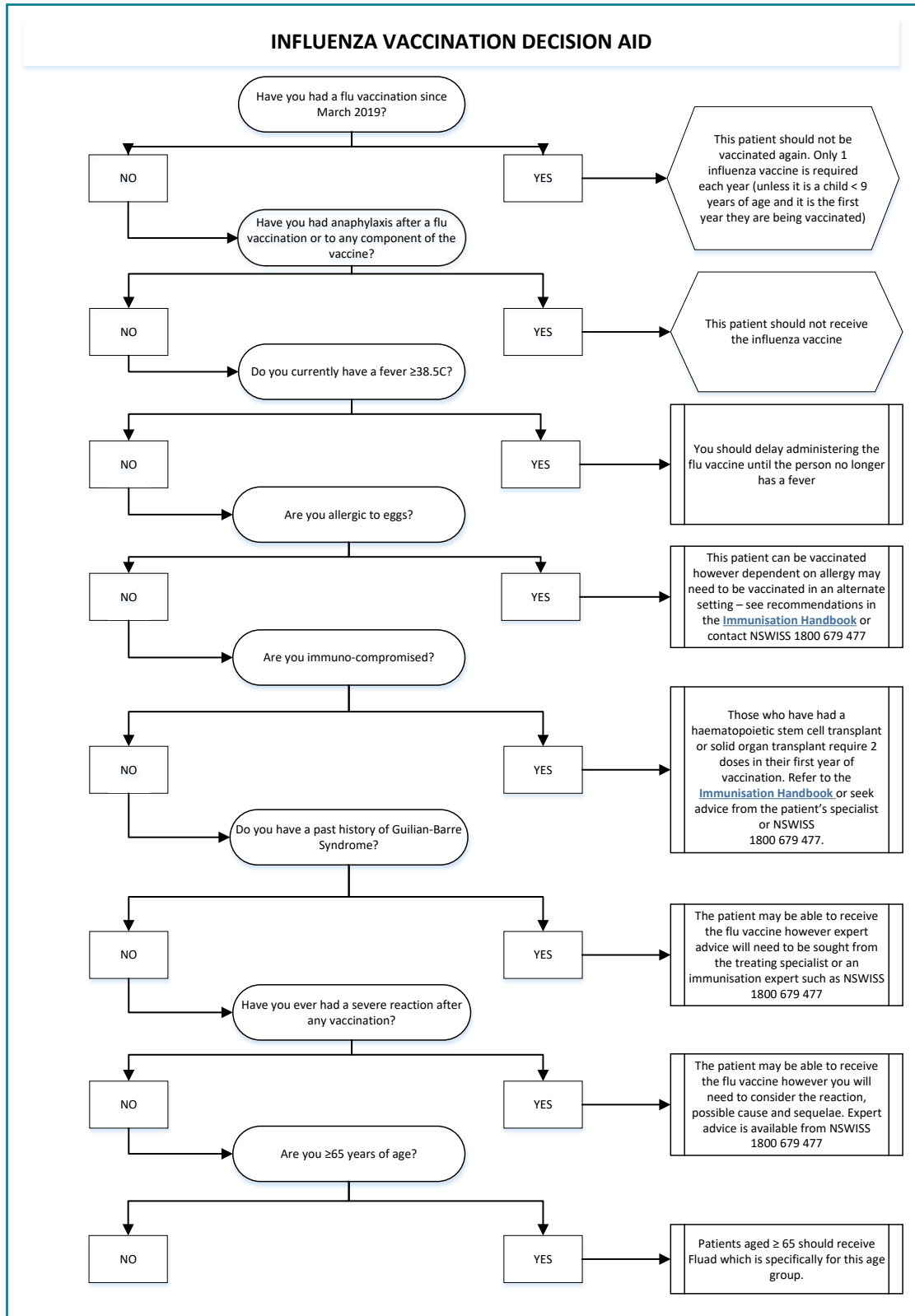
The spreadsheet will then calculate for you

3. The number of vaccines needed to vaccinate the whole cohort (column E)
4. The number of vaccines you should order in your first (or pre-season) order (column F)


Age cohort	Vaccine(s)	Number in each cohort	Number to vaccinate each week	Total number of doses needed to vaccinate each cohort	First vaccine order – order 3 weeks' worth
All children 6 months to less than 3 years*	FluQuadri Junior	30	11	39 <small>(cohort + 30% for children requiring 2 doses)</small>	33
All children 3-4 years*	Fluarix Tetra or FluQuadri	30	11	39 <small>(cohort + 30% for children requiring 2 doses)</small>	33
All medically at risk and Aboriginal people [5 years to 64 years*]	Fluarix Tetra or FluQuadri or Afluria	100	37	100	111
All people ≥65 years	Fluad	100	37	100	111
All pregnant women	Fluarix Tetra or FluQuadri or Afluria	10	4	10	11
Total maximum number of vaccines that can be administered each week =			100		

*Remember children under 9 years of age require two doses in their first year of receiving the flu vaccine (at least 4 weeks apart)

Appendix 2: Flu vaccination decision aid – adults




Appendix 3: 2019 flu vaccines poster (with images)



2019 influenza vaccine presentations and eligibility

6 MONTHS TO LESS THAN 3 YEARS OF AGE




FluQuadri™ Junior

- All children aged 6 to 35 months (including Aboriginal children and those with medical risk factors)
- Give two doses one month apart if first year of receiving flu vaccine
- Available in 5 packs
- Does NOT contain latex**

Pack dimensions
Five packs: 8.9 x 10.4 x 2.3cm

6 MONTHS TO 64 YEARS




Fluarix Tetra®

- All people 6 months to 64 years with medical risk factors predisposing to severe influenza
- Pregnant women
- Give two doses one month apart for children aged 6 months to less than 9 years if first year of receiving flu vaccine
- Available in single and 10 packs
- Children should receive a full dose (i.e. not a half dose)**
- Does NOT contain latex in the presentation available in Australia**

Pack dimensions
Singles: 13.5 x 4.3 x 2.4 cm
Ten packs: 17.8 x 10.4 x 4.2 cm

3 YEARS TO 64 YEARS




FluQuadri™

- All children 3 years to less than 5 years
- People 36 months of age to 64 years with medical risk factors predisposing to severe influenza
- All Aboriginal persons 36 months to 64 years
- Pregnant women
- Give two doses one month apart for children aged 3 to less than 9 years if first year of receiving flu vaccine
- FluQuadri available in 5 packs
- Do not give a half dose**
- Do not use for children less than 3 years of age**
- Does NOT contain latex**

Pack dimensions
Five packs: 8.9 x 10.4 x 2.3cm

5 TO 64 YEARS



Afluria Quad®

- People 5 to 64 years of age with medical risk factors predisposing to severe influenza
- All Aboriginal persons 5 to 64 years of age
- Pregnant women
- Available in singles and 10 packs
- Give two doses one month apart for children aged 5 to less than 9 years if first year of receiving flu vaccine.
- Do not use for children less than 5 years of age**
- Does NOT contain latex**

Pack dimensions
Singles: 13.2 x 3.5 x 2.6cm
Ten packs: 15.3 x 12.5 x 4cm

65 YEARS AND OVER (only)

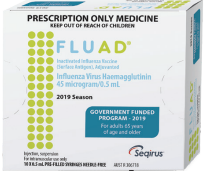
Fluad®

- Trivalent vaccine
- Influenza A(H1N1), A(H3N2) and B-Yamagata strains with MF59C adjuvant

- All persons aged 65 years and over
- Milky white suspension
- Needleless presentation
- Available in singles and 10 packs

- Does NOT contain latex**
- Do not use in pregnant women or children**

Pack dimensions
Singles: 13 x 4 x 3cm
Ten packs: 12.25 x 10.75 x 3.75cm



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



SHPN (HPNSW) 190132

