Anatomic Sites for IMMUNIZATION

INTRAMUSCULAR (IM)

Vaccines given intramuscularly (IM):
- Diphtheria-Tetanus-Pertussis
- Haemophilus influenzae, type b
- Hepatitis A  
- Hepatitis B  
- Meningococcal Conjugate
- Pneumococcal Conjugate

Intramuscular shots in infants and toddlers are usually given in the anterolateral thigh. The vastus lateralis muscle is on the outside of the leg in the mid- to upper-thigh.

Use 23–25 gauge, 1” needle. Insert entire needle at 90º angle.

Child/Adult Intramuscular Shot

Site: Deltoid

Intramuscular injections to children and adults are usually given in the upper arm. The deltoid muscle is found about 3 fingers below the acromion, above the level of the armpit.

Use 23–25 gauge, 1” needle. Insert entire needle at 90º angle. A 1 1/2” needle may be needed for large adults.

SUBCUTANEOUS (SC)

Vaccines given subcutaneously (SC):
- Inactivated Polio Vaccine*
- Measles-Mumps-Rubella
- Pneumococcal Polysaccharide*
- Varicella

*Can also be given IM

Subcutaneous shots in infants and toddlers are given either in the upper arm or in the fatty area of the thigh. The tissue is “pinched” up between the thumb and index finger.

Use 25 gauge, 1/2” needle. Insert entire needle at 45º angle.

Infant/Toddler Subcutaneous Shot

Site: Outer Aspect

Given in the upper arm. The tissue on the back of the upper arm is “pinched” up between the thumb and index finger.

Use 25 gauge, 1/2” needle. Insert entire needle at 45º angle.

Child/Adult Subcutaneous Shot

Site: Outer Aspect

*Medical Illustrations by Lynne Larson, www.biovisuals.com. All rights reserved. This chart is based on extensive review of the scientific literature including recommendations of the Advisory Committee on Immunization Practices (MMWR 1994; 43RR-1, 1-38) and the American Academy of Pediatrics (Red Book 2000). The purpose of this chart is to present the most customarily recommended injection sites and needle sizes. For alternatives or additional information, please refer to the vaccine manufacturer’s package insert and the cited references. Devices illustrated are available with engineered sharps injury prevention mechanisms.*