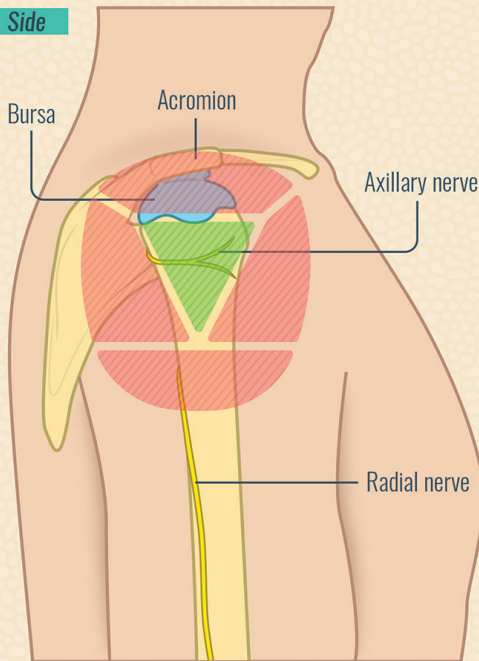


Figure 1

SIRVA

Shoulder Injury Related to Vaccine Administration

Side



What to watch for when landmarking:

Too High*

*Most reported cause of injury

- Risk of injecting into shoulder joint or bursa
- Can cause inflammation leading to bursitis, frozen shoulder syndrome, and other complications
- Watch for prolonged shoulder pain, weakness, and decreased range of motion
- Symptoms begin within hours to days
- Without treatment, symptoms last months and may never resolve

Too Far to Side

- Can inject into axillary nerve

Too Low

- Can inject into radial nerve

- Can cause paralysis and/or neuropathy
- Watch for burning, shooting pain during injection
- Symptoms start immediately

What happens when:

Needle Too Short

Can inject into subcutaneous tissue

- More painful for patient
- Risk of skin reaction
- Vaccine may be less effective

Needle Too Long

Can hit bone or nerve

- If you hit bone, pull needle **back slightly** and inject
- If you hit nerve, pull needle out and try again

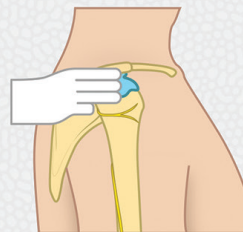
Tips to Avoid SIRVA

Landmark, don't "eyeball"

Always sit to inject a seated patient

Expose the shoulder completely

When a shirt can't be removed, roll the sleeve up, don't pull the shirt's neck over the shoulder



Remember!

2-3 fingers down from the acromion

¹Atanasoff S, Ryan T, Lightfoot R, Johann-Liang R. Vaccine 2010;28(51):8049-52. doi: 10.1016/j.vaccine.2010.10.005. Epub 2010 Oct 16.

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³Cook IF. Hum Vaccin 2011; 7(8):845-8. doi: 10.4161/hv.7.8.16271. Epub 2011 Aug 1.

⁴Cook IF. Hum Vaccin Immunother 2015; 11(5):1184-91. doi: 10.1080/21645515.2015.1017694.

⁵Cross GB, Moghaddas J, Buttery J, Ayoub S, Korman TM. Aust Fam Physician 2016; 45(5):303-6.

⁶Davidson LT, Carter GT, Kilmer DD, Han JJ. Am J Phys Med Rehabil 2007; 86(6):507-11.

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