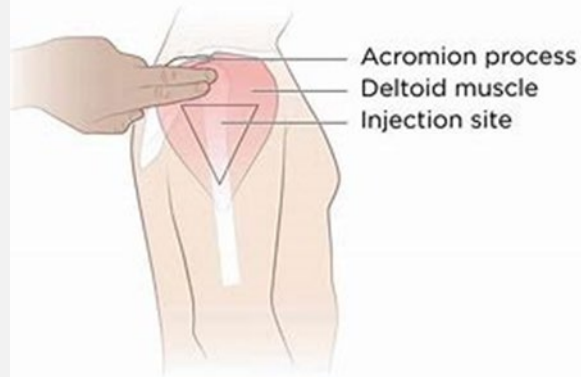


Vaccine Administration



Vaccine Administration

- Client Interview (Fit to Immunize Assessment)
- Informed Consent
- Vaccine Administration Process



Informed consent

The immunizer will:

- Assess the need for immunization
- Assess client's eligibility for the vaccine being offered.
- Complete a “fit to immunize” assessment
 - [Fit to Immunize Tool \(albertahealthservices.ca\)](http://albertahealthservices.ca)

Informed consent

- Clients must give informed consent for each vaccine before immunization
- Prior to immunizing the immunizer must:
 - Determine that the client is eligible (lives, works, goes to school or are visiting Alberta)
 - Review the disease(s) being prevented
 - Review antigen(s)
 - Discuss:
 - risks and benefits of getting the vaccine(s) and not getting the vaccine(s)
 - side effects and after care
 - how the vaccine(s) is given
 - Provide the opportunity to ask questions
 - Affirm verbal consent

Vaccine management

- All multi-dose vials must be dated upon opening*
 - Multi-dose vials must be discarded as per appropriate vaccine biological page
- Check expiry date of all products being administered
- Communicate use of near expiry vials to other staff members, so the vaccine can be used before it expires
- Vaccine should be withdrawn from the vial by the immunizer administering the vaccine
- Do not mix vaccine from different vials
- Do not pre-draw vaccine

* Refer to local protocol for dating vials

Preparing the vaccine

- Determine the appropriate vaccine and route of administration
- Provide appropriate information to client
- Detach self from conversation
- Visually inspect the vaccine. Do not use if:
 - it is discolored
 - you notice extraneous particulate matter present
 - the multi-dose vial/prefilled syringe is defective

Preparing the vaccine

- Determine the site of injection
- For multi-dose vials – select appropriate syringe and needle
 - it is not necessary to change needles after drawing up vaccine, unless the needle is damaged or contaminated
- For prefilled syringes – select appropriate needle to attach to syringe
- Select and read the label on the multi-dose vial or prefilled syringe
- Check the vaccine expiry date
 - if applicable, check the date the multi-dose vial was opened
- For prefilled syringes, ensure the lot number on the syringe matches the lot number on the box (syringe is discarded after administering vaccine and lot number is recorded from the box)

Preparing the vaccine

- For multi-dose vials
 - agitate the vial before drawing up each dose
 - swab the top of the vial and allow it to dry
 - withdraw the appropriate dose of the vaccine
- For prefilled syringes
 - agitate the prefilled syringe before administration
- Recheck the vaccine label
- Check the record to verify you have the correct vaccine for each client

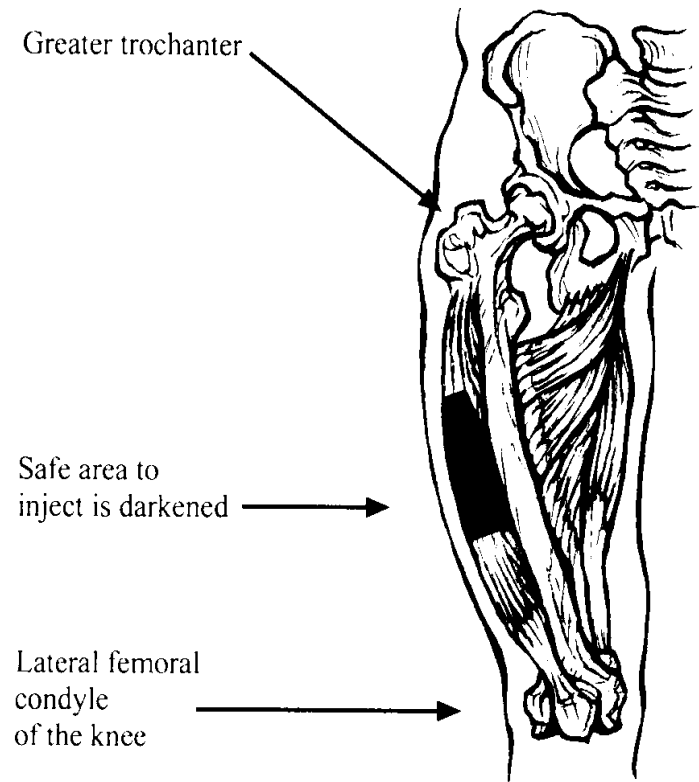
Administration

- Expose and position the client's limb for injection
- Swab the site of injection
- Allow the site to dry for 10-15 seconds
- Secure the injection site using the appropriate stabilization technique
- Insert the needle at a 90° angle
- Administer the vaccine with controlled pressure
- Activate the safety engineered device
- Discard the needle and syringe, and empty vaccine vials into an appropriate biohazard container
- Use a cotton ball and apply pressure to the injection site
- Reinforce the 15 minute wait period with the client or parent/guardian

Intramuscular injections

Children less than 12 months old

- 1 mL or 3 mL syringe
- 25G 1” needle
- insert at 90 degree angle vastus lateralis – middle third of anterior thigh and slightly lateral to the midline
- Note: This site can be used for children older than 12 months of age with inadequate deltoid muscle mass. Check with a Public Health Nurse if you are unsure



Vastus Lateralis Site

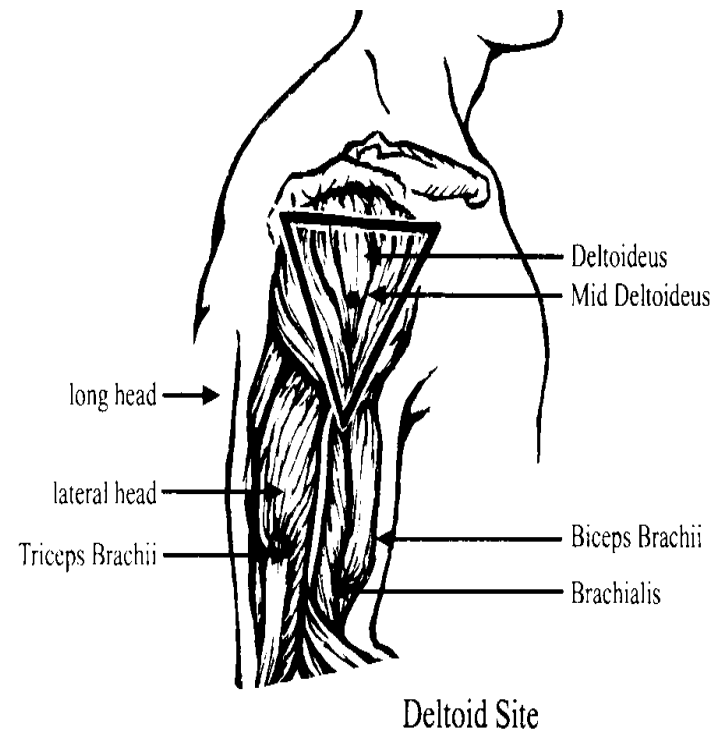
Intramuscular injections

Children 12 months and older

- 1 mL or 3 mL syringe
- 25G -1” needle
- insert at 90 degree angle
- mid portion of deltoid

Adults

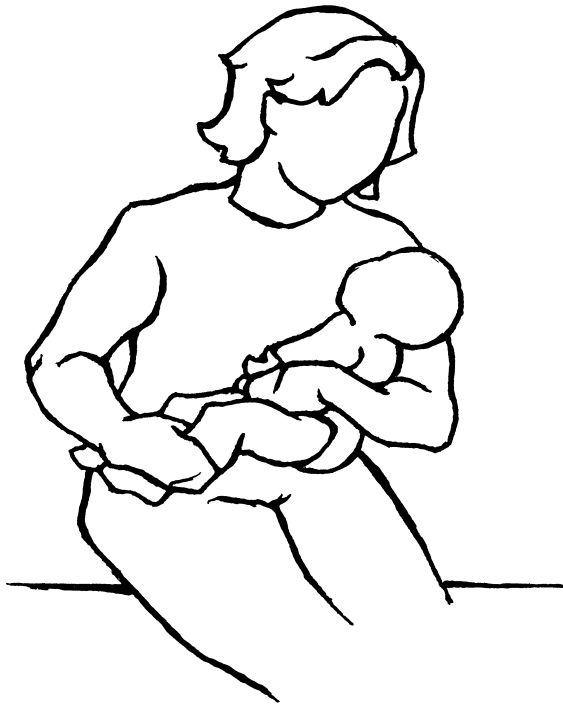
- 1 mL or 3 mL syringe
- 25G -1” to 1½” needle depending on muscle mass and adipose tissue
- insert at 90 degree angle
- mid portion of deltoid



Limb Integrity

- Do not administer an immunizing agent in a limb that is likely to be affected by a lymphatic system problem, such as lymphedema or mastectomy with lymph node curettage.
- Vastus lateralis is an alternative site for all ages.
- Individuals who present with A-V fistula (vascular shunt for hemodialysis) and those who have had mastectomies with lymph node curettage, axilla lymphadenectomies, limb paralysis and upper limb amputations may have short term or long term circulatory (e.g., lymphatic systems) implications that may impair vaccine absorption and antibody production.

Position & stabilization techniques for vastus lateralis site (infants less than 12 months)



Position & stabilization techniques for deltoid site

Infants 12 months and older



Infants 18 months old and older

(“The pretzel hold”)



Commitment to Comfort

Needle Fears

- This can affect people to a degree that they avoid immunization

Commitment to Comfort | Alberta Health Services outlines five principles to improve the immunization experience, health outcomes, satisfaction and encourage repeat attendance to healthcare encounters.

- Make a comfort plan
- Use positive language
- Use comfort positions
- Shift attention
- Use numbing cream

Anaphylaxis

Alberta Health Services employees need to ensure they have completed the [Anaphylaxis Management | Insite](#) (albertahealthservices.ca) learning module.

Covenant Health employees need to ensure they have completed Covenant Health Anaphylaxis Learning Module found on CLiC.

All other providers must have Anaphylaxis Management Guidelines in place.

- Additional information available in the [Canadian Immunization Guide – Vaccine Safety](#)

Infection Prevention and Control (IPC)

IPC's mandate is to reduce the incidence of healthcare associated infections in patients, residents, and clients by:

- process and outcome surveillance
- outbreak identification and management
- consultation and education
- guideline, policy, and procedure development
- Research

For more information go to the AHS IPC website at:

<https://www.albertahealthservices.ca/info/page6410.aspx>

QUESTIONS & THANKS

Email CDCIMM@ahs.ca or call 1-855-444-2324