



## **NWT Seasonal Influenza Program Guidelines: 2023-2024**

The seasonal influenza vaccine is planned for implementation no earlier than the second week of October 2023. This year two seasonal influenza vaccine products will be available:

- **FLUZONE® QUADRAVALENT (QIV)**
- **FLUZONE® QUADRAVALENT HIGH-DOSE (QIV HD)**

Both vaccine products include the following influenza strains:

- **A/Victoria/4897/2022(H1N1)pdm09-like strain**
- **A/Darwin/9/2021 (H3N2)-like strain**
- **B/Austria/1359417/2021-like strain**
- **B/Phuket/3073/2013-like strain**

Age Group	Influenza Vaccine Product	Dose	Comments
Six months of age and older	FLUZONE® QIV Sanofi Pasteur	0.5mL	Multidose vials (10 doses) 15mcg of each strain/0.5mL dose
65 years and older and who live in a long-term care facility	FLUZONE® QIV HD Sanofi Pasteur	0.7mL	Single-dose prefilled syringes 60mcg of each strain/0.7mL dose

In order to administer vaccines in the NWT, HCPs must be competent as per the clinical practice information notice: [#152: NWT Mandatory Education Program on Immunization Competency](#).

This document does not replace the guidance contained in the [Canadian Immunization Guide](#), the National Advisory Committee on Immunization (NACI) statement, or the vaccine product monographs. It is the vaccine administrator's responsibility to ensure they have reviewed the most current documents included in this influenza package. If there is a discrepancy between the NACI statement and the product monograph, please follow the NACI statement.

1. [Canadian Immunization Guide](#)
2. [NACI Statement on Seasonal Influenza Vaccine for 2023-2024](#)
3. [2023 Vaccine Product Monographs](#)

## **Influenza Vaccination Recommendations**

- All NWT residents six months of age and older.
- High-risk groups are a priority for influenza vaccination as they are particularly vulnerable to complications of influenza and hospitalization.
- People capable of transmitting influenza to those at high risk.
- Others

### **High-Risk Groups**

In addition to planned public flu clinics every opportunity should be taken to vaccinate high-risk individuals (e.g., when presenting at emergency departments, admitted in hospital, at scheduled appointments, at outreach centers/programs, and during home visits).

#### **People at high-risk of influenza-related complications/hospitalization include:**

- Children 6 months – 59 months of age.
- Adults and children with the following chronic health conditions:
  - Cardiac or pulmonary disorders (includes bronchopulmonary dysplasia, cystic fibrosis, and asthma).
  - Diabetes mellitus and other metabolic diseases.
  - Cancer, immune compromising conditions (due to underlying disease, therapy, or both, such as solid organ transplant or hematopoietic stem cell transplant recipients).
  - Renal disease.
  - Anemia or hemoglobinopathy.
  - Neurologic or neurodevelopmental conditions that increase risk for severe disease/complication from influenza. Includes febrile seizures and isolated developmental delay for children but excludes migraines and psychiatric disorders (without neurologic conditions).
  - Morbid obesity (BMI of 40 and over).
  - Children 6 months – 18 years of age undergoing treatment for long periods with acetylsalicylic acid, because of the potential increase of Reye's syndrome associated with influenza.
- Adults 65 years of age and older.
- All pregnant individuals.
- People of any age who are residents of nursing homes or other long-term care facilities.
- People residing in small, rural, isolated communities with limited access to health care services.

**([NACI p.37, 2023](#))**

### **People capable of transmitting influenza to those at high risk:**

- Health care and other care providers in facilities and community settings who, through their activities, are capable of transmitting influenza to those at high risk.
- Household contacts, both adults and children, of individuals at high risk including:
  - Household contacts of infants less than 6 months of age, as these infants are at high risk but cannot receive influenza vaccine.
  - Members of a household expecting a newborn during the influenza season.
- Those providing regular childcare to children 0–59 months of age.
- Those who provide services within closed or relatively closed settings to people at high risk (e.g., corrections officer, day shelter worker).

### **Others:**

- People who provide essential community services (e.g., first responders).
- People in direct contact with poultry infected with avian influenza during culling operations.

### **Co-Administration of Influenza Vaccine and COVID-19 Vaccine**

[NACI](#) (p.7) recommends:

- **“Administration of COVID-19 vaccines may occur concurrently with (i.e., same day), or at any time before or after seasonal influenza immunization for those aged 6 months and older”.**
- “Different injection sites and separate needles and syringes should always be used for concurrent parenteral injections. If multiple injections in the same limb are required, the injection sites should be separated by at least 2.5cm (1 inch)”.

### **Immunization of Health Care Workers (HCWs)**

HCWs include any person, paid or unpaid, who provides services, works, volunteers or trains in a hospital, clinic or other healthcare facility.

Given the potential for HCWs and other care providers to transmit influenza to individuals at high risk and knowing that vaccination is the most effective way to prevent influenza, [NACI](#) recommends that, in the absence of contraindications, HCWs and other care providers in facilities and community settings should be vaccinated against influenza annually.

HSS Authorities must keep track of HCWs who have and have not been vaccinated with influenza vaccine each year. They must be able to provide the list upon request from the OCPHO in the event of a facility outbreak. Every facility and HSS in the NWT should have a policy and procedure in place regarding HCW influenza immunization and symptomatic illness.

## **Vaccine Ordering**

Influenza vaccine product is procured through the National Bulk Purchasing Agreement. All vaccine products must be ordered through an NTHSSA regional pharmacy located at Stanton Territorial Hospital or Inuvik Regional Hospital.

Now is a good time to ensure HSS Authority vaccine storage and handling policies and procedures are up to date, and to review these guidelines with your staff especially if you will be conducting off-site clinics in the community. See the Canadian Immunization Guide:

- [Canadian Immunization Guide: Part 1 Key Immunization Information: Storage and Handling of Immunizing Agents and Handling of Immunizing Agents.](#)

## **Mandatory Reporting**

All influenza vaccinations must be documented in the EMR. For communities, facilities or units not on the EMR include influenza vaccines with monthly immunization registry reporting: [Vaccination Administration Report Form](#)

The following **MUST** be reported to the Office of the Chief Public Health Officer (OCPHO):

- Outbreak activity must be reported within 24 hours to the OCPHO by phone at (867)920-8646.
  - Outbreak of influenza-like illness (ILI) or influenza in a hospital, residential institution (i.e., prisons/ correctional facilities) or long term care facility (LTCF) is defined as: > Two or more cases of ILI (including staff or residents) within a 7 day period, including at least one laboratory confirmed case.
  - Please refer to the [NWT Communicable Disease Manual](#)
- All suspect or confirmed cases of influenza with severe outcomes must be reported by Secure File Transfer (SFT) within 24 hours to: [outbreak@gov.nt.ca](mailto:outbreak@gov.nt.ca) via the
  - [Respiratory Virus Severe Outcomes Surveillance Reporting Form](#)
- Adverse Event Following Immunization (AEFI).
  - Any unexpected, serious event (an event that is not listed in the vaccine product monograph but may be related to immunization).
  - Must be reported within 24 hours of identification of the AEFI to OCPHO. Completed AEFI forms may be sent by SFT to [CDCU@gov.nt.ca](mailto:CDCU@gov.nt.ca) or by fax to (867)873-0442.
  - [Report of Adverse Events Following Immunization \(AEFI\) Form](#) (also available in EMR)

## **Antivirals**

- The antiviral Oseltamivir (TAMIFLU®) is now a **MUST STOCK** item according to the [2021 NWT Formulary](#).
- Oseltamivir (TAMIFLU®) is indicated for use in treatment of acute uncomplicated influenza within 48 hours of onset of illness. However, there is evidence in hospitalized patients that oseltamivir can have efficacy up to 4-5 days after symptom onset. Therefore, the OCPHO

endorses ordering Oseltamivir for hospitalized patients with severe or progressive influenza illness or those at high risk of developing complications regardless of onset.

- For more information on antiviral use during an outbreak, follow the guidance provided by the [Association of Medical Microbiology and Infectious Disease Canada \(AMMI\)](#).

## **Outbreak Management including Long Term Care Facilities**

Confirmed or suspected outbreak activity must be reported within 24 hours to the OCPHO by phone at (867)920-8646. All facilities are responsible for having their own outbreak management protocols in place.

All long-term care facilities must have processes in place to track influenza vaccine uptake and outbreaks of influenza disease in both residents and staff. This list must be available upon request by the CPHO or designate in the event of an outbreak.

## **Attachments and Additional Information**

Association of Medical Microbiology and Infectious Disease Canada:

[Guidelines for the use of Antivirals](#)

Government of Alberta Health Services: [Long Term Care Outbreak Management](#)

Government of Canada Drug Product Database online query for vaccine product monographs  
[Fluzone QID and Fluzone QID HD](#)

Government of the Northwest Territories

[Communicable Disease Manual: Chapter on Seasonal Influenza](#)

Government of the Northwest Territories

[Instructions for Respiratory Virus Severe Outcomes Surveillance Report Form](#)

Government of the Northwest Territories Seasonal Influenza Program Package for 2023-2024

[Seasonal Influenza Program Package 2023-2024 | HSS Professionals \(gov.nt.ca\)](#)

National Advisory Committee on Immunization Canadian Immunization (NACI): Statement on Seasonal Influenza Vaccine for 2023-2024:

[National Advisory Committee on Immunization: Canadian Immunization Guide Statement on Seasonal Influenza Vaccine for 2023-2024](#)

National Vaccine Storage and Handling Guidelines:

[National Vaccine Storage and Handling Guidelines for Immunization Providers - 2015](#)

Public Health Agency of Canada: Adverse Event Following Immunization form:

Roche Canada: [Oseltamivir \(TAMIFLU®\) Product Monograph](#)

### **Additional Information for the General Public**

Influenza program promotional materials for HCWs and the general public can be downloaded, printed or ordered from the following approved locations:

Government of Canada FluWatchers: [Link to Volunteer](#)

Government of the Northwest Territories Influenza/Flu Programs and Services:  
<https://www.hss.gov.nt.ca/en/services/influenza-flu>

Government of the Northwest Territories Influenza Immunization Clinics:  
[NTHSSA/Flu](#)

Government of the Northwest Territories Influenza Vaccine Information Sheets:  
[Immunization/Vaccination | Health and Social Services](#)

Government of the Northwest Territories: [Wastewater Monitoring](#)

Immunize Canada: <https://immunize.ca/influenza-campaign>

Public Health Agency of Canada/Immunize.ca promotional material:  
<https://www.canada.ca/en/public-health/services/diseases/flu-influenza/flu-influenza-awareness-resources.html>

World Health Organization: [Disease Outbreaks](#)