Continuous Professional Education Programme for Registered Nurses and Registered Midwives to administer Seasonal Influenza Vaccine under the Medicine Protocol to Nurses, Midwives and Healthcare Workers
Medicine Protocol

This Medicine Protocol is a specific written instruction for the administration of Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated) to nurses, midwives, health care workers, agency staff, contract workers and volunteers (hereafter known as HCWs) who may not be individually identified before presentation for treatment.
What are the Constituents of the Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated)?

• The 2019/2020 Quadrivalent vaccine recommended by the World Health Organization (WHO) contains 4 strains of flu viruses which are most likely to be circulating this season. The four strains are:
  – an A/Brisbane/02/2018 (H1N1)pdm09-like virus;
  – an A/Kansas/14/2017 (H3N2)-like virus;
  – a B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage); and
  – a B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage).

Clinical Criteria

For the immunisation of HCWs against the influenza virus for the 2019/2020 seasonal influenza vaccine programme
Circumstances in which the Medicine Protocol applies

• Targeted immunisation programme for recipient HCWs during the influenza season as they are at risk of influenza and transmitting the influenza virus to vulnerable patients in the course of their duties.

• HCWs may be asymptomatic with influenza infection, but can still spread the virus to others.
Inclusion Criteria

HCWs in the health service, especially those who have contact with patients.
Exclusion Criteria

- Anaphylactic or hypersensitivity reaction to a previous dose of an influenza vaccine or any of its constituents.
- Those with confirmed egg anaphylaxis and non-anaphylactic egg allergy can be safely given an influenza vaccine with low ovalbumin content.
- Egg anaphylaxis or egg allergy and severe asthma (BTS/ SIGN >4); Refer to hospital specialist for vaccination with seasonal influenza vaccine with ovalbumin content <0.1 micrograms per dose.
- Sanofi Pasteur Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated) is a low ovalbumin vaccine (<0.1 micrograms per dose).
Exclusion Criteria

• NIAC continues to advise that patients on combination checkpoint inhibitors (e.g. ipilimumab plus nivolumab) should not receive any influenza vaccines, because of a potential association with immune-related adverse reactions.

• Workers who already received a dose of the Sanofi Pasteur Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated) in the 2019/2020 influenza season.

• Acute severe febrile illness: defer until recovery.

• The presence of a minor infection such as a mild upper respiratory infection or low grade fever is not a contraindication to immunisation.
Action to be taken for HCW who are excluded from the Medicine Protocol

• Refer to the Occupational Health Physician or other Medical Practitioner for an individual medical assessment.

• Document actions in clinical notes.

• Where Sanofi Pasteur Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated) is prescribed following medical assessment, the nurse or midwife may administer Sanofi Pasteur Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated) within their scope of practice.
Quadrivalent Inactivated Influenza Vaccine (split virion, inactivated)

Details of the most current and update information of the SmPC and other data is available on the website https://www.hpра.ie
Possible Side Effects

Common Reactions
- headache
- sweating
- Myalgia, arthralgia
- Fever
- Malaise
- Shivering
- Fatigue

Local reaction
(Redness, swelling, pain, ecchymosis, induration)
Reactions usually disappear within 1 to 2 days with no treatment.

For a full list of side effects refer to https://www.hpра.ie
Action to be followed for HCWs who do not wish to receive the vaccine

• Advise of the risks of not having the vaccine, including risk of transmission of virus to vulnerable patients.

• Advise regarding minimisation of risk.
Advice to be given before administration of vaccine

• Discuss the Influenza Vaccine and the importance of protecting not only their own health but also the health of vulnerable patients in their care.

• Provide HCW with a patient information leaflet (PIL).

• Discuss potential side effects.

• Obtain informed consent and a signed consent form. (see medicine protocol)
Advice to be given after administration of vaccine

• Discuss potential side effects.

• The HCW should be advised to remain in the health service facility for fifteen minutes.

• The HCW should not leave the health care facility if they are feeling unwell and must report any unwanted side effects to the registered nurse/midwife who has administered the vaccine.
Details of follow-up and referral arrangements

• Refer the HCW to the Occupational Health Physician or other Medical Practitioner in the event of:
  – Adverse reaction
  – Other clinical concerns.

• In the event of an adverse reaction the nurse/midwife must ensure that all procedures are adhered to as outlined in the Medicine Protocol.
Nature and Contents of Pack

• 10 prefilled syringes (0.5mils)

• Needle attached
Any Questions