

SPECIAL eBULLETIN

FOR PROFESSIONAL AND FACILITY PROVIDERS

January 7, 2022

ADMINISTRATION OF THE FLU AND COVID-19 VACCINATIONS

[Flu vaccination should be deferred for people with suspected or confirmed COVID-19](#), even if they don't have symptoms, until they [meet criteria for leaving quarantine](#) (based on [Centers for Disease Control and Prevention \(CDC\) guidance](#)). While mild illness is not a contraindication to flu vaccination, vaccination visits for these members should be postponed to avoid exposing healthcare personnel and other patients to the virus that causes COVID-19. When scheduling or confirming appointments for flu vaccination, members should be instructed to notify your office or clinic in advance if they currently have or if they develop any symptoms of COVID-19.

If the member has a confirmed case of COVID-19, [flu vaccination should be deferred until the member is no longer acutely ill from COVID-19](#). This may be different for members who are already being cared for in a medical setting than it is for members who are quarantining at home. In a medical setting, the timing for vaccination is a matter of clinical discretion.

If a member is eligible, both the influenza and COVID-19 vaccines can be administered at the same visit, without regard to timing [as recommended by CDC and its Advisory Committee on Immunizations Practices \(ACIP\)](#). Best practices for [administering more than one vaccine](#), including COVID-19 vaccines and influenza vaccines, include:

- Labeling each with the name and dosage (amount) of vaccine, lot number, the initials of the preparer, and the exact beyond-use time, if applicable.
- Always injecting vaccines into different injection sites with sites at least 1 inch apart, if possible, so that any local reactions can be differentiated.
- If administered at the same time, COVID-19 vaccines and vaccines that might be more likely to cause a local injection site reaction (for example, [high-dose and adjuvanted inactivated influenza vaccines](#)) should be administered in different limbs, if possible.
- Injecting the vaccines rapidly without aspiration since aspiration is not recommended before administering a vaccine.

The CDC has developed [clinical algorithms](#) that can help guide decisions for influenza testing and treatment when SARS-CoV-2 and influenza viruses are co-circulating.

Sources:

[Centers for Disease Control and Prevention](#)

[National Center for Immunization and Respiratory Diseases \(NCIRD\)](#)



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