



Public Health Advisory: Influenza Season 2023-2024

It is time for flu and respiratory syncytial virus (RSV) vaccination and reporting.

Amarillo Public Health will be carefully monitoring the community for influenza, RSV, and other influenza like illness (ILI) activity this season. Thank you for reporting flu, RSV and ILI's on the attached reporting form.

Please fax the attached reporting form to 806-378-6307 by noon each Monday.

In addition, report any suspected outbreaks of influenza by calling 806-378-6341.

Influenza Immunizations

- Annual influenza vaccination is recommended for all persons aged ≥ 6 months who do not have contraindications.
- Ideally, influenza vaccine should be offered during September or October; however, vaccination should continue if influenza viruses are circulating.
- All seasonal influenza vaccines expected to be available for the 2023–24 season are quadrivalent, containing hemagglutinin (HA) derived from one influenza A(H1N1)pdm09 virus, one influenza A(H3N2) virus, one influenza B/Victoria lineage virus, and one influenza B/Yamagata lineage virus. Inactivated influenza vaccines (IIV4s), recombinant influenza vaccine (RIV4), and live attenuated influenza vaccine (LAIV4) are expected to be available.
- ACIP recommends that adults aged ≥ 65 years preferentially receive any one of the following higher doses or adjuvanted influenza vaccines: quadrivalent high-dose inactivated influenza vaccine (HD-IIV4), quadrivalent recombinant influenza vaccine (RIV4), or quadrivalent adjuvanted inactivated influenza vaccine (aIIV4). If none of these three vaccines is available at an opportunity for vaccine administration, then any other age-appropriate influenza vaccine should be used.
- All persons aged ≥ 6 months with egg allergy should receive influenza vaccine. Any influenza vaccine (egg based or nonegg based) that is otherwise appropriate for the recipient's age and health status can be used. It is no longer recommended that persons who have had an allergic reaction to egg involving symptoms other than urticaria should be vaccinated in an inpatient or outpatient medical setting supervised by a health care provider who is able to recognize and manage severe allergic reactions if an egg-based vaccine is used. Egg allergy alone necessitates no additional safety measures for influenza vaccination beyond those recommended for any recipient of any vaccine, regardless of severity of previous reaction to egg.
- Women who are or might become pregnant during the influenza season should receive influenza vaccine.

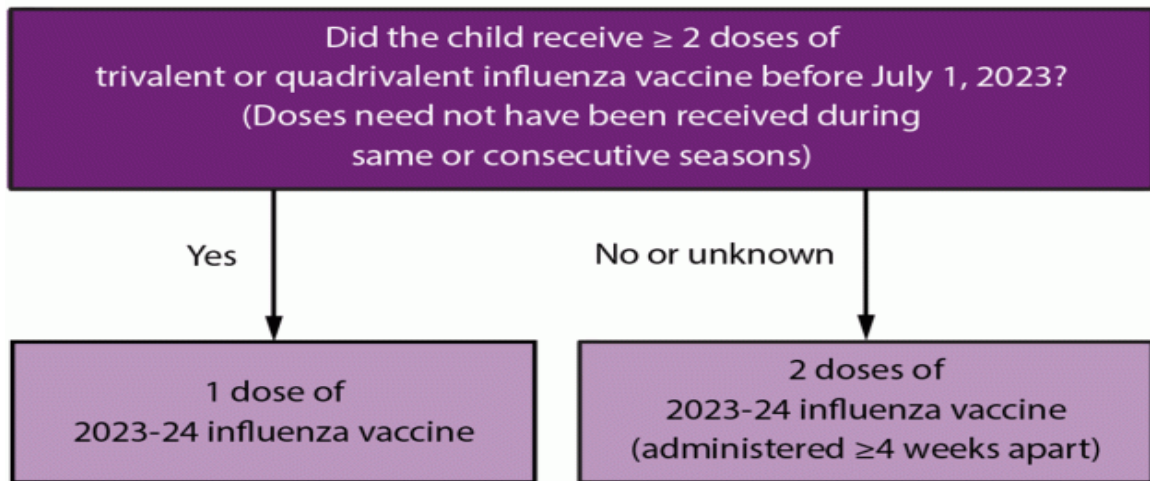
Amarillo Public Health

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- If a person is eligible, both 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).
- Available influenza vaccine presentations for 2023-2024 season are:
 - Afluria Quadrivalent is not expected to be available in a 0.25ml prefilled syringe presentation. When using Afluria Quadrivalent for children who require a 0.25ml dose, the dose must be obtained from a multidose vial.
 - Fluarix Quadrivalent: 0.5 mL per dose.
 - Flucelvax Quadrivalent: 0.5 mL per dose.
 - FluLaval Quadrivalent: 0.5 mL per dose.
 - Fluzone Quadrivalent: Either 0.25 mL or 0.5 mL per dose. Per the package insert, each dose may be given at either volume; however, 0.25-mL prefilled syringes are no longer available.

Influenza vaccine dosing algorithm for children aged 6 months through 8 years*
Advisory Committee on Immunization Practices, United States,
2023-24 influenza season



* For children aged 8 years who require 2 doses of vaccine, both doses should be administered even if the child turns age 9 years between dose 1 and dose 2.

RSV Immunizations

Adults 60 years old and over

- Adults 60 years of age and older may receive a single dose of RSV vaccine using shared clinical decision-making.



Infants and young children

- 1 dose of nirsevimab for all infants younger than 8 months born during or entering their first RSV season.
- 1 dose of nirsevimab for infants and children 8–19 months old who are at increased risk for severe RSV disease and entering their second RSV season.
- *Note:* A different monoclonal antibody, palivizumab, is limited to children under 24 months of age with certain conditions that place them at high risk for severe RSV disease. It must be given once a month during RSV season.

For more detailed information about influenza and RSV vaccination recommendations, visit

[Information for the 2023-2024 Flu Season | CDC](#)

[RSV \(Respiratory Syncytial Virus\) Immunizations | CDC](#)

Thank you,

Todd Bell, MD
Health Authority