

NEONATAL West of Scotland Drug Monographs

Parenteral Routes

Nirsevimab

FORM	Beyfortus 50 mg/0.5ml solution for injection in pre-filled syringe Beyfortus 100 mg/ml solution for injection in pre-filled syringe
INDICATION	Passive prophylaxis of respiratory syncytial virus (RSV) to eligible infants as recommended by the annual JCVI/Public Health (PH) report and outlined in the Green Book Chapter 27a.
ADMINISTRATION SCHEDULE	Eligible infants being discharged from hospital for the first time or being transferred to a ward with high risk of RSV exposure (eg downstream paediatric ward) during the RSV season (defined by JCVI/ PH) should receive Nirsevimab while an inpatient. Ideally give 1 week prior to discharge / transfer. Those who meet the eligibility criteria because they were born <32 weeks gestation but were discharged out with the RSV season will be invited as an outpatient to receive Nirsevimab at the beginning of their first season with potential RSV exposure.

DOSE RANGE

WEIGHT	DOSE	FREQUENCY	ROUTE
<5kg	50mg	Single Dose	IM
≥5kg	100mg	Single Dose	IM

Administration

Nirsevimab is available in a ready-to-use pre-filled syringe with no further dilution required.

Administered intramuscularly, preferably in the anterolateral aspect of the thigh. The gluteal muscle should not be used routinely as an injection site because of the risk of damage to the sciatic nerve. If two injections are required, different injection sites should be used. The injection should be given using standard aseptic technique.

****There is no evidence to support s/c administration in infants with haematological disorders, where IM injection should be avoided. These individuals should be discussed with a Consultant****

CAUTIONS, CONTRA-INDICATIONS AND SIDE EFFECTS

- Although rare, severe hypersensitivity reaction including anaphylaxis have been reported following administration and it is recommended that an anaphylaxis kit is available.

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FURTHER INFORMATION

- Infants should be offered nirsevimab regardless of whether the mother was vaccinated during the pregnancy
- Minor illnesses without fever or systemic upset are not valid reasons to postpone immunisation. If an individual is acutely unwell, immunisation may be postponed until they have fully recovered.
- Please report all adverse drug reactions via the Yellow Card Scheme.
- If taken out the fridge Beyfortus may be kept at room temperature (20 °C - 25 °C) when protected from light for a maximum of 8 hours. After this time, the syringe must be discarded.
- A single dose of Beyfortus provides at least 5 months of protection based on clinical and pharmacokinetic data

STORAGE

Store in a refrigerator (2 °C - 8 °C).

Keep the pre-filled syringe in the outer carton in order to protect from light.

Do not shake or expose to direct heat.

LICENSED STATUS

Licensed

APPLICABLE POLICIES

West of Scotland Immunisation Guideline
Green Book Chapter 27a: Respiratory syncytial virus
Consult local policy if applicable

Document Number:	001	Supersedes:	Nil
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Date Prepared	September 2025	Review Date	September 2028

Administer reconstituted solutions immediately.

All vials, ampoules and infusion bags are for single use only unless otherwise stated.

Dose may vary depending on indication, age, renal function, hepatic function, and concomitant medications.
This monograph should be used in conjunction with the terms of reference document prepared by the West of Scotland Pharmacist Network. Information is correct at the time of publication and as per local practice agreement.
For further advice please contact your clinical pharmacist or pharmacy department
