



Master Medicine Protocol for the Administration of Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age

This medicine protocol is a specific written instruction for the administration of LAIV Fluenz Nasal Spray to children aged 2-17 years by healthcare professionals included in Statutory Instruments S.I. No. 245 of 2021 and S.I. No. 422 of 2023 who are registered with their respective regulatory body. This medicine protocol is valid for the 2024/2025 Health Service Executive (HSE) Seasonal Influenza Vaccination Programme (SIVP). This medicine protocol enables the COVID-19 vaccinators listed in S.I. No. 245 of 2021 who have undertaken the required education and training programmes for their profession to administer LAIV Fluenz Nasal Spray to vaccine recipients (listed above). This master medicine protocol is with reference to and guidance from the National Immunisation Advisory Committee (NIAC), National Immunisation Office (NIO), HSE and in accordance with the Summary of Product Characteristics (SmPC) for LAIV Fluenz Nasal Spray available at www.medicines.ie See below:

- National Immunisation Advisory Committee (2023) Anaphylaxis: Immediate Management in the Community. Available at https://rcpi.access.preservica.com/uncategorized/IO_a36f9e4b-4c80-432d-8264-546089359925/
- National Immunisation Advisory Committee Immunisation Guidelines for Ireland Dublin: Royal College of Physicians Ireland, online update available at <https://www.rcpi.ie/Healthcare-Leadership/NIAC/Immunisation-Guidelines-for-Ireland>
- Summary of Product Characteristics for LAIV Fluenz Nasal Spray available at <https://www.medicines.ie/medicines/fluenz-nasal-spray-suspension-36276/spc>

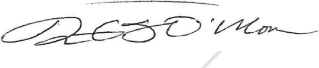

A medicine protocol has been defined as “written directions that allow for the supply and administration of a named medicinal product by a nurse or midwife in identified clinical situations. A medicine protocol involves the authorisation of the nurse/midwife to supply and administer a medicine to groups of patients in a defined situation meeting specific criteria and who may not be individually identified before presentation for treatment. An individually named prescription is not required for the supply and administration of medication when a medication protocol is in effect” (An Bord Altranais, 2007, page 37).

A medicine protocol is a nationally approved prescription for the supply and administration of a medicine as per above definition. The HSE Chief Clinical Officer and Director of National Health Protection have approved the use of medicine protocols by healthcare professionals listed in S.I. No. 245 of 2021 and S.I. No. 422 of 2023. This medicine protocol is developed to facilitate the delivery of HSE seasonal influenza vaccination programme 2024/2025 in line with NIAC recommendations endorsed by the Department of Health (DoH).



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Document reference number	NIO September 2024 Version 1
1.0 Critical Elements	
Name of Organisation & Settings where protocol applies	Health Service Providers across the voluntary and statutory services of the HSE, schools/special schools/home schools, non-HSE healthcare facilities and mass vaccination clinic venues. This Medicine Protocol applies to: Healthcare professionals included in S.I. No. 245 of 2021 and S.I. No. 422 of 2023 employed by the HSE who have undertaken the required education and training programmes relevant to their profession
Date the protocol comes into effect	September 2024 to April 2025
Date for review of protocol	May 2025
Document prepared by	The National Immunisation Office (NIO), HSE
Names and Signatures of the employing authority who is authorising the implementation of the protocol <i>“On behalf of the authority employing professionals authorised to administer under this medicine protocol, I have read this medicine protocol and authorise its implementation”</i>	<p>Name: Dr Éamonn O’ Moore, Director of National Health Protection, , HSE</p> <p>Signature: </p> <p>Name: Dr Colm Henry, Chief Clinical Officer, HSE</p> <p>Signature: </p>



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2.0 Clinical Criteria	
Clinical condition for use of this medicine protocol	The clinical condition for which this medicine protocol has been developed is for immunisation of vaccine recipients of children aged 2 to 17 years of age against influenza virus for the 2024/2025 Seasonal Influenza Vaccination Programme (SIVP).
Circumstances in which the medicine protocol applies	Targeted immunisation programme for vaccine recipients children aged 2 to 17 years of age during the 2024/2025 influenza season as they are at risk of influenza and of transmitting the influenza virus to vulnerable people in the community.
Inclusion criteria for children receiving LAIV Fluenz Nasal Spray under this medicine protocol	<p>Active immunisation to prevent influenza infection caused by influenza virus , in children aged 2 to 17 years of age where valid consent has been obtained</p> <p>Precautions:</p> <ul style="list-style-type: none"> • Acute severe febrile illness, defer until recovery • <u>Egg anaphylaxis or egg allergy</u> • NIAC (2023) advises that as LAIV Fluenz Nasal Spray has an ovalbumin content ≤ 0.024 micrograms per dose, it can be given to children with confirmed egg anaphylaxis or egg allergy in a primary care or school setting. The exception is children who have required ICU/critical care admission for a previous severe anaphylaxis to egg who should be given LAIV Fluenz Nasal Spray in hospital. • Salicylates should not be used for 4 weeks after vaccination unless medically indicated, as Reye Syndrome has been reported following the use of salicylates during wild type influenza infection. • Seek specialist advice for those who require regular oral steroids or who have previously required ICU care for asthma. • Receiving combination checkpoint inhibitors (e.g. ipilimumab plus nivolumab), because of a potential association with immune related adverse reactions. <p>The following are not contraindications to LAIV Fluenz Nasal Spray:</p> <ul style="list-style-type: none"> • Asymptomatic HIV infection • Children receiving: <ol style="list-style-type: none"> 1. Topical or inhaled corticosteroids 2. Low dose systemic corticosteroids 3. Receiving corticosteroids as replacement therapy (e.g. for adrenal insufficiency) <p>Note: LAIV Fluenz Nasal Spray can be given at the same time as other live (e.g. MMR or varicella) or inactivated vaccines.</p> <p>Covid-19 vaccines should be separated from LAIV (and other vaccines) by 14 days for children 2 to 4 years.</p>
Exclusion criteria for children receiving LAIV Fluenz Nasal Spray under this medicine protocol	<p>Contraindications</p> <ul style="list-style-type: none"> • Anaphylaxis following a previous dose of influenza vaccine or any of its constituents (other than ovalbumin – see precautions above) • Those with severe neutropenia (absolute neutrophil count $<0.5 \times 10^9/L$) should not receive any vaccines, to avoid an acute vaccine related febrile episode. This does not apply to those with primary autoimmune neutropenia who can receive influenza vaccine unless contraindicated. • Asthma: Those experiencing an acute exacerbation of asthma, including those who have had increased wheezing and/or needed additional bronchodilator treatment in the previous 72 hours. • Children who live with severely immunocompromised persons requiring isolation (e.g. post haematopoietic stem cell transplant) • Concomitant use of aspirin/salicylates, because of the association of *Reye Syndrome with salicylates and wild-type influenza infection • Influenza antiviral medication within the previous 48 hours



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	<ul style="list-style-type: none"> • Significant immunocompromise due to disease or treatment • Children post cochlear implant, until the risk of a Cerebrospinal Fluid (CSF) leak has resolved - consult with the relevant specialist • Children with a cranial CSF leak • Pregnancy • Vaccine recipients who already received a full course of any recommended flu vaccine for their age in the 2024/2025 influenza season. <p>Those who have required admission to ICU for a previous severe anaphylaxis to egg should be referred for specialist assessment with regard to vaccine administration in hospital.</p> <p>Fluenz should not be used in infants and toddlers below 24 months of age because of safety concerns regarding increased rates of hospitalisation and wheezing in this population</p> <p>Injectable Quadrivalent influenza vaccine (QIV) should be considered if LAIV Fluenz Nasal Spray is contraindicated (provided it is not also contraindicated) under individual prescription for QIV.</p> <p>*Reye's syndrome is a very rare condition that can affect children or young adults after they've had an illness like flu. It can cause serious brain problems if it's not treated quickly.</p>
<p>Actions to be taken for children who are excluded from receiving the vaccine under medicine protocol</p>	<ul style="list-style-type: none"> • All children meeting exclusion criteria must be referred to the medical practitioner for an individual medical assessment. • Document assessment in clinical notes. • Where LAIV Fluenz Nasal Spray vaccine is prescribed following medical assessment, the vaccinator may administer LAIV Fluenz Nasal Spray vaccine within their scope of practice.
<p>Description of circumstances and referral arrangements when further advice or consultation is required</p>	<p>Discuss the child with the Medical Practitioner or Lead Nurse, lead vaccinator in the event of:</p> <ul style="list-style-type: none"> • Previous adverse reaction • Other clinical concerns
<p>Documentation required for the implementation of this medicine protocol</p>	<p>Consent form must be completed by the parent/legal guardian for children under 16 years of age who receive the LAIV Fluenz Nasal Spray vaccine. Children aged 16 years and over can consent on their own behalf to have a vaccine. Relevant details including the batch number must be recorded on the consent form.</p> <p>The following documents will be required at each vaccination session:</p> <ul style="list-style-type: none"> • Vaccination session form • Blank vaccine consent forms/COVAX system • Vaccine Information Leaflets • Patient held record cards/vaccine passport • HPRA Adverse Reaction Reporting forms • HSE incident/Near Miss report forms <p>It is the responsibility of each vaccinator to be familiar with the appropriate documentation to support the safe administration of LAIV Fluenz Nasal Spray vaccine which includes the following:</p> <ul style="list-style-type: none"> • Master Medicine Protocol for the Administration of Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17years of age • National Immunisation Advisory Committee (2023) Anaphylaxis: Immediate Management in the Community. Available at https://rcpi.access.preservica.com/uncategorized/IO_a36f9e4b-4c80-432d-8264-546089359925/ • HSE Vaccination programme: Operational and Clinical Guidance for winter 2024/2025 COVID-19 and Influenza Vaccine administration, available at www.immunisation.ie



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3.0 Name of Medicine	Live Attenuated Influenza Vaccine - Fluenz Nasal Spray			
Dose & route of administration	Dose: 0.2ml - one spray (0.1ml) in each nostril Route: LAIV must only be given intranasally			
	Route of administration: Intranasal Group	Age	Previous Vaccination	Dose
	Medically at-risk	2-8 years	No previous influenza vaccine received	Two doses (4 weeks apart)
	Medically at-risk	2-8 years	Previously received influenza vaccine	One dose
	Medically at-risk	9-17 years	Not relevant	One dose
Details of product information and other data including instructions for supply and administration is available at www.medicines.ie Link to Medicine	<ul style="list-style-type: none"> LAIV Fluenz Nasal Spray is a reassortant influenza virus vaccine containing antigens from two type A and one type B virus strains, produced in Vero cells and cultured in hens' eggs. The vaccine complies with World Health Organisation (Northern hemisphere) recommendation for the 2024/2025 season. Link to Summary of Product Characteristics (SmPC) for LAIV Fluenz Nasal Spray and link to Patient information Leaflet (PIL) available at https://www.medicines.ie/medicines/fluenz-nasal-spray-suspension-36276/spc 			
Potential adverse reactions and procedures for treatment of same	<p>Following administration of the vaccine, the vaccine recipient should be advised to remain seated in the post vaccination observation area for at least 15 minutes to allow monitoring of any immediate reaction including suspected anaphylactic reaction.</p> <p>The vaccine recipient should be advised to contact the relevant medical personnel in the event of adverse reaction occurring following administration of the vaccine (General Practitioner (GP) /out of hours/Emergency Department) after the above period of observation.</p>			
Procedure for the reporting and documentation of errors and near misses involving the medicine	<p>In the case of medicine errors that directly involve the child, i.e. wrong medicine/patient/dose/route being administered or another medicine error, the vaccinator must remain with the child and closely monitor them for any adverse reactions.</p> <p>Vital signs should be recorded and the child should be reviewed by the vaccinator.</p> <p>The incident must be reported to the relevant line manager as soon as possible.</p> <p>The incident and all actions taken must be promptly recorded and the relevant National Incident Report Form (NIRF) completed as soon as is practicable after the event occurs and within one working day, available at: https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/nirf-01-v12-person-interactive.pdf</p> <p>The child's parent and/or legal guardian must be informed of the incident.</p> <p>Any suspected adverse reactions associated with medication errors should be reported to the HPRAs as outlined below and as per local policy.</p> <ul style="list-style-type: none"> Any errors and near misses not involving medications (i.e. needle stick injuries etc.) the incident and all actions taken must be promptly recorded on the relevant National Incident Management Report form and forwarded to the relevant line manager. Refer to 'EMI Tool Kit' available at https://www.hpsc.ie/a-z/EMIToolkit/. 			



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	<p>Avoid:</p> <ul style="list-style-type: none"> - Aspirin/salicylates for 4 weeks unless medically indicated (Reye's Syndrome reported after salicylate use during wild-type influenza infection) - Antiviral medication for 2 weeks post vaccination. <p>The following side effects may be experienced (see Summary of Product Characteristics):</p> <p>Very common:</p> <ul style="list-style-type: none"> - Nasal congestion/rhinorrhoea and malaise. <p>Common:</p> <ul style="list-style-type: none"> - Decreased appetite, pyrexia, myalgia and headache. <p>Very rare:</p> <ul style="list-style-type: none"> - Immediate allergic reactions <p>Very rare reports of Guillain-Barré Syndrome (GBS) have been observed in the post-marketing setting following influenza vaccination. The incidence cannot be estimated from known data. The risk of GBS following influenza infection is several times greater than that following influenza vaccination</p>
<p>Details of any necessary follow-up, action and referral arrangements</p>	<p>In the event of an adverse reaction the vaccinator must ensure that all procedures are adhered to as outlined in Section 3.</p>
<p>5.0 Staff authorised to use this medicine protocol</p>	
<p>Professional qualifications, training and competence required prior to using this medicine protocol</p>	<ol style="list-style-type: none"> 1) Be a registered healthcare professional, on the active register maintained by the relevant professional regulatory body in Ireland 2) An approved <i>Basic Life Support for Health Care Providers Course</i> within the last two years (For e.g. Irish Heart Foundation (IHF), American Heart Association (AHA)) 3) Initial <i>National Anaphylaxis Education Programme for Health Care Professionals</i> accessible on www.HSELand.ie followed by a two hour classroom based skills workshop. Recertification is required every two years by completing the on-line <i>National Anaphylaxis Education Programme for Health Care Professionals</i> accessible on www.HSELand.ie or the relevant anaphylaxis management programme approved by their professional organisation. 4) <i>Live Attenuated Influenza Vaccine (LAIV) education programme 2024/2025</i> accessible on www.HSELand.ie <p>Recommended: <i>Storing and Managing Vaccines</i> accessible on www.HSELand.ie</p> <p>Note: In addition to the above, the vaccinator must complete the education, training, and self-assessment of competence requirements as recommended by their professional organisation /regulatory authority.</p> <p>Registered Nurses and Registered Midwives, Registered Physiotherapists, Radiographers, Radiation Therapists, Optometrists and Vaccinators registered with Pre-Hospital Emergency Care Council (PHECC) must read their Section B document specific to this medicine protocol and complete the Self-Assessment of Competency Form relevant to their profession.</p>



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National Immunisation Advisory Committee (2023) Anaphylaxis: Immediate Management in the Community. Available at https://rcpi.access.preservica.com/uncategorized/IO_a36f9e4b-4c80-432d-8264-546089359925/

National Clinical Guideline No. 30 (2023) – Infection Prevention and Control (IPC)
<https://www.gov.ie/en/publication/a057e-infection-prevention-and-control-ipc/>.

National Immunisation Advisory Committee *Immunisation Guidelines for Ireland* Dublin: Royal College of Physicians Ireland (*Online Update available at*
<https://www.rcpi.ie/Healthcare-Leadership/NIAC/Immunisation-Guidelines-for-Ireland>

S.I. No. 245/2021 - Medicinal Products (Prescription and Control of Supply) (Amendment) (No. 7) Regulations 2020. Available at <https://www.irishstatutebook.ie/eli/2021/si/245/made/en/print>

S.I. No. 422/2023 - Medicinal Products (Prescription and Control of Supply) (Amendment) (No. 7) Regulations 2020. Available at <https://www.irishstatutebook.ie/eli/2021/si/245/made/en/print>