

Winter Respiratory Vaccination Toolkit

Updated March 2026



NSW Ministry of Health
1 Reserve Road
ST LEONARDS NSW 2065
Tel. (02) 9391 9000
Fax. (02) 9391 9101
TTY. (02) 9391 9900
www.health.nsw.gov.au

Produced by: NSW Ministry of Health.

This work is copyright. It may be reproduced in whole or in part for study or training purposes subject to the inclusion of an acknowledgement of the source. It may not be reproduced for commercial usage or sale. Reproduction for purposes other than those indicated above requires written permission from the NSW Ministry of Health.

© NSW Ministry of Health 2026

SHPN (HPNSW) 260006
ISBN: 978-1-74231-342-9

Further copies of this document can be downloaded from the NSW Health website
www.health.nsw.gov.au

March 2026

Checklist timeline

Due	Action	Complete ✓
Now	<p>Obtain access to the Australian Immunisation Register (AIR) through PRODA, if you do not already have access.</p> <p>Immunisation providers (excluding General Practitioners [GPs] with a Medicare provider number) must apply for an AIR provider number through NSW Health.</p> <p>Immunisation providers who do not have a Vaccine Account Number (VAN) with the State Vaccine Centre will need to apply for one.</p>	
Mid-February	<p>Discard previous year influenza vaccine stock and record on online vaccine ordering system (note some influenza vaccines expire before March).</p> <p>Begin promotion of the 2026 NSW nasal spray influenza vaccination program for children 2, 3 and 4 years.</p> <p>Check your fridge capacity to store the number of vaccines you will need.</p> <p>Check for an email (including junk folder) from the NSW Vaccine Centre that includes the information about pre-allocation or pre-order of influenza vaccines</p> <p>Acknowledge your pre-allocation order or place your pre-order on the online ordering system and revise down if you do not have adequate fridge storage space. Call the NSW Vaccine Centre on 1300 656 132 to discuss any queries.</p> <p>Contact wholesalers to order private market vaccines.</p>	
1 April	<p>Send communications to all patients reminding them of the importance of influenza vaccination from March/April onwards.</p>	
Mid-April	<p>Check that all staff are trained in vaccine cold chain management (including receipt of vaccine deliveries). The NSW Health Vaccine Storage and Cold Chain Management online training module should be used to facilitate staff education and equip staff to effectively manage the cold chain.</p> <p>Only order enough stock for use in a maximum 4 week period. Check software to confirm the correct batch numbers correspond with batch numbers for vaccines received.</p> <p>Send reminder messages to pre-identified patients advising of the influenza vaccination arrangements.</p> <p>Display influenza campaign posters in your clinic.</p>	
Late April onwards	<p>Commence influenza vaccination clinics.</p> <p>Report all vaccinations to the AIR.</p> <p>Report all adverse events following immunisation to your local public health unit on 1300 066 055.</p>	
Mid-May	<p>Review patient vaccine uptake – send reminders to patients who have not attended for vaccination. Reorder vaccines according to stock on hand and residual demand, taking into consideration the amount of 2025 expired stock that you discarded at the end of last season. If demand for the vaccine exceeds your last order, create a wait list for patients, so they know they can be vaccinated when you receive your next delivery.</p>	

Contents

Checklist timeline	1
Introduction	3
2026 NIP and state funded vaccines	4
Influenza vaccine formulations	5
Get prepared for 2026	5
2026 Influenza Vaccination campaign	5
Government funded vaccine ordering	5
Key points to consider when you confirm your pre-allocated order	6
When placing subsequent orders	6
Vaccine delivery	6
2026 influenza vaccine basket stickers	7
Which patients should you target for funded vaccines?	8
2026 Respiratory Illness Campaign	8
Aboriginal and Torres Strait Islander people	8
Children 2, 3 and 4 years	8
NSW nasal spray influenza vaccination program for children 2 years to less than 5 years	8
Pregnant women	9
Medically at-risk patients	9
People aged 65 years and over	9
Health care workers and students	9
Other patients	9
Optimum time for vaccination	10
Co-administration with other vaccines	10
Reporting to the Australian Immunisation Register	10
Influenza vaccine effectiveness	11
Patients with allergies	11
Reporting adverse events following immunisation	11
Influenza vaccine safety	12
Vaccine storage and cold chain management	13
Where you can find more information	13
Appendix 1	14
Influenza vaccination decision aid – adults	14
Appendix 2	15
2026 influenza vaccines poster (with images)	15

Introduction

Over 2.3 million doses of National Immunisation Program (NIP) influenza vaccines were distributed during 2025 in NSW. NSW Health has developed this toolkit to assist providers with managing the roll-out and implementation of their influenza vaccination program. Everyone 6 months and older is recommended to get an influenza vaccine each year. The vaccines are funded under the NIP and NSW funded program for eligible people most at-risk of severe disease.

Influenza vaccines will also be available on the private market and must be ordered through your wholesaler. Immunisation providers will be able to order NIP and NSW funded influenza vaccines for eligible cohorts. NSW pharmacist immunisers will be able to order NIP influenza vaccines for NIP eligible cohorts aged 2 years and older.


Of note, in 2026, the NSW Government is rolling out the NSW Nasal Spray Influenza Vaccination Program offering FluMist[®], a nasal spray influenza vaccine administered via nasal spray to children aged 2, 3 and 4 years as a needle-free alternative. Nasal spray influenza vaccine will also be available in the private market for individuals aged 2 years to 17 years of age.

2026 NIP and state funded vaccines

The Australian Government provides a free seasonal influenza vaccine to those most at risk of complications from influenza. There are no new eligibility cohorts for NIP influenza vaccines in 2026. Please note, in 2026 the NSW Government is funding FluMist®, a nasal spray influenza vaccine for children aged 2, 3 and 4 years. This vaccine is a live attenuated influenza vaccine (LAIV) delivered via nasal spray as a needle-free alternative.

The following table provides information on state and NIP funded influenza vaccines for different age cohorts for 2026:

Figure 1. 2026 Influenza vaccines available under the NIP and state funded program by age

2026 Influenza vaccines available by age and government funding			
 Before administering an influenza vaccine, CHECK you have the correct vaccine for the person's age. Ages are identified on the syringe.			
Registered age group	Trivalent (TIV) injectable influenza vaccines		
	Vaxigrip® 0.50 mL (Sanofi)	Flucelvax® 0.50 mL (Seqirus)	Fluad® 0.50 mL (Seqirus)
<6 months	X	X	X
6 months to <5 years	✓	✓	X
5-49 years	✓ ¹	✓ ¹	X
50-64 years	✓ ¹	✓ ¹	✓
65 years and over	✓	✓	✓ ²

Ticks indicate age at which a vaccine is registered and available. Shaded boxes represent funding under the NIP.

1 Funding only for Aboriginal and Torres Strait Islander people, pregnant women and people who have certain medical conditions.

2 Adjuvant TIV preferred over standard TIVs.

FluMist® nasal spray influenza vaccine	
Registered age group	FluMist® 0.2 mL (AstraZeneca)
2 years - <5 years	✓ ¹
5 years - <18 years	✓

Ticks indicate age at which a vaccine is registered and available. Shaded boxes represent funding under the NSW-funded program.

1 Funding only for children aged 2, 3 and 4 years.

Before administering an influenza vaccine, **check** you have the correct vaccine for the person's age at time of administration.

- Vaxigrip® can be used for people from 6 months of age and is for the universal 6 months to <5 year program, Aboriginal people, pregnant women and for NIP eligible medically at-risk patients 5 years to 64 years.
- Flucelvax® is a cell-based influenza vaccine and is available under the NIP in 2026 for eligible cohorts aged 5 years to 64 years.

- The registration age for adjuvanted influenza vaccine (Fluad®) has been extended to 50 years and over (previously 65 years and over). In 2026, Fluad® vaccine is the only influenza vaccine funded under the NIP for people aged 65 years and over. People 50 to 64 years of age can access this vaccine through the private market.
- FluMist®, a nasal spray influenza vaccine is registered for use in people aged 2 years to 17 years. It is funded for children aged 2, 3 and 4 years in NSW in 2026.
- Influenza vaccines are also available on the private market.

Influenza vaccine formulations

In 2026 all influenza vaccines in Australia are trivalent (TIV) seasonal vaccines

The composition of influenza vaccines for the Southern Hemisphere is reviewed by the World Health Organization annually in September, and then subsequently determined by the Australian Influenza Vaccine Committee (AIVC).

In 2026, all influenza vaccines in Australia are trivalent as they contain 3 influenza virus strains which consists of 2 influenza A subtypes and 1 influenza B lineage.

The AIVC recommended that the following viruses be used for influenza vaccines in the 2026 southern hemisphere influenza season:

Egg-based influenza vaccines:

- an A/Missouri/11/2025 (H1N1)pdm09-like virus;
- an A/Singapore/GP20238/2024 (H3N2)-like virus; and
- a B/Austria/1359417/2021 (B/Victoria lineage)-like virus;

Cell-based trivalent influenza vaccines:

- an A/Missouri/11/2025 (H1N1)pdm09-like virus;
- an A/Sydney/1359/2024 (H3N2)-like virus; and
- a B/Austria/1359417/2021 (B/Victoria lineage)-like virus;

Both egg-based and cell-based vaccines will be available in Australia in 2026 under the NIP.

Get prepared for 2026

2026 Influenza Vaccination program

Promoting the 2026 influenza vaccination program from April onwards ensures that people in the community are protected before winter and that providers have access to vaccine supply. Providers may schedule clinics once supplies are received. All preparations may not be delivered at the same time.

Once vaccines are received, providers should prioritise vaccinating children aged 6 months to less than 5 years, Aboriginal and Torres Strait Islander people aged 6 months and over, pregnant women at any stage of pregnancy, medically at-risk eligible people aged 5 years to 64 years and people aged 65 years and over.

Government funded vaccine ordering

Based on provider feedback in 2024 and 2025, the pre-allocation system for the the first order of injectable influenza vaccines will continue to be utilised for GPs, pharmacist immunisers and Aboriginal Medical Services.

FluMist® (nasal spray influenza vaccine) is pre-allocated to certain immunisation providers in NSW including GPs, Aboriginal Medical Services, public hospitals and community health services.

Pre-allocation order is open for review and confirmation between **10 February 2026 and 3 March 2026**. You must confirm the quantity of your first allocation through the [online ordering system](#). **Only confirmed orders will be dispatched from the warehouse.**

Deliveries will commence when vaccine stocks have been received from suppliers, from late March 2026.

Due to supply constraints, community pharmacies have not been pre-allocated FluMist® in 2026. Privately funded FluMist® will be available in community pharmacies.

Community pharmacies will be reimbursed for a certain number of FluMist® doses administered to children aged 2, 3 and 4 years. Detailed information about the reimbursement process will be communicated to community pharmacies soon.

Immunisation providers who do not have a Vaccine Account Number (VAN) with the State Vaccine Centre will need to [apply for one](#). If you require assistance with your application, contact your public health unit on 1300 066 055. Faxed orders will not be accepted.

Due to the large volume of orders at the beginning of the season, it takes approximately 4 weeks for the NSW Vaccine Centre to deliver all first orders. The checklist timeline at the front of this toolkit will assist you to prepare for your influenza vaccination program.

Key points to consider when you confirm your pre-allocated order:

- 1. Calculate how many vaccinations your service can provide each day.** Review the average number of patients each GP, Nurse, pharmacists and Aboriginal Health practitioners can vaccinate each day your practice and/or pharmacy is open, plus add a buffer of several days.
- 2. Check your vaccine fridge storage space.** You may need to source an additional purpose-built vaccine specific fridge for additional storage space to maintain adequate vaccine stock during the influenza program. Check with the manufacturer about your fridge's vaccine storage capacity. Remember that vaccines must be protected from light and remain in their original cardboard packaging. If you are also administering other vaccines, ensure you have fridge capacity for all vaccines at the same time.
- 3. Review your patient cohort in general practice.** For example, how many patients are aged 65 years and over, children aged 6 months to less than 5 years, Aboriginal people aged 6 months and over, pregnant, and medically at-risk individuals. Order vaccines appropriate to your patient cohorts. Pharmacy pre-allocations are based on equitable stock distribution. If this initial order is too large, you have the ability to reduce the amount during the confirmation process.
- 4. Consider the number of 2025 influenza vaccines your practice and/or pharmacy discarded.**
- 5. You will be able to confirm your allocation and you can reduce your allocation if you do not have fridge capacity to store the vaccines.**

When placing subsequent orders

- Consider how many vaccines your practice and/or pharmacy can feasibly administer each week, and order regularly, thereafter, based on the number of remaining eligible patients.
- Only order sufficient vaccines for use in a maximum 4 week period. Remember that children aged 6 months to less than 2 years of age require 2 doses at least 4 weeks apart in their first year of influenza vaccination. In addition, children aged 6 months to less than 9 years of age with a medical risk condition receiving influenza vaccine for the first time require 2 doses at least 4 weeks apart in their first year.
- Keep in mind that the demand for influenza vaccines will decrease after the first 4-6 weeks of the program.
- **Providers should aim for no more than 2 orders per month.**

Online ordering system messaging

Messages regarding changes to influenza vaccine stock availability and any ordering restrictions will be regularly posted on the [online vaccine ordering system](#). It is important to regularly check for new messages during the influenza vaccination program.

Vaccine delivery

NIP and state funded program

Deliveries of funded influenza vaccines will commence **from March 2026**, depending on the delivery of vaccines into the NSW Vaccine Centre. Advice on delivery dates for private market influenza vaccines should be sought directly from wholesalers.

Providers must clearly label their influenza vaccine stock to minimise the risk of inappropriate administration to an incorrect age group. To support providers, vaccine basket stickers will be sent with influenza vaccine deliveries (Figure 2).

2026 influenza vaccine basket stickers

2026 INFLUENZA VACCINE
**6 months –
less than 5 years**
Vaxigrip

2026 INFLUENZA VACCINE
**6 months –
less than 5 years**
Vaxigrip

2026 INFLUENZA VACCINE
**5 years –
64 years at risk**
Vaxigrip and Flucelvax

2026 INFLUENZA VACCINE
**5 years –
64 years at risk**
Vaxigrip and Flucelvax

2026 NASAL SPRAY INFLUENZA VACCINE
**2 years –
less than 5 years**
FluMist

2026 NASAL SPRAY INFLUENZA VACCINE
**2 years –
less than 5 years**
FluMist

2026 INFLUENZA VACCINE
65 years and over
Fluad

2026 INFLUENZA VACCINE
65 years and over
Fluad

**Privately Funded
Influenza Vaccines**

**Privately Funded
Influenza Vaccines**

Which patients should you target for funded vaccines?

Identify your at-risk and eligible patients and remind them about the importance of their annual influenza vaccination. In addition to your existing practice software recall/reminder process, consider using your practice and/or pharmacy webpage, social media (Facebook/X) and your practice or pharmacy noticeboards to promote your influenza vaccination program.

2026 Respiratory Illness Campaign

NSW Health will launch the 2026 Respiratory Illness Campaign from April to August reminding everyone 6 months and over that they are recommended to get an annual influenza vaccine. People eligible for a free vaccine under the National Immunisation Program will be targeted by the campaign. Information about the nasal spray influenza vaccine will be integrated into this campaign as a needle-free alternative option for eligible children through the state-funded free vaccine and eligible age groups through the private market. An additional vaccination awareness campaign will run before winter to prompt the general population to start thinking about vaccinations and arrange a plan with their healthcare provider ahead of the influenza season.

Visit the [NSW Health website](#) for more information on the campaign, including a [communication toolkit](#) for access to free resources. We encourage you to display these assets in vaccination clinics, GP waiting rooms, pharmacies, hospitals, residential care facilities, community health clinics and any other relevant health care facilities.

Aboriginal and Torres Strait Islander people

Influenza vaccine is funded under the NIP for **all** Aboriginal and Torres Strait Islander people from 6 months of age.

See Figure 1 for influenza vaccines available under the NIP and NSW-funded program, by age.

Pneumococcal (see [NSW Immunisation Schedule](#)) and **Shingrix**® (Aboriginal people aged 50 years and over and 18 years and over who are immunocompromised) vaccines should also be offered to eligible Aboriginal people at the time of their influenza vaccination. These vaccines can be co-administered with influenza vaccines.

Refer to the [Australian Immunisation Handbook](#) for advice about co-administration.

Children 6 months and over

Influenza vaccine is funded under the NIP for **all** children aged 6 months to under 5 years. When receiving influenza vaccine for the first time, healthy children aged 6 months to <2 years and those with a medical risk condition aged 6 months to <9 years should receive 2 doses, given 4 weeks apart. The child should receive the relevant vaccine for the age they are at the time of vaccination. Children in this age cohort who have previously received one or more doses of influenza vaccine require only one dose in the current and future seasons.

Further information about number of influenza vaccine doses required for children aged 6 months to less than 9 years who receive influenza vaccine for the first time is available on the [Australian Immunisation Handbook](#).

Even healthy children are vulnerable to catching influenza. In 2019, a large number of children who were hospitalised due to influenza, and those who died from influenza, had not been offered an influenza vaccine by their doctor or specialist. Since 2018, free influenza vaccine has been available for all children aged 6 months to less than 5 years.

NSW Nasal Spray Influenza Vaccination Program for children 2, 3 and 4 years

In 2026, the NSW nasal spray influenza vaccination program funds FluMist®, a nasal spray influenza vaccine for children aged 2, 3 and 4 years.

This vaccine is delivered via nasal spray as a needle-free alternative of influenza vaccine. It has been used internationally for over a decade and demonstrates strong acceptability and comparable effectiveness to injectable influenza vaccine. This program is expected to increase vaccination uptake in children and will be available for a limited period of time from early April to early July 2026 for children aged 2, 3 and 4 years. The vaccine will also be available in the private market for individuals aged 2 years to 17 years.

Further information about the number of influenza vaccine doses required for children aged 2 years to less than 9 years who receive influenza vaccine for the first time is available on the [Australian Immunisation Handbook](#).

Providers are recommended to give half the contents of the sprayer into one nostril and repeat in the other nostril. A video on how to administer FluMist® will be available on the [NSW Health webpage](#).

Nasal spray influenza vaccine is contraindicated in children who are moderately and severely immunocompromised or receiving oral salicylate therapy.

Refer to the [Australian Immunisation Handbook](#) influenza chapter for detailed advice on influenza vaccine administration. Detailed information about the NSW nasal spray influenza vaccination program is available on the [NSW Health webpage](#).

In 2025 (1 March–31 August 2025), less than one quarter (24.4%) of children 6 months to less than 5 years in NSW were recorded on the AIR as having received at least one dose of influenza vaccine, a similarly low rate as 2024 and a decrease from 2023 (27.1%). It is important to increase this uptake in 2026 to protect all young children.

Children who need a COVID-19 vaccine and influenza vaccine can have them at the same visit. The small increased risk of fever and febrile convulsions should be discussed with parents and carers, and the option provided of administering them at least 3 days apart.

Providers should pro-actively undertake initiatives to improve vaccine uptake in their child cohort. Use reminder/recall systems to send SMS messages or emails to parents of children in your practice advising them of the opportunity to have their child vaccinated, and the importance and benefits of vaccinating their child(ren) against influenza.

Visit the [Sharing knowledge about immunisation \(SKAI\) webpage](#) to help support conversations about immunisations with parents and carers.

Pregnant women

Influenza vaccination during pregnancy has been shown to be safe and effective. Vaccination during pregnancy protects pregnant women from influenza and its complications in pregnancy. It is also the best way to protect newborns against influenza during the critical early months of life.

Did you know?

Offering vaccine, or recommending vaccination, by an antenatal care provider is one of the strongest predictors of vaccine uptake by pregnant women and should be a routine part of antenatal care.

There are 3 maternal vaccines recommended in pregnancy: influenza, pertussis and respiratory syncytial virus (RSV) vaccines.

The timing of vaccination depends on the time of the year, vaccine availability and the anticipated duration of immunity. Influenza vaccine can be given at any stage of pregnancy and can be given at the same time as pertussis vaccination (between 20 and 32 weeks) and the maternal RSV vaccine recommended year round between 28 to 36 weeks gestation. The influenza vaccine may be given earlier and should not be delayed.

Ensure that the influenza vaccine is recorded on the woman's antenatal record card and AIR. See Figure 1 for vaccines available under the NIP. **Women who receive influenza vaccine before becoming pregnant should be revaccinated during pregnancy to protect the unborn infant.**

Refer to the digital [Australian Immunisation Handbook](#) for more information.

Medically at-risk patients

Influenza vaccine is funded under the NIP for all individuals 5 years and over with medical risk factors such as severe asthma, lung or heart disease, low immunity or diabetes. Refer to the digital [Australian Immunisation Handbook](#) for more information.

People aged 65 years and over

In 2026, Fludac[®], an adjuvanted vaccine, is the only vaccine provided under the NIP for people ≥65 years of age. Fludac[®] has been specifically designed to create a greater immune response in elderly people, who are known to have a weaker response to immunisation.

If a person aged 65 years and over has been vaccinated with another influenza vaccine in the same year, revaccination with Fludac[®] is not routinely recommended.

The risk of mild to moderate injection site reactions may be greater for those aged 65 years and over receiving Fludac[®].

The product information for Fludac[®] recommends for the vaccine to be gently shaken before use. After shaking, the normal appearance of Fludac[®] is a milky-white suspension.

Fludac[®] should be given in preference to other available trivalent influenza vaccines as it is specifically designed to generate a stronger immune response in elderly people, who typically have a weaker response to immunisation. Fludac[®] contains an adjuvant that enhances the immune system's response to the vaccine, providing improved protection for older adults.

Health care workers and students

NSW Health policy directive [PD2026_004 Occupational Assessment Screening and Vaccination Against Specified Infectious Diseases](#) requires health care workers and students in Category A positions to receive the influenza vaccine annually by 1 June. NSW Health employees will be offered vaccine in their workplace. However, if they choose to be vaccinated by their GP or

Did you know?

Fluad® should be given in preference to other available TIVs as it has been specifically designed to create a greater immune response in elderly people, who are known to have a weaker response to immunisation.

pharmacist immuniser, they will need to purchase private vaccine unless they are eligible for NIP vaccine. For more information refer to section *Annual Influenza Vaccination Program* of the policy directive.

Other patients

All patients aged 5 years to 64 years who are not eligible for funded influenza vaccine should be advised that they can purchase private market influenza vaccine. These vaccines are available from GPs and [pharmacist immunisers](#).

NSW Health has additional resources and information available such as [frequently asked questions about influenza vaccination for health professionals](#), [influenza fact sheet](#), [posters and patient brochures](#).

Optimum time for vaccination

Annual vaccination before the onset of each influenza season is recommended. Historically, influenza activity in NSW has been highest between June and September, but infections can occur year-round. The COVID-19 pandemic altered influenza epidemiology globally, and since the pandemic, influenza circulation in NSW has started earlier. The 2025 flu season was unusual, with activity remaining elevated for longer and extending into spring and summer. In 2026, influenza activity may follow this newer pattern or return to more typical seasonal timing.

The [Australian Technical Advisory Group on Immunisation](#) (ATAGI) advises that optimal protection occurs within the first 3-4 months following vaccination.

It is never too late to vaccinate since influenza can circulate all year round. Vaccination should continue to be offered as long as influenza viruses are circulating, and a valid vaccine (before expiration date) is available. Some vaccine brands now have an expiry date of February 2027.

Other considerations for vaccine timing:

- pregnant women should be vaccinated at the earliest opportunity during pregnancy. In accordance with the [Australian Immunisation Handbook](#), the 2026 influenza vaccine can be given to pregnant women if the 2025 vaccine was given earlier in the pregnancy. Women under the care of a private obstetrician should have their influenza vaccination status assessed as they may not have received it from their obstetrician.
- people travelling to a country where influenza is circulating can be vaccinated 2 weeks before travel, at any time of the year if they haven't already received the 2026 vaccine.
- children aged 6 months to less than 2 years of age require 2 doses of injectable influenza vaccine at least 4 weeks apart in their first year of influenza vaccination.
- In addition, when receiving influenza vaccine for the first time, healthy children aged 6 months to <2 years and those with a medical risk condition aged 6 months to <9 years should receive 2 doses, given 4 weeks apart. Should a child not receive 2 doses in their first year, they only require one dose the following year.

Please note nasal spray influenza vaccine is contraindicated in children who are moderately and severely immunocompromised or receiving oral salicylate therapy.

Co-administration with other vaccines

People can receive influenza vaccines at the same time as most other vaccines, including RSV, pneumococcal, dTpa and COVID-19 vaccines. Refer to the digital [Australian Immunisation Handbook](#) for more information.

Reporting to the Australian Immunisation Register

Mandatory reporting of all Influenza, COVID-19 and NIP vaccines to the AIR has been in place since 2021. This will ensure complete vaccination records for your patients including the availability of this information in their [My Health Record](#).

How to report influenza vaccinations to the AIR

There are two ways to record information on the AIR:

1. use your practice and/or pharmacy management software. The details you enter will be able to be transferred from your PMS to the AIR. Make sure you are using the latest version of your PMS, so you have up to date vaccine codes and batch numbers (contact your software vendor for further information). Ensure you select the correct vaccine that has been given to the patient.
2. use the AIR website via [PRODA](#).

PRODA

Each individual that works in the organisation and requires AIR access will also need to register for an individual [PRODA account](#) so they can be linked to the organisation in PRODA.

For further information, visit [How to register an organisation in PRODA](#).

To register as a vaccination provider with the AIR:

Medical practitioners, midwives and nurse practitioners with a Medicare provider number are automatically recognised as an immunisation provider and authorised to record or access immunisation data on the AIR.

Other providers: Complete the [IM004 form](#) and submit the form to MOH-vaccreports@health.nsw.gov.au.

Pharmacists: Follow the steps described in [Application to register as a vaccination provider with the AIR](#).

1. review the [NSW Pharmacist Vaccination Standards](#).
2. the Principal Pharmacist Immuniser to complete the form [IM004 Australian Immunisation Register Application to Register as a Vaccination Provider](#), to register the pharmacy.
3. complete the [NSW Pharmacist Declaration Form](#) with the Australian Immunisation Register. Each pharmacist that will be administering vaccinations at the pharmacy must complete this form.
4. submit the completed IM004 form and NSW Pharmacist Declaration form of the Principal Pharmacist Immuniser to MOH-vaccreports@health.nsw.gov.au for processing. NSW Health will submit the approved applications to Services Australia.

Influenza vaccine effectiveness

Vaccine effectiveness refers to improving a range of clinical outcomes such as disease incidence, hospitalisation or attendance at a GP practice.

The effectiveness of the influenza vaccine varies from season to season for a variety of reasons, mainly related to the match with the circulating influenza viruses that are infecting people.

In general, influenza vaccine effectiveness has been found to vary between 40-60%. This means that on average, a vaccinated person is 40-60% less likely to experience a negative health outcome, for example developing influenza and attending a GP practice or being hospitalised, than an unvaccinated person. The effectiveness of the vaccine may depend on other factors such as the age group affected, and the health outcome being measured (e.g. hospitalisation or attendance at a GP).

Vaccine effectiveness is generally lower in older people than in younger adults and children.

Based on preliminary data, interim Australian studies suggest that in 2025, vaccinated people were roughly 53% less likely to attend general practice or be hospitalised with influenza than unvaccinated people.

Estimated vaccine effectiveness against general practice attendance with influenza overall was 56% (95% Confidence Interval [CI]: 40%, 68%). Estimated vaccine effectiveness against hospitalisation with influenza overall was 49% (95% CI: 42%, 56%).

A full report is available on the [Australian Centre for Disease Control website](#).

Patients with allergies

Egg allergy is **not** a contraindication to influenza vaccine. People with an egg allergy, including anaphylaxis, can be safely vaccinated with influenza vaccines including egg-based and cell-based vaccines unless they have reported a serious adverse event following any vaccine. People with a history of anaphylaxis to egg should receive a full age-appropriate vaccine dose; do not split the dose into multiple injections (for example, a test and then the rest of the dose).

If a patient has significant anxiety about their allergy, they can attend a medical facility with staff who are experienced in recognising and treating anaphylaxis and remain under supervision for a longer period of time.

For further information please refer to the Australasian Society of Clinical Immunology and Allergy (ASCI), [Vaccination of the Egg-allergic Individual Guidelines](#).

For children with severe egg allergy, vaccination under medical supervision can also be arranged at the NSW Immunisation Specialist Service (NSWISS) by calling 1800 679 477.

Latex allergy: All influenza vaccines supplied under the NIP in 2026 are latex-free.

An **influenza vaccination decision aid** is available at Appendix 1 to assist you with conducting pre-vaccination assessment with your patients.

Reporting adverse events following immunisation

An adverse event following immunisation (AEFI) is any untoward medical occurrence which follows immunisation, and which does not necessarily have a causal relationship with the usage of the vaccine. It may be related to the vaccine itself or to its handling or administration. AEFIs are notifiable conditions under the *NSW Public Health Act* (2010). Suspected cases are to be notified by medical practitioners and other health professionals on diagnosis to your local public health unit.

To report a suspected [AEFI](#), please download the [National Adverse Events Following Immunisation \(AEFI\) Reporting Form](#) and contact your local Public Health Unit on 1300 066 055.

NSW Health sends daily reports to the Therapeutic Goods Administration (TGA) of all adverse event reports received.

To assist you to identify which patients experience an adverse event following immunisation, [SmartVax](#) is a program that extracts data from your practice software and sends SMS messages to your patients following vaccination.

Information is also available on the [NSW Health website](#).

Influenza vaccine safety

Data on the safety of influenza vaccines is continuously monitored by the TGA and [AusVaxSafety](#). There is extensive surveillance that demonstrates that the influenza vaccines now used in Australia have an excellent safety profile. Weekly updates are available on the [AusVaxSafety website](#).

A useful Australian Government resource [Questions about vaccination](#).

Vaccine storage and cold chain management

Vaccines must be stored within the recommended temperature range of +2°C to +8°C and protected from light at all times. Correct storage and handling of vaccines is vital to maintaining vaccine potency and ensuring vaccines are safe and effective for patient administration.



Please note FluMist®, nasal spray influenza vaccine has a shorter shelf life of 13-15 weeks than injectable influenza vaccines. Please monitor their expiry date on a regular basis after they are delivered to your facility.

The National Vaccine Storage Guidelines: [Strive for 5](#) (current edition) provides information and advice for vaccine storage management.

In the event that vaccine storage temperatures have been outside of the recommended range of +2°C to +8°C, you must follow your cold chain breach protocol.

Vaccines may lose potency if exposed to direct sunlight or ultraviolet (UV) light. Vaccines must be stored in the purpose-built vaccine refrigerator inside their original cardboard packing to protect them from light exposure. Do not remove vaccines from their original packaging.

All cold chain and light-exposure breaches must be reported to your local public health unit on 1300 066 055. Your public health unit will provide advice regarding vaccine disposal and cold chain management.

For further information and resources on managing vaccine storage and cold chain breaches, including a cold chain training module for all providers, visit the NSW Health website: [Vaccine storage and cold chain management](#).

Where you can find more information

[Australian Government Immunisation website](#)

[NCIRS website](#)

[NSW Immunisation Specialist Service \(NSWISS\) website](#)

[ATAGI statements](#)

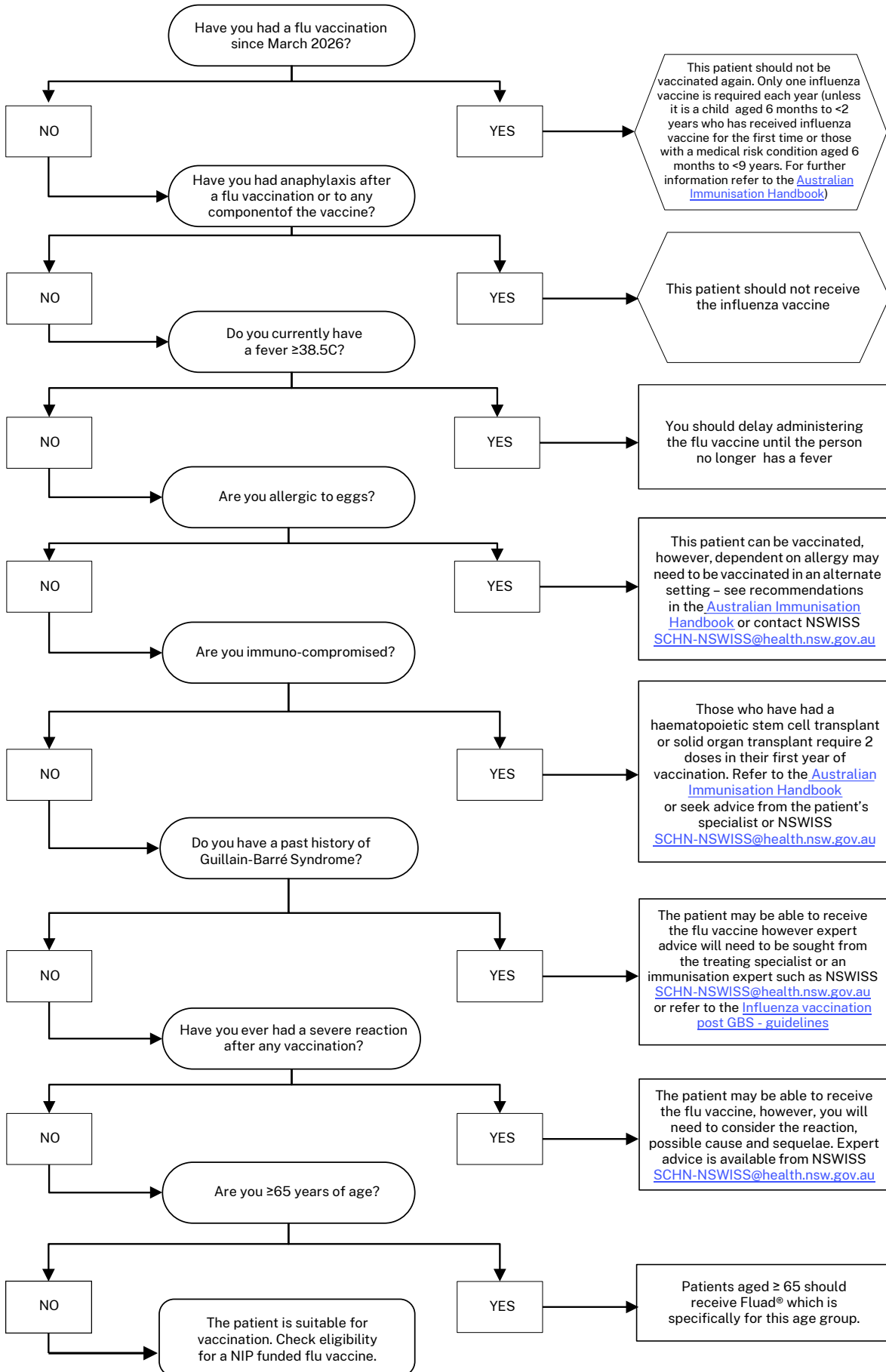
[NSW Health influenza page](#)

Public Health Unit contact number 1300 066 055

(this will connect you to the PHU in the area you are calling from).

Appendix 1

Influenza vaccination decision aid – adults



Appendix 2

2026 Influenza information sheet

2026 influenza vaccine presentation and free vaccine eligibility



6 Months to less than 5 years*

Vaxigrip®

Registered for use in people aged 6 months and over:

- All children 6 months to less than 5 years.
- Vaxigrip is only available in 10-dose packs.
- **Children should receive a full dose (i.e. not a half dose).**
- **Does not contain latex.**

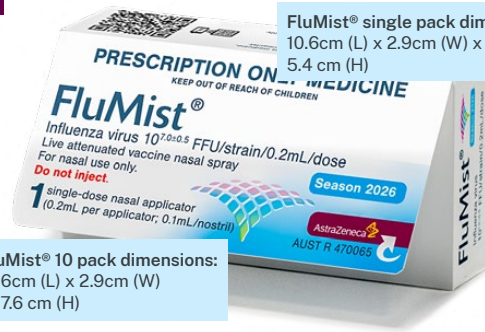


Vaxigrip® pack dimensions:
9.7cm (L) x 11.8cm (W)
x 4.48 cm (H)

2 years to less than 5 years*

FluMist® nasal spray influenza vaccine

- Administered via nasal spray.
- Live attenuated influenza vaccine.
- One dose contains 2 sprays (one in each nostril).
- Contraindicated in children who are moderately and severely immunocompromised or receiving oral salicylate therapy (see [Australian Immunisation Handbook](#) for more information).
- Available in single and 10- dose packs.
- **Does not contain latex.**



FluMist® single pack dimensions:
10.6cm (L) x 2.9cm (W) x
5.4 cm (H)

FluMist® 10 pack dimensions:
10.6cm (L) x 2.9cm (W)
x 17.6 cm (H)

5 Years to 64 years*

Vaxigrip® and Flucelvax®

- People 5 years and over with medical risk factors predisposing to severe influenza.
- All Aboriginal persons 5 years to 64 years of age.
- Pregnant women.
- Vaxigrip® and Flucelvax® are only available in a 10 pack.
- **Children should receive a full dose (i.e. not a half dose).**
- **Does not contain latex.**



Vaxigrip® pack dimensions:
9.7cm (L) x 11.8cm (W)
x 4.48 cm (H)



Flucelvax® pack dimensions:
15.4cm (L) x 13cm (W)
x 23cm (H)

65 years and over

Fluad®

- Adjuvanted trivalent vaccine.
- All persons aged 65 years and over.
- Milky-white suspension.
- Available in 10 packs.
- **Does not contain latex.**
- **Do not use in pregnant women or children.**



Fluad® pack dimensions:
15.4cm (L) x 13cm (W)
x 23cm (H)

* Please refer to the [Australian Immunisation Handbook](#) for advice on the number of influenza vaccine doses required for children aged 6 months to less than 9 years receiving the influenza vaccine for the first time.

