

# Alberta Influenza Immunization Policy

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Alberta Health

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Ministry of Health, Government of Alberta

October 2019

Alberta Influenza Immunization Policy

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Quick Glance for the 2019-2020 Season

### Public Launch:

The Alberta Influenza Immunization Program will begin in October. Health practitioners who see individual clients, such as pharmacists and some doctor's offices can offer the vaccine as soon as they receive it. As part of the Alberta Outreach Program, immunizers participating in outreach activities can begin to immunize individuals October 15, 2019, or as soon as vaccine is available. Off-site influenza immunization clinics will have enough supply to begin the week of October 21. Alberta Blue Cross claims will be accepted starting October 1, 2019.

### Immunization of Immunizers:

It is recommended that those who will be immunizing Albertans are themselves immunized as soon as possible upon receipt of vaccine at their site.

### Vaccine Products:

Quadrivalent inactivated injectable vaccine is the provincially funded vaccine available to Albertans 6 months of age and older. Influenza vaccine production issues experienced by some contracted manufacturers in Canada have impacted the quantity, timing and specific product that will be available to Albertans this coming season. The Alberta Influenza Immunization Program includes Fluzone® Quadrivalent, FluLaval® Tetra Quadrivalent, and may include FluLaval® Quadrivalent (U.S. Label); Fluarix® Quadrivalent (U.S. Label), Afluria® Tetra Quadrivalent. Refer to Appendix B

### Reporting Requirements:

For the 2019-2020 influenza season, aggregate reporting will be accepted under certain conditions; see Section XIII. Reporting Requirements for more details. The reason code for health workers was removed. The mechanism for determining health care worker immunization rates has changed and the reason code is no longer required. Immunization of healthcare workers remains a priority and all are encouraged to be immunized.

## I. DEFINITIONS

(For the purposes of this document)

Alberta College of Pharmacy (ACP)	Is responsible for pharmacy practice in Alberta, governed by the <i>Health Professions Act</i> .
Alberta Health	Her Majesty the Queen in Right of Alberta as represented by the Minister of Health.
Alberta Health Services (AHS)	The regional health authority established under the <i>Regional Health Authorities Act</i> .
Alberta Outreach Program	Includes homeless and marginalized persons, individuals with booked immunization appointments as well as: <b>Long-term care:</b> includes facilities like nursing homes and auxiliary hospitals. Care and accommodation services are provided for people with complex health needs who are unable to remain at home or in a supportive living site. <b>Supportive living:</b> sites that provide accommodation services along with other supports and care, including but not limited to, senior lodges, group homes, mental health and designated supportive living accommodations.
<a href="#">Alberta Immunization Policy</a> (AIP)	The immunization policy established by Alberta Health pursuant to the <i>Public Health Act</i> and includes the IIP.
Alberta Pharmacists' Association (RxA)	The health care professional association that represents pharmacists.
Alberta Vaccine Inventory System (AVI)	Is the provincial web-based vaccine inventory management system.
Client	Individuals six months of age and older, who are/will be living, working, going to school, or visiting in Alberta for two weeks or longer, are eligible for provincially funded influenza vaccine.
Cold Chain Management	The process used to maintain optimal temperature and light conditions during the transport, storage, and handling of vaccines. This starts with the manufacturer and ends with the administration of the vaccine to the client.
Immunizer	A health practitioner who meets the following requirements and is eligible to administer vaccine as part of the Alberta Immunization Program: <ul style="list-style-type: none"> <li>• Is a member of a regulated health profession under the <i>Health Professions Act</i>,</li> <li>• Is authorized under the respective statute and regulations to administer a vaccine, and</li> <li>• Is compliant with the applicable policies of the Alberta Immunization Policy.</li> </ul> <b>Examples:</b> <b>Immunizers who receive vaccine through AHS:</b> <ul style="list-style-type: none"> <li>• Are employed directly by AHS and could include, but are not limited to, AHS Public Health and non-Public Health.</li> <li>• Are not employed directly by AHS and could include, but are not limited to, physicians, employees of long-term care sites, private occupational health services and post-secondary institutions.</li> </ul> <b>Community Pharmacists:</b> <ul style="list-style-type: none"> <li>• Receive vaccine from Alberta Health through Pharmacy Wholesale Distributors.</li> </ul>
Personal Health Number (PHN)	The unique identifier assigned by Alberta Health for identification within Alberta's health system. A PHN is assigned to a person upon registration and presumes eligibility for basic health services as defined in the Alberta Health Care Insurance Plan.

Pharmacy Wholesale Distributors (PWD)	A pharmacy wholesale distributor who has a vaccine distribution contract with Alberta Health.
Privately Purchased Influenza Vaccine	The seasonal influenza vaccine purchased by pharmacies for use outside of the Alberta Influenza Immunization Program.
Provincial Vaccine Depot (PVD)	The vaccine depot maintained by the Government of Alberta. All publicly funded influenza vaccine will be received through the PVD for further distribution across Alberta.

Superseded

## II. PURPOSE

Influenza is a vaccine preventable disease, yet in 2018-2019 at least 52 deaths in Alberta were attributed to influenza. 1,968 persons were admitted to hospital and 228 of those admissions required intensive care. The elderly, the very young, pregnant women and those living with chronic or immune compromising conditions are particularly vulnerable.

The goal of the Alberta Influenza Immunization Program is to have the maximum number of Albertans immunized while being cost-effective, efficient and innovative.

The objectives of *Alberta's Influenza Immunization Policy* (IIP) are:

- All Albertans have access to publicly funded influenza vaccine;
- Reduce the incidence and impact of influenza disease in Alberta;
- To have a potent and safe vaccine available for administration; and
- To have 100% of immunizers receive the influenza vaccine.

The goals and objectives of the IIP can be met when all immunizers work together to implement it. Collaboration, coordination and communication among immunizers during all phases of the immunization process (from vaccine distribution to front line administration) are critical to strengthen Alberta's capacity to reduce the impact of influenza disease and contribute to the health and well-being of Albertans.

## III. LEGISLATIVE AUTHORITY

The IIP is established under sections 10 and 12 of the Public Health Act (PHA) and the [Immunization Regulation](#).

Under the authority of *Ministerial Order 614/2018* pursuant to section 16 of the *Regional Health Authorities Act*, pharmacies and pharmacists may participate in the delivery of the Alberta Influenza Immunization Program.

## IV. NATIONAL RECOMMENDATIONS

The National Advisory Committee on Immunization (NACI) produces a [statement on influenza immunization](#) each year that contains specific information and recommendations regarding the vaccine(s) to be used in the forthcoming season.

Each year, Alberta Health uses the NACI recommendations as a foundation for the IIP, and makes policy recommendations with consideration to Alberta's context.

## V. ALBERTA TARGETS FOR INFLUENZA IMMUNIZATION

- Seniors aged 65 years of age and older 80%
- Residents of long-term care facilities 95%
- Covenant Health and AHS Health Practitioners 80%

The reference for the above is: [National Immunization Strategy: Vaccination Coverage Goals and Vaccine Preventable Diseases Reduction Targets by 2025](#). The immunization coverage goals were set based on international standards and best practices and these targets are consistent with Canada's commitment to World Health Organization (WHO) disease elimination targets and Global Vaccine Action Plan.

## VI. CLIENT ELIGIBILITY

Alberta's universal influenza immunization program began in September 2009. Subject to any directions by the Chief Medical Officer of Health, any other criteria as established by Alberta Health and the applicable legislation, individuals six months of age and older, who are/will be living working, going to school, or visiting in Alberta for two weeks or longer are eligible for provincially funded influenza vaccine.

Children younger than nine years of age who have **never** received a dose of seasonal influenza vaccine **require two doses** with a minimum interval of four weeks between doses.

Clients who do not have a Personal Health Number (PHN) or whose PHN is inactive should be directed to a local AHS Public Health clinic for administration of vaccine.

## VII. EDUCATION/TRAINING

All immunizers are expected to complete an annual influenza immunization update, which includes the following:

- Immunizers are expected to understand the requirements outlined in the [Immunization Regulation](#).
- Immunizers are expected to understand the IIP, vaccine charts, be familiar with the most current NACI statement and relevant influenza vaccine product monographs.
- Immunizers are expected to understand [Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine](#) and the [Alberta Adverse Event Following Immunization Policy for Alberta Immunization Providers](#).
- Immunizers are expected to review the additional resources provided below:
  - **Immunizers who receive Vaccine through AHS:** can access the [AHS Influenza Immunization for Health Professionals Information Package](#).
  - **Community Pharmacists:** can access the Alberta Pharmacists' Association (RxA) [Annual Influenza Immunization Education](#) and the Alberta College of Pharmacy [Seasonal Influenza Information page](#).

## VIII. VACCINE SUPPLY AND DISTRIBUTION

Alberta Health purchases influenza vaccine through a national procurement process and receives the vaccine from manufacturers over several months. The Provincial Vaccine Depot distributes vaccines over time and monitors supply closely.

### Immunizers who receive vaccine through AHS:

- The Provincial Vaccine Depot (PVD) ships vaccine to AHS vaccine depots for further distribution.
- AHS is responsible for distributing influenza vaccine to all immunizers (excluding community Pharmacists); distribution amounts are based on vaccine availability.
- Vaccine orders are placed using [the Alberta Vaccine Inventory \(AVI\) system](#).

### Community Pharmacies:

- Influenza vaccine is distributed to pharmacies through Pharmacy Wholesale Distributors (PWD); distribution amounts are based on vaccine availability.
- Ordering threshold for Quadrivalent Inactivated Influenza Vaccine (QIV) per order is:

Minimum order	Maximum order
1 unit (one unit is 10 doses of vaccine)	20 units (200 doses)

**Note:** Use caution when ordering from the PWD's as quantities are ordered using **UNITS** not doses.

- Exemptions to the maximum ordering thresholds will be considered during an outbreak situation, as determined by Alberta Health.



## IX. ADMINISTRATION OF VACCINE

The Alberta Influenza Immunization Program will begin in October. Health practitioners who see individual clients, such as pharmacists and some doctor's offices can offer the vaccine as soon as they receive it. As part of the Alberta Outreach Program, immunizers participating in outreach activities can begin to immunize individuals October 15, 2019, or as soon as vaccine is available. Off-site influenza immunization clinics will have enough supply to begin the week of October 21. Alberta Blue Cross claims will be accepted starting October 1, 2019. Pharmacists can administer privately purchased influenza vaccine prior to the program start date; however, this is at a cost to the client.

**Please refer to Appendix B for vaccine product update.**

Product	FLULAVAL® TETRA QUADRIVALENT	FLUZONE® QUADRIVALENT
Vaccine Type	Inactivated Split Virion QIV	Inactivated Split Virion QIV
Presentation	Multidose Vial	Pre-filled syringe and Multidose vial
Route of Administration	IM	IM
Age Group	Six months of age and older	Six months of age and older
Antibiotics (trace)	None	None
Thimerosal	Yes	Multidose vials- Yes Pre-filled syringe- No
Non-Medical Ingredients	Egg protein Sodium deoxycholate Ethanol Formaldehyde Sucrose α- tocopheryl hydrogen succinate Polysorbate 80	Egg protein Formaldehyde Triton X-100
Influenza Strains	<ul style="list-style-type: none"> <li>• A/Brisbane/02/2018 (H1N1)pdm09-like virus;</li> <li>• A/Kansas/14/2017 (H3N2)-like virus;</li> <li>• B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage); and</li> <li>• B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage).</li> </ul>	

For off-site influenza immunization service delivery, please refer to the Appendix A: *Guide to Off-Site Coordination of Influenza Vaccine Administration*.

### Additional Influenza Vaccine Resources:

- [Alberta Immunization Policy](#)
- Alberta Health vaccine chart- [Influenza Quadrivalent Inactivated Vaccine](#)
- Product monograph- GlaxoSmithKline- [FluLaval® Tetra](#); Sanofi Pasteur- [Fluzone® Quadrivalent](#)
- World Health Organization- [Recommended composition of influenza virus vaccines for use in the 2019-2020 northern hemisphere influenza season](#)

## X. COLD CHAIN MANAGEMENT

Appropriate storage and handling is essential to provide potent biological products to the public. Detailed requirements are outlined in the [Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine](#). All known exposures of vaccine to temperatures outside +2.0°C to +8.0°C or light requirements as specified in the product monograph must be reported.

- **Immunizers who receive vaccine through AHS:** send the [Alberta Health Services Cold Chain Excursion Report Form](#) to the [AHS Zone Contact](#).
- **Community Pharmacists:** Report cold chain excursions to the vaccine manufacturer within five days for viability determination. A copy of the documentation must be kept with the vaccine. This record must be retained for at least seven years.

## XI. ADVERSE EVENTS

Monitoring the health and safety of Albertans is paramount. Immunizers must have protocols in place for management and reporting of anaphylaxis and other serious adverse events.

Report all Adverse Events Following Immunization (AEFI) of influenza vaccine to AHS within three days of being informed. When the adverse event is severe (e.g. anaphylaxis), the event should be reported within 24 hours.

Details on AEFI reporting, including case definitions and reporting requirements are included in the [Adverse Events Following Immunization \(AEFI\) Policy for Alberta Immunization Providers](#).

The health practitioner shall ensure that the adverse event following immunization is reported to **AHS**. Further information on the reporting process and the AEFI report form can be accessed: <https://www.albertahealthservices.ca/info/Page16187.aspx>

## XII. RECORDING REQUIREMENTS (Client Record)

The following data elements must be collected for each client who receives influenza vaccine and be included in the client's immunization record (**The client must be provided a record of the immunization at the time of the immunization event**):

- Client's last name
- Client's first name
- Personal Health Number (PHN) or Unique Lifetime Identifier (ULI)
- Date of birth
- Sex at birth
- Postal code
- Influenza Vaccine name (brand name)
- Manufacturer lot number
- Dosage administered
- Date and time of immunization
- Site of injection
- Route of administration
- Name and designation of Immunizer

### XIII. REPORTING REQUIREMENTS

#### Immunizers who receive vaccine through AHS:

- Individual line data is to be submitted electronically (if applicable), at minimum weekly, to the provincial repository in accordance with the [Immunization Data Submission and Response Guidelines](#).
- If electronic data capture capabilities are not available, aggregate data should be submitted, at minimum monthly, to Alberta Health Services.

**Note:** all doses administered to children nine years of age and under must be submitted to AHS for data entry using the [Influenza/Pneumococcal Immunization Record](#). (This excludes community pharmacists)

Reason Codes (Influenza Immunization Record) are listed in order of priority:

Reason Codes	Descriptor
46	Pregnant Women
02	Greater than or equal to 65
64	9 years to 64 years
63	5 years to 8 years
60	Children 24 months to 59 months
45	Children 6 months to 23 months

#### Community Pharmacists:

- Pharmacists must submit claims to Alberta Blue Cross (ABC) within three business days.
  - ABC claim data is uploaded into the provincial immunization repository (IMM/ARI) which feeds immunization event history into Netcare.
  - Claims must be submitted within the time frame to assist with vaccine supply monitoring.

Pseudo Identification Number (PIN)/ Reason Codes are listed in order of priority:

Reason Codes	Descriptor	PIN
46	Pregnant Women	05666646
02	Greater than or equal to 65	05666602
64	5 years to 64 years (annual dose)	05666664

\* Children younger than nine years of age who have **never** received a dose of seasonal influenza vaccine **require two doses** with a minimum interval of four weeks between doses.

The reason code for health care workers was removed. The mechanism for determining health care worker immunization rates has changed and the reason code is no longer required.

#### **XIV. INFLUENZA VACCINE WASTAGE**

In order to mitigate and reduce dilution of supply, a judicious approach to influenza vaccine ordering is required. Alberta Health works closely with stakeholders to have less than five percent wastage by the end of the season. Immunizers (excluding AHS Public Health) are responsible for the proper destruction of unused/expired influenza vaccine according to the standards of practice at their respective sites. The cost of destruction will not be reimbursed.

For immunizers who receive vaccine through AHS, all influenza vaccine that is not used after the season ends must be reconciled in AVI using the reason code “*Wastage /Influenza Season End*”.

#### **XV. CHARGES/BILLING**

Immunizers who are administering influenza vaccines that are part of the provincially funded Alberta Influenza Immunization Program cannot charge an eligible Albertan for vaccine, supplies or services associated with the administration of the vaccine.

#### **XVI. OFF-SITE WORKPLACE CLINICS**

Immunizers offering influenza immunization services in an off-site workplace setting cannot charge the Province, however, may charge the employer for the services associated with the administration of the vaccine but not for the vaccine itself. This does not include the staff and volunteers in assisted living facilities where the residents are being offered influenza immunization at the same time.

Superseded

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## Appendix A – Guide to off-site coordination\* of Influenza Vaccine Administration

Location or Population	Example	Can use public vaccine?	Can Pharmacists bill Alberta Blue Cross?	Requires coordination with AHS?
Community Settings	Must be accessible to the public (shopping mall, special event, recreation center, community hall, airport, etc.)	Yes	Yes	Yes***
Home Visits	Immunizers to confirm with client that they are not receiving influenza immunization from Public Health or Home Care	Yes	Yes	No
Congregate living settings where Public Health is <b>not</b> providing services	Continuing Care facilities, senior residence, senior lodges, etc.**	Yes	Yes	Yes***
Workplace setting where occupational health services are <b>not</b> available	The sole purpose of the off-site clinic is to provide immunizations to employees at their workplace	Yes	No	No
Post-secondary students during a time that Public Health or Student Health Services are <b>not</b> providing an immunization clinic	Any post-secondary setting such as a university, college or technical training institute	Yes	Yes	Yes***
School or child setting during school hours where Public Health services are being provided	Immunization of children in any school or child care setting, during school hours	No	No	NA
School or child care setting <b>after</b> school hours and open to public	Public immunization clinic after hours in a school gym	Yes	Yes	Yes***

\* Coordination is required to reduce duplication of influenza immunization services.

\*\*Residents, staff, and volunteers can be offered vaccine during the offsite clinic. The services associated can be billed through ABC.

\*\*\*Coordination is done through the facility or setting.

## Appendix B – Updated Influenza Vaccine Products (Available October 2019)

	Current Vaccines		Vaccines Alberta May Receive		
<b>Product</b>	<b>FLULAVAL® TETRA</b> QUADRIVALENT (CANADA)	<b>FLUZONE®</b> QUADRIVALENT (Canada)	<b>FLULAVAL</b> QUADRIVALENT (U.S. LABEL)	<b>FLUARIX®</b> QUADRIVALENT (U.S. Label)	<b>AFLURIA® TETRA</b> QUADRIVALENT (CANADA)
<b>Vaccine Type</b>	<b>Inactivated Split Virion QIV</b>	<b>Inactivated Split Virion QIV</b>	<b>Inactivated Split Virion QIV</b>	<b>Inactivated Split Virion QIV</b>	<b>Inactivated Split Virion QIV</b>
<b>Presentation</b>	Multidose Vial	Pre-filled syringe and Multidose vial	Pre-filled syringe* and Multidose Vial	Pre-filled syringe	Pre-filled syringe and Multidose vial
<b>Route of Administration</b>	IM	IM	IM	IM	IM
<b>Age Group</b>	Six months of age and older	Six months of age and older	Six months of age and older	Six months of age and older	<b>Five years of age and older</b>
<b>Antibiotics (trace)</b>	None	None	None	None	Neomycin sulfate
<b>Thimerosal</b>	Multidose vials- Yes Pre-filled syringe- No	Multidose vials- Yes Pre-filled syringe- No	Multidose vials- Yes Pre-filled syringe- No	Pre-filled syringe- No	Multidose vials- Yes Pre-filled syringe- No
<b>Non-Medical Ingredients</b>	Egg protein, Sodium deoxycholate, Ethanol, Formaldehyde, α- tocopheryl hydrogen succinate, Polysorbate 80, Sucrose	Egg protein, Formaldehyde, Triton X-100	Egg protein, Sodium deoxycholate, Ethanol, Formaldehyde, α- tocopheryl hydrogen succinate, Polysorbate 80, Sucrose	Egg protein, Formaldehyde, Triton X-100	Egg protein, Calcium chloride, Dibasic sodium phosphate (anhydrous), Monobasic potassium phosphate, Monobasic sodium phosphate, Potassium chloride, Sodium chloride, Betapropiolactone, Polymyxin B sulfate
<b>Influenza Strains</b>	<ul style="list-style-type: none"> <li>• A/Brisbane/02/2018 (H1N1)pdm09-like virus;</li> <li>• A/Kansas/14/2017 (H3N2)-like virus;</li> <li>• B/Colorado/6/2017-like virus (B/Victoria/2/87 lineage) or B/Maryland/15/2016 (US and Germany products); and</li> <li>• B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage).</li> </ul>				

### Influenza Vaccine Resources:

- Alberta Health vaccine charts- Influenza Quadrivalent Inactivated Vaccine; FluLaval® Quadrivalent (U.S. Label); Fluarix® Quadrivalent (U.S. Label), Afluria® Tetra Quadrivalent. See [Alberta Immunization Policy](#).
- Product monograph- GlaxoSmithKline- [FluLaval® Quadrivalent \(U.S. Label\)](#); [Fluarix® Quadrivalent \(U.S. Label\)](#) Seqirus- [Afluria® Tetra Quadrivalent](#)