The Administration of BCG Vaccination
The Vaccine

- Danish Vaccine – SSI
- Check expiry date
• Read and become familiar with information leaflet supplied with the vaccine
• Perform hand hygiene using alcohol hand gel [or soap and water if hands are physically soiled]
• Work in ‘clean area’
• Visually inspect vaccine for foreign particulate matter and/or abnormal physical appearance. If either observed, discard the vaccine

• Reconstitute by adding the solvent to the white crystalline powder in the multi dose vial as follows:
• Do not swab the rubber bung on vial
• Using aseptic technique withdraw the volume of solvent stated on the label by means of 2 ml syringe using a 23 gauge needle [blue] and add it to the vial containing the powder
• Invert the vial a few times – DO NOT SHAKE
• Gently swirl contents before drawing up each dose
• Using 1 ml safety syringe with 28G needle, insert needle into reconstituted vaccine
• Draw up 0.05 ml dose [for under 1 year of age] or 0.1 ml [for over 1 year of age] removing any air bubbles
• Recap the needle
Position Baby

- Vaccination given in the left arm
- Use right arm if rash, birthmark, fracture etc.
- Neonates can be vaccinated lying down
- Older child can be vaccinated on parent’s knee
  - Vaccination given in the left arm
  - Use right arm if rash, birthmark, fracture, or for revaccination
• Lie baby on right side
• Tilt body forward
• Remove long sleeve
• Expose left shoulder and deltoid area
• Catch elbow in vest sleeve
• Do not strip baby completely
• Grip baby’s forearm
• Use your forearm to stabilise baby
• Stretch skin over deltoid
• Identify the deltoid crease
• Do not inject into the crease
• Hold fingertips near top of syringe to give maximum control
• Use palm of hand to depress plunger
• One hand only to hold syringe and press plunger
• Rest the needle on the skin with the bevel facing up, with your hand against baby’s body
• Hand position should be level with or lower than baby’s body
• Advance needle tip – pick up first layer of skin – until bevel can no longer be seen
• If bevel not fully inserted, leakage will occur when plunger is pressed
• Hold position of needle and depress plunger with palm – there will be a feeling of resistance if needle placed correctly
• Watch bleb appearing
• See peau d’orange effect
• Push up flange on safety syringe to cover the needle
• Dispose of syringe safely
• Site is just above deltoid crease on left arm
• Too high – more likely to cause keloid formation
• Not given in leg
• If the needle is inserted too deeply [no resistance felt when depressing the plunger] – pull out immediately and resite