Make a Strong Flu Vaccine Recommendation





Information for Information for Pediatricians

CDC recommends everyone 6 months and older get an influenza (flu) vaccine every year.

Your Vaccine Recommendation is Critical

As a health care professional (HCP), your strong recommendation is a critical factor in whether your patients get a flu vaccine. Children younger than 5 years of age – especially those younger than 2 years – are at high risk of developing serious <u>flu-related complications</u>. A flu vaccine offers the best defense against getting influenza and spreading it to others. Getting vaccinated can reduce flu illnesses, doctor's visits, missed work and school days, and prevent flu-related hospitalizations and deaths.

Children 6 months-17 years Need a Flu Vaccine

Millions of children get sick with seasonal flu, thousands are hospitalized, and some children die from flu each year.

- Flu vaccine can be life-saving in children.
- Among reported pediatric deaths since 2004, about 80 percent of the deaths have occurred among children who were not fully vaccinated against flu.
- Children aged 6 months up to their 5th birthday even those who are healthy –
 are at high risk of developing serious flu complications simply because of their age.
 Children of any age with certain long-term health problems, such as asthma,
 diabetes, or neurological and neurodevelopmental conditions, also are at high risk
 for complications from flu.



When to Vaccinate

CDC recommends that vaccination should be offered in September or October. However, vaccination should continue throughout influenza season as long as influenza viruses are circulating, even into January or later. Children and pregnant people in their third trimester can be vaccinated as soon as influenza vaccine is available—even if this is in July or August.

Some children 6 months through 8 years of age require two doses of influenza vaccine. Children 6 months through 8 years getting vaccinated for the first time, and those who have only previously received one dose of vaccine, should get two doses of vaccine this season. The first dose should be given as soon as vaccine becomes available.

The second dose should be given at least 28 days after the first dose. The first dose "primes" the immune system; the second dose provides immune protection. Children who only get one dose but need two doses can have reduced or no protection from a single dose of flu vaccine. All children who have previously received two doses of vaccine (at any time) only need one dose of vaccine this season.

If you do not offer vaccine at your facility, make a influenza vaccine referral, and then follow up with each patient during subsequent appointments to ensure they got vaccinated. If the patient remains unvaccinated, repeat the recommendation/referral and try to identify and address any questions or concerns.

How to Make a Strong Flu Vaccine Recommendation

Based on years of research into vaccine motivators, CDC has developed a mnemonic device to help HCPs make a strong vaccine recommendation. This method known as "SHARE" can help you to make a strong vaccine recommendation and provide important information to help patients make informed decisions about vaccinations.



S- SHARE why an influenza vaccine is right for the patient given their age, health status, lifestyle, occupation, or other risk factors.

"This vaccine can protect you and your family from getting sick from flu. By getting a flu vaccine today, you'll be protecting yourself and the people around you, like your children and parents, who are more vulnerable to serious flu-illness."

H- HIGHLIGHT positive experiences with influenza vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in flu vaccination.

"In addition to recommending a yearly flu vaccine to my patients, I get one each year to protect myself and my family from flu"

A- ADDRESS patients' questions and any concerns about influenza vaccines, including for example, side effects, safety, and vaccine effectiveness in plain and understandable language. Acknowledge that while people who get an influenza vaccine may still get sick, there are studies to show that their illness may be less severe.

"A flu vaccine cannot cause flu infection. The most common side effects of an influenza vaccine are mild, like redness, swelling, soreness, or low-grade fever for a flu shot. This should go away within a few days. Flu vaccines protect against flu illness but aren't 100% effective, so even if you get vaccinated you might still become sick with flu. It's important to get your flu vaccine because studies show that even if you do get sick, vaccination may make your flu illness less severe."

R- REMIND patients that influenza vaccines protect them and their loves ones from serious influenza illness and complications..

"Flu activity is going to start to pick up, and CDC says to expect more cases in the coming months. That is why I want to make sure I help protect you and your loved ones against flu and its potentially serious complications."

E- EXPLAIN the potential costs of getting influenza, including potential serious health effects for the patient and time lost (such as missing work or family obligations), financial costs, and potentially spreading flu to more vulnerable family and friends.

"It's important to vaccinate your children this season because flu vaccination can reduce potential flu illnesses, doctor visits, hospitalizations and even death. Vaccination can also keep your children from missing school, and you from missing work due to flu, and can protect those around you who are more vulnerable to potentially serious flu complications."

Types of Vaccines Available for Children 6 months-17 years

For the 2022-2023 influenza season, providers may choose to administer any licensed, age appropriate influenza vaccine – inactivated influenza vaccine (IIV4) or live attenuated influenza vaccine (LAIV4):

Vaccine type	Vaccine description	Recommended for*
Quadrivalent (4-component) Inactivated Influenza Vaccine (IIV4)	Injectable inactivated vaccine containing the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common	People 6 months and older
Live Attenuated Influenza Vaccine (LAIV4)	Intranasal live attenuated vaccine containing the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common	Healthy non-pregnant people 2 through 49 years of age
Quadrivalent Cell Culture-Based Inactivated Influenza Vaccine (ccllV4)	Injectable influenza vaccine produced without the use of influenza viruses or eggs; containing the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common	People 6 months and older

*Licensed ages vary for different brands; consult package insert for appropriate ages for specific vaccines