How to Administer Intramuscular and Intranasal Influenza Vaccines

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

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 non-dominant hand, bunch up the muscle.
3. With your dominant 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 then 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 needle and syringe in a sharps container.

**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.