

ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

VACCINES FOR CHILDREN PROGRAM

VACCINES TO PREVENT INFLUENZA

The purpose of this resolution is to (1) update the Inactivated Influenza Vaccine component of the resolution to add options for vaccination of 18-year-olds who are solid organ transplant recipients and (2) to update the links in the contraindications and precautions sections of both components of the resolution.

VFC resolution 6/23-1 is repealed and replaced by the following:

Inactivated Influenza Vaccine (IIV3)

Eligible Groups

All children aged 6 months through 18 years.

Recommended Vaccination Schedule and Intervals

- 6 months through 8 years: 1 or 2 doses, as noted in the current ACIP recommendations
- 9 through 18 years: 1 dose
- Minimum Age: 6 months
- Minimum interval between dose 1 and dose 2 (where applicable): 4 weeks

The table below lists the currently approved inactivated influenza vaccines in the VFC program, including the age indication for each vaccine.

Brand Name (1)	Presentation	Age Indication
Afluria (Trivalent)	0.5 mL pre-filled syringe	≥36 months
Afluria (Trivalent)	5.0 mL multi-dose vial	≥6 months
Fluarix (Trivalent)	0.5 mL pre-filled syringe	≥6 months
Flucelvax (Trivalent)	0.5 mL pre-filled syringe	>6 months
Flucelvax (Trivalent)	5.0 mL multi-dose vial	≥6 months
Flulaval (Trivalent)	0.5 mL pre-filled syringe	≥6 months
Fluzone (Trivalent)	0.5 mL pre-filled syringe	≥6 months
Fluzone (Trivalent)	5.0 mL multi-dose vial	≥6 months
Fluzone HD (Trivalent) (2)	0.5 mL pre-filled syringe	≥65 years, and younger as noted in footnote (2)
Fluad (Trivalent) (2)	0.5 mL pre-filled syringe	≥65 years, and younger as noted in footnote (2)

Table notes

(1) The use of brand names is not meant to preclude the use of other comparable licensed vaccines.

(2) Persons aged 18y should receive an age-appropriate influenza vaccine (i.e., one approved for their age), with the exception that solid organ transplant recipients on immunosuppressive medication regimens may receive high-dose inactivated influenza vaccine (HD-IIV3) or adjuvanted inactivated influenza vaccine (aIIV3) as acceptable options, without a preference over age-appropriate IIV3s.

Recommended Dosage

Refer to product package inserts available at: <https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states>

Contraindications and Precautions

Contraindications:

1. For egg-based IIV: History of severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine (other than egg) or after previous dose of any influenza vaccine.
2. For cell culture-based IIV: history of severe allergic reaction (e.g., anaphylaxis) to cell culture-based IIV or any component of the vaccine.

Precautions:

1. Moderate or severe acute illness with or without fever
2. GBS within 6 weeks following a previous dose of influenza vaccine
3. For cell culture-based IIV only: History of severe allergic reaction to any other influenza vaccine.

Additional details of contraindications and precautions can be found at: [Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2024–25 Influenza Season | MMWR \(cdc.gov\)](#)

Live Attenuated Influenza Vaccine (LAIV3)

Eligible Groups

All healthy, non-pregnant children and adolescents (those who do not have an underlying medical condition that predisposes them to influenza complications) aged 2 through 18 years.

Recommended Vaccination Schedule and Intervals

- 2 years through 8 years: 1 or 2 doses, as noted in the current ACIP recommendations
- 9 through 18 years: 1 dose
- Minimum Age: 2 years
- Minimum interval between dose 1 and dose 2 (where applicable): 4 weeks

Recommended Dosage

Refer to product package inserts available at:

<https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states>

Contraindications and Precautions

Contraindications and precautions can be found at:

[Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2024–25 Influenza Season | MMWR \(cdc.gov\)](#)

[If an ACIP recommendation regarding influenza vaccination is published within 6 months following this resolution, the relevant language above (except in the eligible groups sections) will be replaced with the language in the recommendation and incorporated by reference to the URL.]

Adopted and Effective: October 23, 2024

This document can be found on the CDC website at:

[Vaccines Provided by the VFC Program | VFC Program | CDC](#)