Vaccine Administration & Injection Technique

October 26, 2009



Just like Riding a Bike!

Infection Control and Sterile technique

Landmarking

Administration of Vaccine

Infection Control and Sterile Technique

- Wash hands with soap or use alcohol based skin rub before each client
- Cleanse skin at the site of injection with alcohol swab and allow to dry before injection.
- Gloves are not necessary unless skin on provider's hands is not intact.

Infection Control and Sterile Technique

Never recap a needle

Sterile needles and syringes are to be used for each vaccination

Always dispose of used needles in sharps container

Packaging for H1N1 Vaccine









Reconstituting H1N1 Vaccine



Steps to Follow for Reconstitution

- Shake both vials and inspect contents.
- 2. Wipe both adjuvant and antigen vials with alcohol.
- 3. You do not need to inject any air into the vials.
- Insert 20 gauge needle with 5 cc syringe into the adjuvant vial (leaving the vial vertical) and withdraw the entire contents.
- Insert the needle into the antigen vial and inject the adjuvant.
- 6. Remove the needle and discard.
- Shake (gently)the vial to mix.

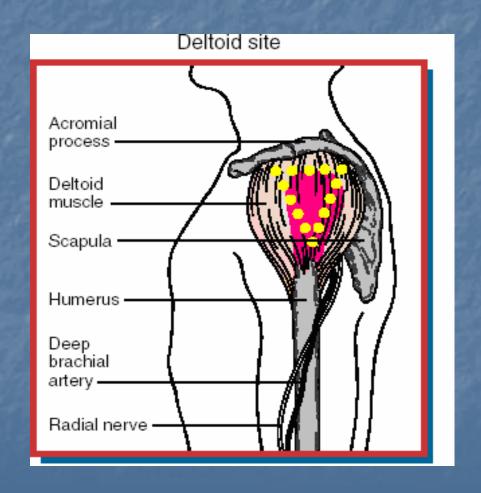
Steps to Follow for Drawing Up

- 1. Shake the vial and inspect contents prior to each dose withdrawn.
- Wipe vial stopper with alcohol.
- Select needle (length based on client) with a 3 cc syringe
 - Usually use a 25 gauge 1" needle
 - If larger person, can use 25 gauge 1 ½" needle to get deep into the muscle
 - For infants and young children, can use 25 gauge 5/8" needle

- Twist needle to ensure it is on tight.
- Remove cap and insert needle into vial.
- Invert and withdraw the correct dose of vaccine into the syringe.
 - 0.5 ml for any one over 10 years
 - 0.25 ml for those 6 months 10 years
- 7. Remove the needle from the vial.
- During this process, if the needle becomes contaminated, start process over again.

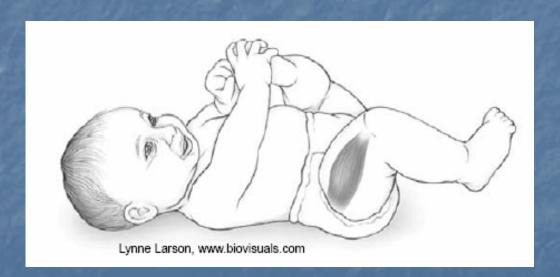
IM Landmarking Deltoid

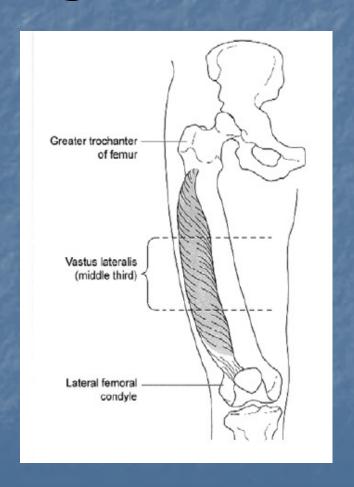
 Injection should be given 3 finger widths below the acromial process



IM Landmarking Anterolateral Thigh

Use this site for infants under 1 year





Intramuscular Injections

Select the appropriate injection site

- Gently tap or massage the site
 - Stimulates nerve endings & minimizes pain when the needle is inserted

Cleanse the skin

Intramuscular Injections

Position the syringe at 90° angle to the skin and quickly and firmly insert the needle through the skin and subcutaneous tissue deep into the muscle

- Supporting the syringe rapidly inject the vaccine into the muscle
 - The amount of serum being injected is not enough to distend the muscle

Strategies to Reduce Pain with Immunization

Self-distraction/Adult-led distraction

Physical comfort/hand holding

Deep breathing

Inject vaccines rapidly without aspiration

Vaccine Stability

- Recommendation: store 2 to 8 whether reconstituted or not
- But may be kept at room temperature if required (mass imms clinics): 24 hours
- Does not need to be brought to room temperature prior to reconstitution

Ensure Your 5 Rights!

- Right Medication
- Right Dose
- Right Time
- Right Route
- Right Patient

Medication Error

- In the event that you have a med error refer to policy:
- **B9.010 Medication Error**
- Inform the clinic coordinator, complete the Medication Error Form, notify the VPD manager or supervisor as per the policy

Needlestick Exposure

- In the event you have a needlestick exposure, refer to the policy:
- Needlestick Exposure
- Allow wound to bleed freely, wash wound with soap and water thoroughly, notify
 VPD manager or supervisor, seek medical attention

Questions?