## Administration by the Intramuscular (IM) Route

### Administer by IM route only
- COVID-19
- Dengue
- Diphtheria-tetanus-pertussis (DTaP, Tdap)
- Diphtheria-tetanus (DT, Td)
- Haemophilus influenzae type b (Hib)
- Hepatitis A (HepA)
- Hepatitis B (HepB)
- Human papillomavirus (HPV)
- Inactivated influenza vaccine (IIV)
- Meningococcal serogroups A,C,W,Y (MenACWY)
- Meningococcal serogroup B (MenB)
- Pneumococcal conjugate (PCV)
- Zoster (RZV)

### Administer by IM or Subcutaneous (Subcut) route
- Inactivated polio vaccine (IPV)
- Measles, mumps, and rubella (MMR II [Merck] only)
- Pneumococcal polysaccharide (PPSV23)
- Varicella (VAR)

### Needle insertion

**Use a needle long enough to reach deep into the muscle.**

Insert needle at a 90° angle to the skin with a quick thrust.

(Before administering an injection of vaccine, it is not necessary to aspirate, i.e., to pull back on the syringe plunger after needle insertion.)

Multiple injections given in the same extremity should be separated by a minimum of 1", if possible.

### Reference

### PATIENT AGE | INJECTION SITE | NEEDLE SIZE
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Newborn (0–28 days) | Anterolateral thigh muscle | ¼"–1" (22–25 gauge)
Infant (1–12 mos) | Anterolateral thigh muscle | 1" (22–25 gauge)
Toddler (1–2 years) | Anterolateral thigh muscle | 1–1¼" (22–25 gauge)
Alternate site: Deltoid muscle of arm if muscle mass is adequate | ¾–1" (22–25 gauge)
Children (3–10 years) | Deltoid muscle (upper arm) | ¾–1" (22–25 gauge)
Alternate site: Anterolateral thigh muscle | 1–1¼" (22–25 gauge)
Children and adults (11 years and older) | Deltoid muscle (upper arm) | ¾–1½" (22–25 gauge)
Alternate site: Anterolateral thigh muscle† | 1½–1½" (22–25 gauge)

* A ¼" needle usually is adequate for neonates (first 28 days of life), preterm infants, and children ages 1 through 18 years if the skin is stretched flat between the thumb and forefinger and the needle is inserted at a 90° angle to the skin.

† A ¼" needle may be used in patients weighing less than 130 lbs (<60 kg) for IM injection in the deltoid muscle only if the skin is stretched tightly and subcutaneous tissues are not bunched; a 1" needle is sufficient in patients weighing 130–152 lbs (60–70 kg); a 1–1½" needle is recommended in women weighing 153–200 lbs (70–90 kg) and men weighing 153–260 lbs (70–118 kg); a 1½" needle is recommended in women weighing more than 200 lbs (91 kg) or men weighing more than 260 lbs (118 kg).

‡ A 1" needle may be used for an IM injection in the anterolateral thigh muscle of an adult of any weight if the skin is stretched tightly and subcutaneous tissues are not bunched. For more information on how to administer an IM injection in the anterolateral thigh of an adult, see www.immunize.org/catg.d/p2030.pdf.

### Intramuscular (IM) injection site for infants and toddlers

**Intramuscular (IM) injection site for children and adults**

**Intramuscular (IM) injection site for adults**

**IM injection site (shaded area)**

Insert needle at a 90° angle into the anterolateral thigh muscle.

**Alternate injection site for adults**

(outerior portion of middle third of thigh)

**Greater trochanter of femur**

**Vastus lateralis (middle third)**

**Lateral femoral condyle**

**Greater trochanter of femur**

**Vastus lateralis (middle third)**

**Lateral femoral condyle**

**level of armpit**

**acromion process (bony prominence above deltoid)**

**elbow**

**IM injection site (shaded area = deltoid muscle)**

Give in the central and thickest portion of the deltoid muscle – above the level of the armpit and approximately 2–3 fingerbreadths (~2") below the acromion process. See the diagram. To avoid causing an injury, do not inject too high (near the acromion process) or too low.

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Item #P2020 (4/6/2023)
Administration by the Subcutaneous (Subcut) Route

Administer by Subcut route only
- Dengue
- MMR (Priorix [GSK])

Administer by Subcut or IM route
- Inactivated polio vaccine (IPV)
- MMR (MMR II [Merck])
- Pneumococcal polysaccharide (PPSV23)
- Varicella (VAR)

Administer by Subcut or intradermal (ID) route
- Monkeypox vaccine (Jynneos)

Note: Subcut is indicated on the package insert. ID administration to adults (18+ years) is permitted under FDA emergency use authorization (see www.fda.gov/media/160774/download).

<table>
<thead>
<tr>
<th>PATIENT AGE</th>
<th>INJECTION SITE</th>
<th>NEEDLE SIZE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth to 12 months</td>
<td>Fatty tissue overlying the anterolateral thigh muscle</td>
<td>¼” (23–25 gauge)</td>
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<tr>
<td>12 months and older</td>
<td>Fatty tissue overlying the anterolateral thigh muscle or fatty tissue over triceps</td>
<td>¼” (23–25 gauge)</td>
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</tbody>
</table>

Needle insertion
Pinch up on subcutaneous tissue to prevent injection into muscle.
Insert needle at 45° angle to the skin.
(Before administering an injection of vaccine, it is not necessary to aspirate, i.e., to pull back on the syringe plunger after needle insertion.)

Multiple injections given in the same extremity should be separated by a minimum of 1”.

Subcutaneous (Subcut) injection site for infants
Insert needle at a 45° angle into fatty tissue of the anterolateral thigh. Make sure you pinch up on subcutaneous tissue to prevent injection into the muscle.

Subcutaneous (Subcut) injection site for children (after the 1st birthday) and adults
Insert needle at a 45° angle into the fatty tissue overlying the triceps muscle. Make sure you pinch up on the subcutaneous tissue to prevent injection into the muscle.

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