

Inactivated Influenza/Pneumococcal Polysaccharide Vaccine Immunization Screening Questions

1. Have you had any problems with previous flu vaccines?
2. Do you have any severe life-threatening allergies to the following: a previous dose of vaccine or a component of the vaccine?
3. Do you have a disease/treatment which lowers your immunity?
4. Do you have any questions?

- 1 Influenza vaccines are contraindicated if client has a history of GBS* within 8 weeks following a previous dose of influenza vaccine. Other previous problems can include: ORS, fainting, soreness, pain management, etc., but are not considered contraindications.
*Guillain-Barré syndrome is a disorder in which the body's immune system attacks part of the peripheral nervous system.

- 2 Check specific contraindications for each type of vaccine.
 - A client cannot be offered vaccine today if they have a contraindication to the vaccine(s).
 - Client should consult with their doctor or call VCH CDC (604-675-3900) for MHO consult to assess whether this is a true contraindication to a vaccine or to a vaccine component. Local reactions are not contraindications. Live and inactivated influenza vaccines can be administered in any setting which follows standard vaccine administration practices.

Egg allergy, including anaphylaxis to eggs is NOT a contraindication to receiving any influenza vaccine.
Refer to: [\(BC Immunization Manual: Safety Issues Applicable to Influenza Vaccines Egg Allergic Individuals\)](#).

- 3 Receipt of CTLA-4 inhibitor are a contraindication to receipt of any influenza vaccine. To ensure that patients with cancer and/or on treatment receive appropriate influenza immunization advice, please refer to: [BC Cancer Influenza Vaccine Recommendation](#).

Pneumococcal vaccination should be administered **at least 2 weeks** prior to the initiation of immunosuppressive therapy if at all possible, but can be offered to persons receiving long term immune suppressive medication.

Intramuscular vaccines should be given with caution to individuals with bleeding disorders (i.e., hemophilia or on anticoagulant therapy). To avoid the risk of hematoma apply firm pressure to the immunization site **x 5 minutes post injection**. Administer pneumococcal vaccine via SC route for clients with a history of bleeding disorders.