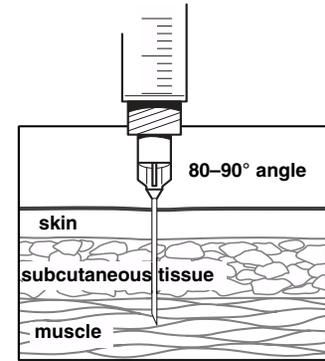


How to administer Intramuscular (IM) Injections

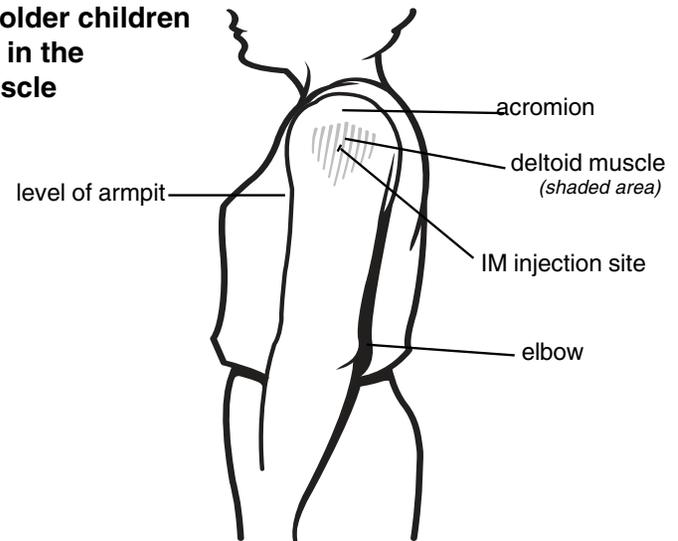
Administer these vaccines via intramuscular (IM) route: DTaP, DT, Td, Hib, hepatitis A, hepatitis B, influenza, PCV7. Administer IPV and PPV23 either IM or SC.

Patient age	Site	Needle size	Needle insertion
Infants (birth to 12 mos. of age)	Vastus lateralis muscle in anterolateral aspect of middle or upper thigh	7/8" to 1" needle, 23–25 gauge	<p>Use a needle long enough to reach deep into the muscle.</p> <p>Insert needle at an 80–90° angle to the skin with a quick thrust.</p> <p>There are no data to document the necessity of aspiration.*</p> <p>Multiple injections given in the same extremity should be separated by a minimum of 1".</p> <p><small>*American Academy of Pediatrics. 2000 Red Book: Report of the Committee on Infectious Diseases: p.18.</small></p>
Young children (12 to 36 mos. of age)	Vastus lateralis muscle preferred until deltoid muscle has developed adequate mass	7/8" to 1" needle, 23–25 gauge	
Older children (>36 mos. of age) and adults	Thickest portion of deltoid muscle—above level of armpit and below acromion	1" to 2" needle, 23–25 gauge	



IM site for infants and young children in the anterolateral thigh

Insert needle at an 80–90° angle into vastus lateralis muscle in the anterolateral aspect of middle or upper thigh.



IM site for older children and adults in the deltoid muscle

Insert needle at an 80–90° angle into densest portion of deltoid muscle—above the level of armpit and below the acromion.

Adapted by the Immunization Action Coalition courtesy of the Minnesota Department of Health

Source: Immunization Action Coalition. Needle Tips, 2002; Vol.12(1): 10
 Note: Following issue will include information on Subcutaneous (SC) Injections.