Quadrivalent Inactivated Influenza Vaccine (Inactivated Split Virion) (QIIV)  
FLULAVAL® TETRA Supplier: GlaxoSmithKline Inc.  

INDICATIONS:
- See 2020/21 Seasonal Influenza Vaccine Eligibility
- Intended for use in eligible children 6 months to 17 years of age (inclusive) including those with contraindications to LAIV-Q. ^

The vaccine is not approved for use in those less than 6 months of age.

DOSES AND SCHEDULE:
Children 6 months-8 years of age (inclusive): 1 or 2 doses given as 0.5 mL IM.

Children under 9 years of age who have not previously received any seasonal influenza vaccine require 2 doses given 4 weeks apart. If the child has received 1 or more doses in any previous season, only a single dose is required. For children requiring 2 doses within the season, QIIV or TIIV may be given interchangeably with LAIV-Q for the 1st or 2nd dose if LAIV-Q is not available.

Children and Adolescents 9-17 years of age (inclusive): 1 dose given as 0.5 mL IM.

Adults 18 years of age and older: 1 dose given as 0.5 mL IM.

ADMINISTRATION:
Discard multi-dose vials 28 days after first entry.

BOOSTER DOSES AND RE-IMMUNIZATION:
Annually.

SEROLOGICAL TESTING:
Serological testing is not recommended before or after immunization.

CONTRAINDICATIONS:
1. History of anaphylactic reaction to a previous dose of any type of influenza vaccine or to any component of FLULAVAL® TETRA.
2. History of Guillain-Barré syndrome (GBS) within 8 weeks of receipt of a previous dose of influenza vaccine without another cause being identified.
3. Receipt of a CTLA-4 inhibitor (e.g., ipilimumab) alone or in combination with other checkpoint inhibitors for the treatment of cancer. Inactivated influenza vaccine should be given 4-6 weeks before starting treatment or 4-6 weeks after the last dose. For more specific details refer to the BC Cancer Influenza vaccine recommendations.

^ In the event of vaccine surplus in the provider’s inventory beyond that required for those under 18 years old, this vaccine may be provided to those 18 years of age and older as part of the publicly funded program in BC.
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PRODUCT COMPONENTS:
Potential allergens: egg protein, polysorbate 80, thimerosal (in multi-dose presentation only at 50 µg per 0.5 mL dose; 0.01% w/v) (See SPECIAL CONSIDERATIONS).
Other components: potassium chloride, disodium hydrogen phosphate heptahydrate, potassium dihydrogen phosphate, α-tocopheryl hydrogen succinate, sodium deoxycholate, ethanol, formaldehyde, sucrose.

PRECAUTIONS:
Severe oculo-respiratory syndrome (ORS) after a previous dose of influenza vaccine. A

SPECIAL CONSIDERATIONS:
Egg allergic individuals (including those who have experienced anaphylaxis following egg ingestion) can be immunized with inactivated or live attenuated influenza vaccine in any setting attended by immunization service providers who are following standard vaccine administration practice. B

ADVERSE EVENTS:
Local: pain, swelling, redness.
Systemic: myalgia, headache, fever, malaise, arthralgia. Infants and toddlers may also experience irritability, loss of appetite and vomiting. Fewer than 1 in 20 people may develop oculo-respiratory syndrome (ORS). Symptoms include red eyes, a cough, and/or sore throat and/or hoarseness.

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A See Safety Issues Applicable to Influenza Vaccines, 2. Oculo-Respiratory Syndrome (ORS).