Influenza Vaccines for Different Age Groups --- United States, 2012-2013 Season*

(DoD purchased vaccines are highlighted)

Vaccine	Trade Name	Manufacturer	Presentation	Thimerosal content (mcg/0.5 mL dose)	Ovalbumin content (mcg/0.5 mL dose)	Contains Latex	Age Group	Route§
TIV	**Fluzone®**	**sanofi pasteur**	**0.25 mL prefilled syringe**	0.0	§§	No	6-35 mos	IM
			0.5 mL prefilled syringe	0.0	§§	No	≥ 36 mos	IM
			0.5 mL vial	0.0	§§	No	≥ 36 mos	IM
			5 mL multidose vial	25.0	§§	No	≥ 6 mos	IM
TIV	Fluvirin®	Novartis Vaccines	0.5 mL prefilled syringe	≤ 1	≤ 1	Yes†	≥ 4 yrs	IM
			5 mL multidose vial	25.0	≤ 1	No		
TIV	Fluarix®	GlaxoSmithKline	0.5 mL prefilled syringe	0	≤ 0.05	Yes†	≥ 3 yrs	IM
TIV	FluLaval®	ID Biomedical Corporation of Quebec (distributed by GlaxoSmithKline)	5 mL multidose vial	25.0	≤ 1.0	No	≥ 18 yrs	IM
TIV	**Afluria®**	**CSL Biotherapies (distributed by Merck)**	**0.5 mL prefilled syringe**	0.0	≤ 1	No	≥ 5 yrs***	IM
			5 mL multidose vial	24.5	≤ 1	No		
TIV High-Dose¶	Fluzone High-Dose®	sanofi pasteur	0.5 mL prefilled syringe	0.0	§§	No	≥ 65 yrs	IM
TIV Intradermal	Fluzone Intradermal®	sanofi pasteur	0.1 mL prefilled microinjection system	0.0	§§	No	18-64 yrs	ID
LAIV	**FluMist®****	**MedImmune**	**0.2 mL prefilled intranasal sprayer**	0.0	¶¶	No	2-49 yrs††	IN

TIV = trivalent inactivated vaccine; **LAIV** = Live attenuated influenza vaccine; **IM** = intramuscular; **ID** = Intradermal; **IN** = intranasal

* Immunization providers should check Food and Drug Administration—approved prescribing information for 2012-13 influenza vaccines for the most updated information.

¶ Trivalent inactivated vaccine high-dose: 0.5 mL dose contains 60 mcg each of A/California/7/2009 (H1N1) pdm09, A/Victoria/361/2011 (H3N2)-like, and B/Wisconsin/1/2010-like antigens.

** Health-care providers should consult the medical record, when available, to identify children aged 2-4 years with asthma or recurrent wheezing that might indicate asthma. In addition, to identify children who might be at greater risk for asthma and possibly at increased risk for wheezing after receiving LAIV, parents or caregivers of children aged 2-4 years should be asked: "In the past 12 months, has a health-care provider ever told you that your child had wheezing or asthma?" Children whose parents or caregivers answer "yes" to this question and children who have or who had a wheezing episode noted in the medical record within the past 12 months should not receive FluMist.

§§ Information not included in package insert, but is available upon request from the manufacturer, sanofi pasteur, by contacting 1-800-822-2463 or MIS.emails@sanofipasteur.com.

¶¶ No data available for use of LAIV in egg-allergic individuals.

† The prefilled syringe tip caps may contain natural rubber latex that may cause allergic reactions in latex sensitive individuals.

*** Age indication per package insert is ≥ 5 years; however, the ACIP recommends Afluria not be used in children 8 years of age or younger due to increased reports of febrile reactions noted in this age group. If no other age-appropriate, licensed inactivated seasonal influenza vaccine is available for a child aged 5 - 8 years old who has a medical condition that increases the child's risk for influenza complications, Afluria can be used; however, providers should discuss with the parents or caregivers the benefits and risks of influenza vaccination with Afluria before administering this vaccine. Afluria may be used in persons ≥ 9 years.

†† FluMist is indicated for healthy, non-pregnant persons aged 2-49 years.

§ For adults and older children, the recommended site of vaccination is the deltoid muscle. The preferred site for infants and young children is the anterolateral aspect of the thigh.