How to Administer Intramuscular and Intranasal Influenza Vaccines

Intramuscular injection (IM)
Inactivated Influenza Vaccines (IIV), including recombinant hemagglutinin influenza vaccine (RIV), cell culture-based vaccine (ccIIV), and adjuvanted influenza vaccine (aIIV)

1. Use a needle long enough to reach deep into the muscle. Infants age 6 through 11 mos: 1"; 1 through 10 yrs: 1–1¼", and children and adults 11 years and older: 1–1½".

2. With your left hand*, bunch up the muscle.

3. With your right hand*, insert the needle at a 90° angle to the skin with a quick thrust.

4. Push down on the plunger and inject the entire contents of the syringe. There is no need to aspirate.

5. Remove the needle and simultaneously apply pressure to the injection site with a dry cotton ball or gauze. Hold in place for several seconds.

6. If there is any bleeding, cover the injection site with a bandage.

7. Put the used syringe in a sharps container.

* Use the opposite hand if you are left-handed.

Intranasal administration (NAS)
Live Attenuated Influenza Vaccine (LAIV)

1. FluMist (LAIV) is for intranasal administration only. Do not inject FluMist.

2. Remove rubber tip protector. Do not remove dose-divider clip at the other end of the sprayer.

3. With the patient in an upright position, place the tip just inside the nostril to ensure LAIV is delivered into the nose. The patient should breathe normally.

4. With a single motion, depress plunger as rapidly as possible until the dose-divider clip prevents you from going further.

5. Pinch and remove the dose-divider clip from the plunger.

6. Place the tip just inside the other nostril, and with a single motion, depress plunger as rapidly as possible to deliver the remaining vaccine.

7. Dispose of the applicator in a sharps container.