Northern Territory of Australia

Medicines, Poisons and Therapeutic Goods Act 2012

Menzies School of Health Research Seasonal Influenza Vaccination Protocol Approval

I, Christine Maree Connors, Chief Health Officer:

(a) under section 254(1) of the Act, approve each Scheduled substance treatment protocol specified in Schedule A;

(b) under section 254(3) of the Act, state that each Schedule substance treatment protocol specified in Schedule A remains in effect for a period of 2 years on and from the date of this instrument.

Dated 11 March 2024 @ 11.19am

Chief Health Officer

Schedule A

Title	Publication Date	Author
Menzies School of Health Research Seasonal Influenza Vaccination Protocol	6 March 2024	Medicines and Poisons, Northern Territory Government, Department of Health

Menzies School of Health Research Seasonal Influenza Vaccination Protocol

Areas Applicable	NT Wide
Health Professionals authorised by this SSTP	Nurses, Midwives or Aboriginal Health Practitioners employed by or contracted to Menzies School of Health Research
Scheduled Substance(s)	Influenza Vaccine
Indication	Seasonal vaccination for the purpose of preventing illness from influenza
Contraindications and/or Exclusions*	As per Australian Immunisation Handbook
Dose and Route*	Single dose given intramuscularly in the deltoid muscle of the upper arm* *preferred route is in the deltoid muscle of the upper arm. However alternate sites, such as vastus lateralis muscle of the thigh or ventrogluteal muscle of the hip, may also be used at clinician's discretion.
Administration	Immunisation providers should screen people for eligibility before vaccination, obtain valid consent, and ensure that the correct equipment and procedures are in place before vaccination. **Management of Anaphylaxis** Administration of any vaccine from this protocol must occur where another person, who holds a current Basic Life Support Certificate or Provide First Aid Certificate, is immediately available to provide emergency assistance if required. Administration of any vaccine from this protocol must occur where there is a complete anaphylaxis Emergency Response Kit for the use in treatment and management of anaphylaxis in line with procedures from the current Australian Immunisation Handbook. Emergency Response Kit must be checked regularly, maintained, easily accessible and contain: • Adrenaline 1:1000 (minimum of 3 ampoules) • 1mL syringes and 25mm needles for IM injection (minimum of 3 of each) • Cotton wool swabs • Pen and paper to record time of administration of adrenaline • Laminated copy of 'Recognition and treatment of anaphylaxis' and the 'Doses of intramuscular 1:1000 adrenaline for anaphylaxis' available from

	the Table. Recognition and treatment of anaphylaxis | The Australian Immunisation Handbook (health.gov.au) **Administration Premises Requirements** Vaccines must be administered in a location that: • ensures privacy of the consumer • ensures sufficient room to accommodate the consumer, carer and immuniser and allow sufficient space, surfaces and be able to respond to medical emergencies including sufficient space for the consumer to lie down if required • has equipment to facilitate safe immunisation administration including; o Easy access to a sink with running water and hand soap for washing hands and/or ready access to hand sanitiser o Sharps disposal container and dedicated bin for medical waste o Equipment and storage facilities to meet the National Vaccine Storage Guidelines o Consumables for the delivery of a vaccine e.g. needles, hypoallergenic tape, cottonwool swabs and/or adhesive bandage strips Vaccines must be stored in accordance with the National Vaccine Storage Guidelines.
Dose Frequency*	As per Australian Immunisation Handbook
Drug Interactions*	As per specific manufactures product information advice
Monitoring requirements*	As per Australian Immunisation Handbook
Health Professional Accreditation Requirements	Health professionals using this guideline must meet the requirements outlined by the NT Chief Health Officer: ***Nurses and Midwives***: o Be registered with the Nursing and Midwifery Board of Australia with no conditions, undertakings or notations which may limit delivery of clinical services directly to patients ***Aboriginal Health Practitioners:*** • Be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients **All health professionals following this protocol must:** • Maintain continuing professional development related to skills and competencies required for the delivery of medicines and vaccines including the use of multi-dose vials and management of anaphylaxis

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- Hold a current Cardiopulmonary Resuscitation (CPR) certificate

All health professionals administering vaccines from this protocol must have completed and hold a current qualification in:

- A program of study accredited by Health Education Services Australia (HESA) **or**;
- A program of study approved by the Chief Health Officer **or**;
- Completed the assessment of an immuniser program of study that meets the curriculum content requirements of the National Immunisation Education Framework for Health Professionals
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<tr><td>Documentation
(including necessary information to the patient)</td><td colspan="3">Patient consent (written or verbal) for vaccination must be recorded. Records of this should be maintained by the clinical service.

The health professional must:
• Complete all clinical documentation requirements as outlined by the Health Service.
• Enter the patient details and vaccine brand name, dose, site of administration and batch number in the Australian Immunisation Register within 24 hours and no later than 10 days after administration. For many vaccine providers this involves entry into routine clinical information systems for automatic upload</td></tr>
<tr><td>Related Documents</td><td colspan="3">Australian Immunisation Handbook
Australian Medicines Handbook
Medicines and Poisons Regulations 2014 – Section 73 – Retention of documents relating to receipt or supply of Scheduled substances
Medicines and Poisons Regulations 2014 – Section 75 – Record of supply or administration of Schedule 4 or 8 substance in clinical or other records.</td></tr>
<tr><td rowspan="2">Chief Health Officer</td><td>Signature</td><td>Name</td><td>Date</td></tr>
<tr><td>EDOC2024/70267</td><td>Adj Prof Christine Connors</td><td>11Mar24 @ 11.19am</td></tr>
<tr><td>Period of effect</td><td colspan="3">This SSTP is effect until 11/03/2026 unless revoked earlier</td></tr>
<tr><td colspan="4">References:
* The drug information provided is to act as a guide to outline the limits of legal dealing with the named scheduled substances. Further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or interactions are present refer to medical officer before administration</td></tr>
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