



RSV Infant Immunisation Program

Quick Reference Guide

This guidance is intended for use in outpatient settings administering nirsevimab (Beyfortus®).

Eligibility - Nirsevimab should be offered as a **catch-up program** to the following three cohorts:

1. all infants born from 1 October 2023 to 30 April 2024
2. all Aboriginal children born from 1 October 2022 to 30 September 2024
3. children with specific medical risk conditions who are entering their second RSV season (i.e. born from 1 Oct 22 - 30 Sep 23) The list of qualifying medical risk conditions is available on the "Eligibility" tab of the WA RSV immunisation website at www.health.wa.gov.au.

In addition, any baby born between 1 May and 30 September 2024 who did not receive nirsevimab prior to hospital discharge should be immunised in the outpatient setting.

Timing - Children in the **catch-up** cohorts should receive nirsevimab during April and May 2024.

Dose - For babies aged < 8 months and weighing < 5kg the dose is 50mg (purple plunger)
For babies aged < 8 months and weighing >= 5kg the dose is 100mg (light blue plunger)
For eligible children aged >= 8 months the dose is 200 mg (2 x 100mg doses) regardless of their weight

Administration - Nirsevimab should be given as an intramuscular (IM) injection - usually in the outer part of the upper thigh.

Co-administration- Nirsevimab can be safely administered at the same time as routine childhood vaccinations, or at any time prior to, or after, administration of childhood vaccines.

Contraindications - Nirsevimab is contraindicated in persons with a history of serious hypersensitivity reactions, including anaphylaxis, to nirsevimab or to any of its components.

Side effects - Although infrequent, the most common side effects after nirsevimab are pain, redness, or swelling where the injection is given, and rash. Serious hypersensitivity reactions are rare, but have been reported following nirsevimab. Clinics administering nirsevimab should be able to recognise and treat serious allergic reactions, including anaphylaxis.

Storage - Store at 2°C to 8°C (Refrigerate. Do not freeze). Nirsevimab may be kept at room temperature for a maximum of 8 hours.

Ordering - Additional doses of nirsevimab can be accessed via Onelink using existing processes for vaccines. Ordering limits apply; practices requiring amounts exceeding these limits should contact vaccineorders@health.wa.gov.au prior to placing an order.

Training - An e-learning RSV immunisation module is available through the WA DOH website. Completing this module is recommended, but not required, for staff administering nirsevimab under the authority of a medical practitioner.

Reporting to AIR - All Beyfortus®/nirsevimab doses administered should be recorded in the Australian Immunisation Register (AIR) via your practice software or directly through PRODA.

Further information - This Quick Reference Guide provides key information about the WA RSV immunisation program. Additional information (e.g. facts sheets, consent support materials) is available at https://www.health.wa.gov.au/Articles/N_R/Respiratory-syncytial-virus-RSV-immunisation. The full nirsevimab/ (Beyfortus®) Product Information can be accessed by scanning the QR code:

