

MODEL STANDING ORDERS

Live Attenuated Seasonal Influenza Vaccine (LAIV) (FluMist®)

These model standing orders are current as of August 2010. They should be reviewed carefully against the current recommendations and may be revised by the clinician signing them.

Live Attenuated Seasonal Influenza Vaccine (LAIV) is indicated for all *healthy*, non-pregnant people 2 – 49 years of age. This includes health care personnel and others in close contact with groups at risk for complications from influenza. The only exception to this is healthcare personnel and other contacts of severely immunocompromised people requiring a protective environment.

ORDER:

1. Provide patient, parent or legal representative with a copy of the Vaccine Information Statement (VIS) and answer any questions. VIS's in English and other languages are available online at <http://www.immunize.org/vis>.
2. Screen for contraindications according to Table 1.
3. Administer 0.2 mL seasonal LAIV vaccine intranasally (0.1 mL in each nostril), according to the recommended age-specific schedule (Figure 1).
 - Remove the rubber tip protector.
 - With the patient in an upright position, head tilted back, place the tip just inside the nose to ensure that seasonal LAIV is delivered into the nose.
 - With a single motion, depress the plunger **as rapidly as possible** until the dose-divider clip prevents you from going any further.
 - Pinch and remove the dose-divider clip from the plunger.
 - Place the tip just inside the other nostril and with a single motion; depress the plunger **as rapidly as possible** to deliver the remaining vaccine.
 - If the vaccine recipient sneezes after administration, the dose should **not** be repeated.
4. Administer seasonal LAIV concurrently with other inactivated and live vaccines. Administer other live vaccines not given on the same day at least 28 days apart.
5. If possible, observe patient for an allergic reaction for 15 - 20 minutes after administering vaccine. Facilities and personnel should be available for treating immediate hypersensitivity reactions.
6. Report administration errors to the Institute for Safe Medical Practices (ISMP) via the Medication Error Reporting Program (MERP) website: <http://www.ismp.org>
7. Report clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS) at 1-800-822-7967 or <http://www.vaers.hhs.gov/>.
8. See *General Protocols for Vaccine Storage, Administration, Standing Orders and Mass Immunization Clinics*
http://www.mass.gov/Eeohhs2/docs/dph/cdc/immunization/mso_protocols_general.pdf

Clinician's Signature

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Date

Note: Any health care personnel (HCP) can administer LAIV, including those at risk for influenza complications who cannot themselves receive LAIV (e.g., pregnant women, HCP \geq 50 years of age, etc.). Only HCP who are severely immunocompromised themselves should not administer LAIV.

Neither masks nor gloves are necessary when administering LAIV.

Table 1. Contraindications and Precautions to LAIV

Valid Contraindications for Live Attenuated Seasonal Influenza Vaccine
<ul style="list-style-type: none"> • Anaphylactic reaction to a previous dose of influenza vaccine, eggs¹, egg protein¹, gentamicin, gelatin or arginine, or any other component of the vaccine (see package insert for specific components) • Age < 2 and > 49 years² • Underlying medical condition, including²: <ul style="list-style-type: none"> ○ Asthma, reactive airways disease, ○ Wheezing episode in the previous 12 months for children 2 - 4 years of age. <ul style="list-style-type: none"> - Consult medical record, if available, for history of asthma or recurrent wheezing - Ask parent or caregivers: “In the past 12 months, has a health care provider told you that your child has wheezing or asthma?” - If yes to either of these, use inactivated influenza vaccine ○ Other chronic disorders of the pulmonary or cardiovascular systems; and ○ Other underlying medical conditions, including metabolic diseases such as diabetes, renal dysfunction, and hemoglobinopathies. • Known or suspected immunosuppression caused by medications or HIV² • Children aged 2 – 17 years of age receiving aspirin therapy or other salicylates² • Pregnancy² • Close contacts of someone with severe immunosuppression requiring a protective environment³
Precautions
<ul style="list-style-type: none"> • Taking influenza antiviral medications⁴ • History of Guillain-Barré syndrome (GBS) within 6 weeks of a dose of any influenza vaccine⁵ • Defer administration of LAIV if nasal congestion present, or use inactivated influenza vaccine • Moderate or severe illness with or without fever

¹ Asking people if they can eat eggs without adverse effects is a reasonable way to determine who might be at risk for an allergic reaction.

² Use inactivated influenza vaccine for these people.

³ Close contacts include HCP, household contacts and anyone in close contact with severely immunocompromised patients when such patients require a specialized patient-care area with a positive-airflow relative to the corridor, high-efficiency air filtration and frequent air changes.

⁴ Do not administer LAIV until 48 hours after cessation of influenza antiviral therapy, and do not administer influenza antiviral medications for 2 weeks after receipt of LAIV, unless necessary.

⁵ Consider the potential risks and before administering LAIV to people with a history of GBS within 6 weeks of a previous dose of any influenza vaccine.

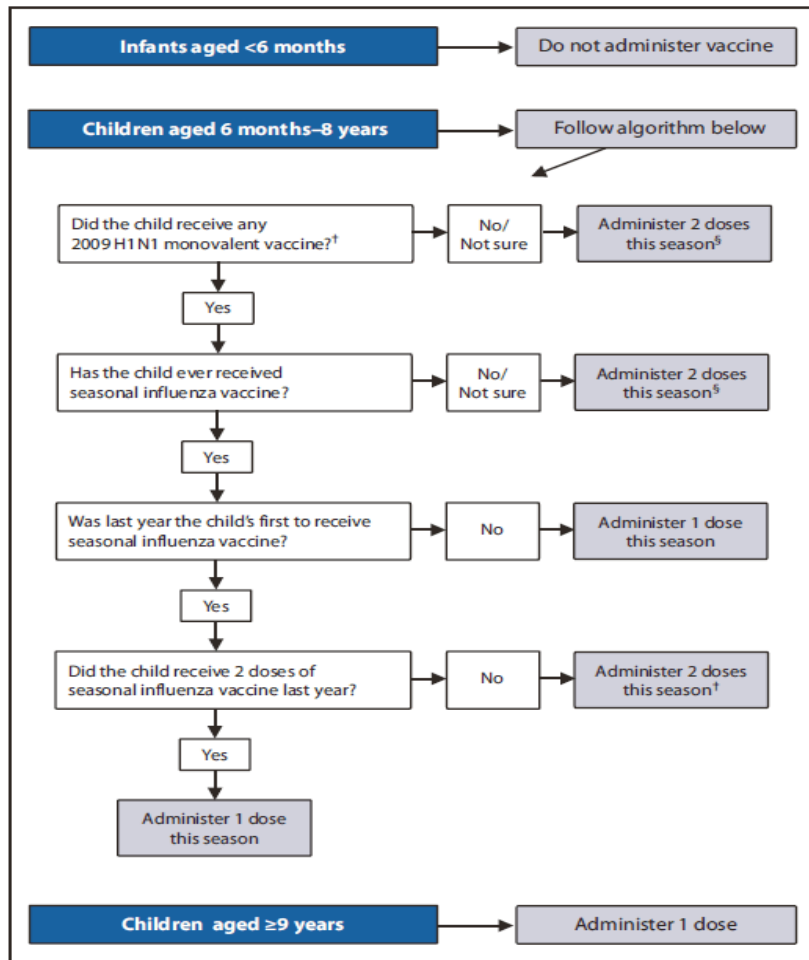
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Dosing recommendations for children younger than 9 years of age:

- Children < age 9 years who have had at least 2 doses of seasonal flu vaccine in their lifetime **and** at least one dose of pandemic H1N1 vaccine need only one dose of flu vaccine this season.
- All other children < age 9 years, including those with an uncertain flu vaccine history, should received 2 doses of seasonal flu vaccine, \geq 4 weeks apart.

Guidance for Determining Number of 2010--2011 Seasonal Influenza Vaccine Doses Recommended For Children



- More guidance on determining the appropriate number of doses is available at www.mass.gov/flu.

LAIV Storage and Handling: Store LAIV in a **refrigerator** between 2 – 8°C (35 - 46°F) upon receipt and until use. Keep at that temperature until the expiration date is reached. **Do not freeze.**

Resources:

CDC. Prevention and control of influenza with vaccines: recommendation of the ACIP, 2010. MMWR Early Release 2010;59 July 29, 2010:1-62. <http://www.cdc.gov/mmwr/pdf/rr/rr59e0729.pdf>
FluMist® Influenza Vaccine Live, Intranasal Spray, 2010-2011 Formula. Prescribing Information. http://www.medimmune.com/pdf/products/flumist_pi.pdf

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