



Influenza (Flu)

TABLE. Influenza vaccines — United States, 2023–24 influenza season*

TABLE 1. Influenza vaccines — United States, 2023–24 influenza season*

Trade name (manufacturer)	Presentations	Age indication	μg HA (IIV4s and RIV4) or virus count (LAIV4) for each vaccine virus (per dose)	Route	Mercury (from thimerosal, if present), μ g/0.5 mL				
IIV4 (standard-dose, egg-based vaccines⁺)									
Afluria Quadrivalent (Seqirus)	0.5-mL PFS§	≥3 yrs§	15 μg/0.5 mL	IM¶	**				
	5.0-mL MDV§	≥6 mos [§] (needle/syringe) 18 through 64 yrs (jet injector)	7.5 μg/0.25 mL 15 μg/0.5 mL	IM¶	24.5				
Fluarix Quadrivalent (GlaxoSmithKline)	0.5-mL PFS	≥6 mos	15 μg/0.5 mL	IM¶	_				
FluLaval Quadrivalent (GlaxoSmithKline)	0.5-mL PFS	≥6 mos	15 μg/0.5 mL	IM¶					
Fluzone Quadrivalent (Sanofi Pasteur)	0.5-mL PFS ^{††}	≥6 mos††	15 μg/0.5 mL	IM¶	_				
	0.5-mL SDV ^{††}	≥6 mos††	15 μg/0.5 mL	IM¶	_				
	5.0-mL MDV ^{††}	≥6 mos††	7.5 μg/0.25 mL 15 μg/0.5 mL	IM¶	25				
ccIIV4 (standard-dose,	cell culture–based vaccine)								
Flucelvax Quadrivalent (Seqirus)	0.5-mL PFS	≥6 mos	15 μg/0.5 mL	IM¶	_				
	5.0-mL MDV	≥6 mos	15 μg/0.5 mL	IM¶	25				
HD-IIV4 (high-dose, eg	g-based vaccine [†])								
Fluzone High-Dose Quadrivalent (Sanofi Pasteur)	0.7-mL PFS	≥65 yrs	60 μg/0.7 mL	IM¶					
allV4 (standard-dose, egg-based⁺ vaccine with MF59 adjuvant)									

Trade name (manufacturer)	Presentations	Age indication	μg HA (IIV4s and RIV4) or virus count (LAIV4) for each vaccine virus (per dose)	Route	Mercury (from thimerosal, if present), μ g/0.5 mL			
Fluad Quadrivalent (Seqirus)	0.5-mL PFS	≥65 yrs	15 μg/0.5 mL	IM¶	_			
RIV4 (recombinant HA vaccine)								
Flublok Quadrivalent (Sanofi Pasteur)	0.5-mL PFS	≥18 yrs	45 μg/0.5 mL	IM¶	_			
LAIV4 (egg-based vaccine [†])								
FluMist Quadrivalent (AstraZeneca)	0.2-mL prefilled single- use intranasal sprayer	2 through 49 yrs	10 ^{6.5–7.5} fluorescent focus units/0.2 mL	NAS	_			

Abbreviations: ACIP = Advisory Committee on Immunization Practices; HA = hemagglutinin; IIV4 = inactivated influenza vaccine, quadrivalent; IM = intramuscular; LAIV4 = live attenuated influenza vaccine, quadrivalent; MDV = multidose vial; PFS = prefilled syringe; RIV4 = recombinant influenza vaccine, quadrivalent; SDV = single-dose vial.

* Manufacturer package inserts and updated CDC and ACIP guidance should be consulted for additional information concerning, but not limited to, indications, contraindications, warnings, and precautions. Package inserts for U.S.-licensed vaccines are available at https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states ... Availability and characteristics of specific products and presentations might change or differ from what is described in this table and in the text of this report.

[†]Although a history of severe allergic reaction (e.g., anaphylaxis) to egg is a labeled contraindication to the use of egg-based IIV4s and LAIV4, ACIP recommends that all persons aged ≥6 months with egg allergy should receive influenza vaccine and that any influenza vaccine (egg based or nonegg based) that is otherwise appropriate for the recipient's age and health status can be used (see Persons with a History of Egg Allergy).

§ The approved dose volume for Afluria Quadrivalent is 0.25 mL for children aged 6 through 35 months and 0.5 mL for persons aged ≥3 years. However, 0.25-mL prefilled syringes are no longer available. For children aged 6 through 35 months, a 0.25-mL dose must be obtained from a multidose vial.

¶ IM-administered influenza vaccines should be administered by needle and syringe only, with the exception of the MDV presentation of Afluria Quadrivalent, which may alternatively be given by the PharmaJet Stratis jet injector for persons aged 18 through 64 years only. For older children and adults, the recommended site for IM influenza vaccination is the deltoid muscle. The preferred site for infants and young children is the anterolateral aspect of the thigh. Additional specific guidance regarding site selection and needle length for IM administration is available in the General Best Practice Guidelines for Immunization available at https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html.

** Not applicable.

^{††} Fluzone Quadrivalent is approved for children aged 6 through 35 months at either 0.25 mL or 0.5 mL per dose; however, 0.25-mL prefilled syringes are no longer available. If a prefilled syringe of Fluzone Quadrivalent is used for a child in this age group, the dose volume will be 0.5 mL per dose.

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Was this page helpful?

Yes

Partly

No