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2025-2026 COVID-19 Vaccine Standing Order for Administering Vaccine

Standing Order and Protocol

Purpose:

To reduce morbidity and mortality from COVID-19, this statewide standing order authorizes qualified health care professionals to administer the 2025-2026 COVID-19 vaccine to individuals who meet the criteria established by the Illinois Department of Public Health (IDPH).

Authority:

This standing order is issued pursuant to IDPH's Powers and Duties Law, 20 ILCS 2305, which allows the agency to order the administration of vaccines or other treatments as necessary to prevent the probable spread of a contagious and infectious disease. This legal authority extends to IDPH's authority and obligation to restrict and suppress the spread of COVID-19 as a respiratory illness that increases during the fall and winter seasons.

Policy:

This standing order authorizes health care professionals (HCPs) licensed in the State of Illinois who work in pharmacies and other appropriate clinical settings and who are authorized to administer vaccines acting within the scope of their respective practice acts (Medical Practice Act, 225 ILCS 60; Nursing Practice Act, 225 ILCS 65; Pharmacy Practice Act, 225 ILCS 85; Physician Assistant Practice Act, 225 ILCS 95) to assess and vaccinate individuals who satisfy the criteria in the "Procedure" section below without the need for clinician examination or direct order from the attending provider at the time of the interaction. Any health care professionals who administer vaccines as a delegated task or duty from a collaborating or supervising physician must ensure the collaborating or supervising physician has authorized administration of vaccines under this standing order.

Procedure

1. Assess individuals ages 6 months and older for vaccination against SARS-CoV-2.

- Confirm COVID-19 vaccination history and whether the individual is moderately or severely immunocompromised. Self-attestation by the patient or parent/guardian of their moderately or severely immunocompromised status is acceptable.
 - Detailed vaccination schedules and intervals between doses can be found in Appendix A for people vaccinated under the routine schedule (e.g., people who are not moderately or severely immunocompromised) and in Appendix B for people who are moderately or severely immunocompromised.
 - Age-appropriate vaccine products and dosages are listed under Section 5 on vaccine administration.
- COVID-19 vaccination is recommended for the following groups:
 - Children
 - All children ages 6 months through 23 months.
 - Children ages 2 years through 17 years in the following risk categories (Self-attestation of risk by the parent/guardian is acceptable.):
 - Persons at high risk of severe COVID-19 (see Appendix C)
 - Residents of long-term care facilities or other congregate settings
 - Persons who have never been vaccinated against COVID-19
 - Persons whose household contacts are at high risk for severe COVID-19.
 - Children ages 2 years through 17 years based on shared clinical decision-making if not included in a risk group but whose parent or guardian desires their protection from COVID-19.
 - Pregnant People
 - All individuals who are or will be pregnant, during any trimester of pregnancy, postpartum, or during lactation.
 - Adults
 - All adults ages 18 years and older.
- Additional Clinical Considerations
 - The COVID-19 vaccine may be simultaneously administered with other routinely recommended vaccines.
 - There are additional considerations for simultaneous administration of an [orthopoxvirus vaccine](#) and COVID-19 vaccine.

- Administration of COVID-19 vaccines should not be delayed in patients taking immunosuppressive therapies. Whenever possible, COVID-19 vaccines should be administered at least 2 weeks before initiation or resumption of immunosuppressive therapies. For patients who receive B-cell-depleting therapies on a continuing basis, COVID-19 vaccines should be administered approximately 4 weeks before the next scheduled therapy.
- Persons who have received HCT or CAR-T-cell therapy
 - Revaccinate persons who received doses of COVID-19 vaccine prior to or during HCT or CAR-T-cell therapy. Revaccination should start at least 3 months (12 weeks) after transplant or CAR-T-cell therapy and should follow the currently recommended schedule for people who are unvaccinated.
- A patient's clinical team is best positioned to determine the degree of immune compromise, need for revaccination, and appropriate timing of revaccination.
- For additional details and clinical considerations, see [CDC's Interim Clinical Considerations for Use of COVID-19 Vaccines](#).

2. Screen for contraindications and precautions.

- **Contraindications:**
 - History of a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine.
- **Precautions:**
 - History of:
 - A diagnosed non-severe allergy to a component of COVID-19 vaccine.
 - Non-severe, immediate (onset less than 4 hours) allergic reaction after administration of a previous dose of one COVID-19 vaccine type, if receiving the same vaccine type.
 - Moderate to severe acute illness, with or without fever.
 - Multisystem inflammatory syndrome in children (MIS-C) or adults (MIS-A).
 - Myocarditis or pericarditis within 3 weeks after a dose of any COVID-19 vaccine.
- If there is any uncertainty about proceeding with vaccination, consult your facility's medical director, your collaborating or supervising physician, or the patient's primary care or specialty provider.

3. Provide vaccine information statements.

- Prior to vaccination, provide all patients or their parent/guardian with a copy of the most current federal vaccine information statement (VIS). Provide non-English speaking patients or their parent/guardian with a copy of the VIS in their native language, if one is available and desired, in addition to an English language VIS.
- If the 2025-2026 English-language VIS is not yet available, provide the patient or their parent/guardian with the manufacturer's *Information for Recipients and Caregivers* document.
- COVID-19 VIS in English: <https://www.cdc.gov/vaccines/hcp/current-vis/covid-19.html>
- COVID-19 VIS in Additional Languages: <https://www.immunize.org/vaccines/vis/covid-19/>

4. Prepare to administer the vaccine.

- Verify that the vial or syringe label indicates the 2025–2026 formulation and that the dosage is appropriate for the patient's age.
- Choose the needle gauge, needle length, and injection site according to the following charts:

Infant/Child:

Age of child/Weight of adult	Needle gauge	Needle length	Injection site
Age 6 through 11 months	22-25	1"	Vastus lateralis of anterolateral thigh ¹
Age 1 through 2 years	22-25	1"	Vastus lateralis of anterolateral thigh ¹
	22-25	5/8–1"	Deltoid muscle of arm
Age 3 through 10 years	22-25	5/8 ² –1"	Deltoid muscle of arm ¹
	22-25	1"	Vastus lateralis of anterolateral thigh
Children, 11–18 years	22–25	5/8 ² –1"	Deltoid muscle of arm ^{1,3}

Adapted from <https://www.immunize.org/wp-content/uploads/catg.d/p3085.pdf>

¹ Preferred site

² Alternate needle lengths may be used for IM injections if the skin is stretched tightly, the subcutaneous tissues are not bunched, and the injection is made at a 90° angle to the skin.

³ The vastus lateralis muscle in the anterolateral thigh can also be used. Most adolescents and adults will require a 1- to 1.5-inch (25–38 mm) needle to ensure intramuscular administration.

Adult:

Weight of Patient	Needle Gauge	Needle Length	Injection Site
Less than 130 lbs	22–25	5/8 ⁴ –1"	Deltoid muscle of arm
130–152 lbs	22–25	1"	Deltoid muscle of arm
153–200 lbs (females) 153–260 lbs (males)	22–25	1–1 ½ "	Deltoid muscle of arm
>200 lbs (females) >260 lbs (males)	22–25	1½"	Deltoid muscle of arm

Adapted from <https://www.immunize.org/wp-content/uploads/catg.d/p3085.pdf>

⁴ A 5/8" needle for patients weighing less than 130 lbs may be used for IM injections if the skin is stretched tight, the subcutaneous tissue is not bunched, and the injection is made at a 90° angle to the skin.

5. Administer any recommended, age-appropriate, COVID-19 vaccine using the vaccine product and dosing chart below, and according to the number of recommended doses and intervals between doses included in Appendix A (Routine COVID-19 vaccination schedule for people who are NOT moderately or severely immunocompromised) and Appendix B (COVID-19 vaccination schedule for people who ARE moderately or severely immunocompromised).

COVID-19 Vaccine Products and Dosing Based on Age:

Age	COVID-19 Vaccine product	Dosage
6 months through 4 years	Spikevax (Moderna)	25 mcg/0.25 mL
5 years through 11 years	Comirnaty (Pfizer-BioNTech)	10 mcg/0.3 mL
	Spikevax (Moderna)	25 mcg/0.25 mL
12 years and older	Comirnaty (Pfizer-BioNTech)	30 mcg/0.3 mL
	Spikevax (Moderna)	50 mcg/0.5 mL
	mNEXSPIKE (Moderna)	10 mcg/0.2 mL
	Nuvaxovid (Novavax)	5 mcg of rS and 50 mcg of Matrix-M adjuvant/0.5 mL

6. Document vaccination.

- Document each patient's vaccine administration information and any needed follow-up in the following places:
 - Medical record: Record the date the vaccine was administered, the manufacturer and lot number, the vaccination site and route, and the name and address and, if appropriate, the title of the person administering the vaccine. You must also document, in the patient's medical record or office log, the publication date of the VIS and the date it was given to the patient. Note that medical records/charts should be documented and retained in accordance with applicable state laws and regulations. If the vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal); discuss the need for vaccination with the patient at the next visit.
 - Personal immunization record card: Record the date of vaccination and the name/location of the administering clinic.
 - Immunization Information System (IIS) or "registry": The [Illinois Immunization Registry Code, 77 Ill. Admin. Code § 689.40\(d\)](#) requires providers to report all administered COVID-19 immunizations to the Illinois Immunization Information System.

7. Be prepared to manage medical emergencies.

- Be prepared for management of a medical emergency related to the administration of vaccine by having a written emergency medical protocol available, as well as equipment and medications.
- Maintain and follow policies in accordance with General Best Practices for Immunization (<https://www.cdc.gov/vaccines/hcp/imz-best-practices/index.html>)
- Resources:
 - CDC's Preventing and Managing Adverse Reactions: <https://www.cdc.gov/vaccines/hcp/imz-best-practices/preventing-managing-adverse-reactions.html>
 - CDC's Considerations for People With a History of Allergies or Allergic Reactions: https://www.cdc.gov/covid/hcp/vaccine-considerations/contraindications-precautions.html#cdc_vaccine_special_topics_research-considerations-for-people-with-a-history-of-allergies-or-allergic-reactions
 - Immunize.org's Medical Management of Vaccine Reactions in Adults in a Community Setting: www.immunize.org/catg.d/p3082.pdf.
 - Immunize.org's Medical Management of Vaccine Reactions in Children and Teens in a Community Setting: <http://www.immunize.org/catg.d/p3082a.pdf>.

- To prevent syncope, vaccinate patients while they are seated or lying down and consider observing them for 15 minutes after receipt of the vaccine.
- Consider observing the following people for 30 minutes:
 - A history of a non-severe, immediate (onset within 4 hours) allergic reaction after a previous dose of one COVID-19 vaccine type, if receiving the same vaccine type
 - A history of a diagnosed non-severe allergy to a component of the COVID-19 vaccine, if receiving the same vaccine type
- Health care personnel who are trained and qualified to recognize the signs and symptoms of anaphylaxis as well as to administer epinephrine should be available at the vaccination location at all times.

8. Report adverse events to VAERS.

- Report all adverse event following the administration of COVID-19 vaccine to the federal Vaccine Adverse Event Reporting System (VAERS). To submit a VAERS report online (preferred) or to download a writable PDF form, go to <https://vaers.hhs.gov/reportevent.html>. Further assistance is available at (800) 822-7967.

Standing Order Authorization

The guidance, protocols, and procedures outlined in this standing order shall become effective on September 23, 2025 and remain in force until rescinded or until September 22, 2026.

<u>Sameer Vohra</u>	License: 036135164 NPI: 1841585783	<u>9/23/2025</u>
Physician's Signature	License No. and NPI No.	Date
<u>Sameer Vohra MD, JD, MA</u>		
Physician's Name (Print)		

Effective Date: September 23, 2025
Expiration Date: September 22, 2026

Appendix A

Routine COVID-19 Vaccination Schedule for People Who Are NOT Moderately or Severely Immunocompromised

Table 1a: Ages 6 months through 23 months NOT moderately or severely immunocompromised

Recommended number of COVID-19 vaccine doses based on vaccination history

COVID-19 vaccination history* before 2025–2026 COVID-19 vaccine	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine [†] and interval between doses
Unvaccinated: Receive an initial series with 2025–2026 COVID-19 vaccine		
Unvaccinated	2	2025–2026 Dose 1 (Moderna Spikevax): Day 0 2025–2026 Dose 2 (Moderna Spikevax): 4–8 weeks after Dose 1 [‡]
Initiated but did not complete the initial series before 2025–2026 vaccine: Complete the initial series with 2025–2026 vaccine		
1 dose Moderna	1	2025–2026 Dose 1 (Moderna Spikevax): At least 4-8 weeks after last dose [‡]
1 dose Pfizer-BioNTech	2	2025–2026 Dose 1 (Moderna Spikevax): At least 4-8 weeks after last dose [‡] 2025–2026 Dose 2 (Moderna Spikevax): At least 8 weeks after Dose 1 [‡]
2 or more doses Pfizer-BioNTech vaccine	1	2025–2026 Dose 1 (Moderna Spikevax): At least 8 weeks after last dose
Completed the initial series before 2025–2026 vaccine: Receive 1 dose of 2025–2026 vaccine		
2 or more doses Moderna OR 3 or more doses Pfizer-BioNTech	1	2025–2026 Dose 1 (Moderna Spikevax): At least 8 weeks after last dose

*COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines and includes original, bivalent, 2023–2024, and 2024–2025 COVID-19 vaccines.

[†]Dosage for Moderna Spikevax: 25 mcg/0.25 mL.

[‡]An [8-week interval](#) between the first and second mRNA COVID-19 vaccine doses might be optimal for some people as it might reduce the rare risk of myocarditis and pericarditis associated with these vaccines.

Table 1b: Ages 2 years through 11 years NOT moderately or severely immunocompromised

Recommended number of COVID-19 vaccine doses based on vaccination history

- See footnote* for guidance on children who transition from age 4 years to age 5 years during the initial vaccination series.

COVID-19 vaccination history before 2025–2026 COVID-19 vaccine [†]	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine [‡] and interval between doses
Unvaccinated: Receive 1 dose of 2025–2026 COVID-19 vaccine		
Unvaccinated	1	2025–2026 Dose 1 (For children ages 2–4 years: Moderna Spikevax; for children ages 5–11 years: Moderna Spikevax or Pfizer-BioNTech Comirnaty): Day 0
Previously vaccinated before 2025–2026 COVID-19 vaccine: Receive 1 dose of 2025–2026 COVID-19 vaccine		
1 or more doses mRNA (Moderna or Pfizer-BioNTech) vaccine	1	2025–2026 Dose 1 (For children ages 2–4 years: Moderna Spikevax; for children ages 5–11 years: Moderna Spikevax or Pfizer-BioNTech Comirnaty): At least 2 months after last dose

*Children who transition from age 4 years to age 5 years during the initial vaccination series should receive 1 dose of vaccine from the same manufacturer at the dosage for children ages 5–11 years on or after turning age 5 years:

- Moderna: 1 dose of 2025–2026 Moderna Spikevax (25 mcg/0.25 mL) 4–8 weeks after the first dose; there is no dosage change.
- Pfizer-BioNTech: 1 dose of 2025–2026 Pfizer-BioNTech Comirnaty (10 mcg/0.3 mL). If the 10 mcg dose is the second dose, administer 3–8 weeks after the first dose; if it is the third dose, administer at least 8 weeks after the second dose.

- NOTE: If more than 8 weeks have elapsed since receipt of the last dose of mRNA COVID-19 vaccine at the dosage for children ages 6 months–4 years, any 2025–2026 mRNA COVID-19 vaccine (i.e., Moderna Spikevax or Pfizer-BioNTech Comirnaty) may be administered at the dosage for children ages 5–11 years.

[†]COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines and includes original, bivalent, 2023–2024, and 2024–2025 COVID-19 vaccines.

[‡]Dosage for Moderna Spikevax: 25 mcg/0.25 mL; dosage for Pfizer-BioNTech Comirnaty: 10 mcg/0.3 mL.

Table 1c: Ages 12 through 64 years NOT moderately or severely immunocompromised

Recommended number of COVID-19 vaccine doses based on vaccination history, including people who are pregnant.

COVID-19 vaccination history before 2025–2026 COVID-19 vaccine*†	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine‡ and interval between doses
Unvaccinated: Initiate vaccination with 2025–2026 COVID-19 vaccine		
Unvaccinated	1	2025–2026 Dose 1 (Moderna Spikevax, Modern mNEXSPIKE, Novavax Nuvaxovid, Pfizer-BioNTech Comirnaty): Day 0
Previously vaccinated before 2025–2026 COVID-19 vaccine: Receive 1 dose of 2025–2026 COVID-19 vaccine		
1 or more Moderna, Novavax, or Pfizer-BioNTech	1	2025–2026 Dose 1 (Moderna Spikevax, Novavax Nuvaxovid or Pfizer-BioNTech Comirnaty): At least 2 months after last dose 2025–2026 Dose 1 (Moderna mNEXSPIKE): At least 3 months after last dose

*COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines and includes original, bivalent, 2023–2024, and 2024-2025 COVID-19 vaccines.

†People ages 18-64 years who received 1 or more doses of Janssen COVID-19 Vaccine should receive 1 dose of any 2025–2026 COVID vaccine.

‡Dosage for Moderna Spikevax: 50 mcg/0.5 mL; dosage for Moderna mNEXSPIKE: 10 mcg/0.2 mL; dosage for Novavax Nuvaxovid: 5 mcg rS protein and 50 mcg Matrix-M adjuvant/0.5 mL; dosage for Pfizer-BioNTech Comirnaty: 30 mcg/0.3 mL.

Table 1d: 65 years and older NOT moderately or severely immunocompromised

Recommended number of COVID-19 vaccine doses based on vaccination history

COVID-19 vaccination history before 2025–2026 COVID-19 vaccine*†	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine‡ and interval between doses
Unvaccinated: Initiate vaccination with 2025–2026 COVID-19 vaccine		
Unvaccinated	2	2025–2026 Dose 1 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): Day 0 2025–2026 Dose 2 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months for Spikevax, Nuvaxovid, Comirnaty; minimum interval 3 months for mNEXSPIKE) after Dose 1
Previously vaccinated before 2025–2026 COVID-19 vaccine: Receive 2 doses of 2025–2026 COVID-19 vaccine		
1 or more doses mRNA (Moderna, Novavax, or Pfizer-BioNTech) vaccine	2	2025–2026 Dose 1 (Moderna Spikevax, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): At least 2 months after last dose 2025–2026 Dose 1 (Moderna mNEXSPIKE): At least 3 months after last dose 2025–2026 Dose 2 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months for Spikevax, Nuvaxovid, Comirnaty; minimum interval 3 months for mNEXSPIKE) after 2025–2026 Dose 1

*COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines and includes original, bivalent, 2023–2024 and 2024–2025 COVID-19 vaccines.

†People ages 65 years and older who received 1 or more doses of Janssen COVID-19 Vaccine should receive a first dose of any 2025–2026 COVID-19 vaccine followed by a second dose of any 2025–2026 COVID-19 vaccine 6 months (minimum interval 2 months for Spikevax, Nuvaxovid, Comirnaty; minimum interval 3 months for mNEXSPIKE) after the first dose.

‡Dosage for Moderna Spikevax: 50 mcg/0.5 mL; dosage for Moderna mNEXSPIKE: 10 mcg/0.2 mL; dosage for Novavax Nuvaxovid: 5 mcg rS protein and 50 mcg Matrix-M adjuvant/0.5 mL; dosage for Pfizer-BioNTech Comirnaty: 30 mcg/0.3 mL.

Appendix B

COVID-19 Vaccination Schedule for People Who ARE Moderately or Severely Immunocompromised

Table 2a: Ages 6 months–4 years and ARE moderately or severely immunocompromised

Recommended number of COVID-19 vaccine doses based on vaccination history

COVID-19 vaccination history before 2025–2026 COVID-19 vaccine*	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine [†] and interval between doses
Unvaccinated: - Receive an initial 3-dose series with 2025–2026 vaccine - Receive 1 dose of 2025–2026 vaccine 6 months (minimum interval 2 months) after completing initial series - May receive additional doses of 2025–2026 vaccine under shared clinical decision-making[‡]		
Unvaccinated	4	2025–2026 Dose 1 (Moderna Spikevax): Day 0 2025–2026 Dose 2 (Moderna Spikevax): 4 weeks after Dose 1 2025–2026 Dose 3 (Moderna Spikevax): At least 4 weeks after Dose 2 2025–2026 Dose 4 (Moderna Spikevax): 6 months (minimum interval 2 months) after Dose 3 Additional doses (Moderna Spikevax): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 Moderna dose [‡]
Initiated but did not complete the initial series before 2025–2026 vaccine: - Complete the initial 3-dose series with 2025–2026 vaccine - Receive 1 dose of 2025–2026 vaccine 6 months (minimum interval 2 months) after completing initial series - May receive additional doses of 2025–2026 vaccine under shared clinical decision-making[‡]		
1 dose Moderna or Pfizer-BioNTech	3	2025–2026 Dose 1 (Moderna Spikevax): 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax): At least 4 weeks after 2025–2026 Dose 1 2025–2026 Dose 3 (Moderna Spikevax): 6 months (minimum interval 2 months) after 2025–2026 Dose 2 Additional doses (Moderna Spikevax): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 Moderna dose [‡]
2 doses Moderna or Pfizer-BioNTech	2	2025–2026 Dose 1 (Moderna Spikevax): At least 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax): 6 months (minimum interval 2 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 Moderna dose [‡]

Completed the 3-dose initial series before 2025–2026 vaccine: • Receive 2 doses of 2025–2026 vaccine spaced 6 months (minimum interval 2 months) apart • May receive additional doses of 2025–2026 vaccine under shared clinical-decision making[‡]		
3 or more doses Moderna or Pfizer	2	2025–2026 Dose 1 (Moderna Spikevax): At least 8 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax): 6 months (minimum interval 2 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 Moderna dose [‡]

*COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines, and includes original, bivalent, 2023-2024, and 2024–2025 COVID-19 vaccines.

†Dosage for Moderna Spikevax: 25 mcg/0.25 mL.

‡Additional doses may be administered, informed by the clinical judgment of a healthcare provider and personal preference and circumstances.

Table 2b: Ages 5 years through 11 years and ARE moderately or severely immunocompromised

Recommended number of COVID-19 vaccine doses based on vaccination history

- See footnote* for guidance on children who transition from age 4 years to age 5 years during the initial vaccination series.

COVID-19 vaccination history before 2025–2026 COVID-19 vaccine [†]	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine [‡] and interval between doses
Unvaccinated: • Receive an initial 3-dose series with 2025–2026 vaccine • Receive 1 dose of 2025–2026 vaccine 6 months (minimum interval 2 months) after completing initial series • May receive additional doses of 2025–2026 vaccine under shared clinical decision-making[§]		
Unvaccinated	4	2025–2026 Dose 1 (Moderna Spikevax): Day 0 2025–2026 Dose 2 (Moderna Spikevax): 4 weeks after Dose 1 2025–2026 Dose 3 (Moderna Spikevax): At least 4 weeks after Dose 2 2025–2026 Dose 4 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after Dose 3 Additional doses (Moderna Spikevax or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 Moderna dose [§]
	OR	
	4	2025–2026 Dose 1 (Pfizer-BioNTech Comirnaty): Day 0 2025–2026 Dose 2 (Pfizer-BioNTech Comirnaty): 3 weeks after Dose 1 2025–2026 Dose 3 (Pfizer-BioNTech Comirnaty): At least 4 weeks after Dose 2 2025–2026 Dose 4 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after Dose 3 Additional doses (Moderna or Pfizer-BioNTech): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 mRNA dose [§]

Initiated but did not complete the initial series before 2025–2026 vaccine:

- Complete the initial 3-dose series with 2025–2026 vaccine
- Receive 1 dose of 2025–2026 vaccine 6 months (minimum interval 2 months) after completing initial series
- May receive additional doses of 2025–2026 vaccine under shared clinical decision-making[§]

1 dose Moderna	3	2025–2026 Dose 1 (Moderna Spikevax): 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax): At least 4 weeks after 2025–2026 Dose 1 2025–2026 Dose 3 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after 2025–2026 Dose 2 Additional doses (Moderna Spikevax or Pfizer-BioNTech Comirnaty): May be administered under shared clinical-decision making at least 2 months after last 2025–2026 mRNA dose[§]
2 doses Moderna	2	2025–2026 Dose 1 (Moderna Spikevax): At least 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 mRNA dose[§]
1 dose Pfizer-BioNTech	3	2025–2026 Dose 1 (Pfizer-BioNTech Comirnaty): 3 weeks after last dose 2025–2026 Dose 2 (Pfizer-BioNTech Comirnaty): At least 4 weeks after 2025–2026 Dose 1 2025–2026 Dose 3 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after 2025–2026 Dose 2 Additional doses (Moderna Spikevax or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 mRNA dose[§]
2 doses Pfizer-BioNTech	2	2025–2026 Dose 1 (Pfizer-BioNTech Comirnaty): At least 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after 2025–2026 Dose 2 Additional doses (Moderna Spikevax or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 mRNA dose[§]

Completed the 3-dose initial series before 2025–2026 vaccine:		
• Receive 2 doses of 2025–2026 vaccine spaced 6 months (minimum interval 2 months) apart • May receive additional doses of 2025–2026 vaccine under shared clinical decision-making[§]		
3 or more doses Moderna or Pfizer-BioNTech	2	2025–2026 Dose 1 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): At least 8 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months after last 2025–2026 mRNA dose [§]

*Children who transition from age 4 years to age 5 years during the initial vaccination series should complete the 3-dose series using the dosage for children ages 5–11 years for all doses received on or after turning age 5 years:

- Moderna series: 2025–2026 Moderna Spikevax, 25 mcg/0.25 mL; there is no dosage change
- Pfizer-BioNTech series: 2025–2026 Pfizer-BioNTech Comirnaty, 10 mcg/0.3 mL

†COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines and includes original, bivalent, 2023–2024, and 2024-2025 COVID-19 vaccines.

‡Dosage for Moderna Spikevax: 25 mcg/0.25 mL; dosage for Pfizer-BioNTech Comirnaty: 10 mcg/0.3 mL.

§Additional doses may be administered, informed by the clinical judgment of a healthcare provider and personal preference and circumstances.

¶This COVID-19 vaccine history refers to previous receipt of 3 doses of mRNA vaccine from the same manufacturer (i.e., Moderna or Pfizer-BioNTech) for initial vaccination followed by 1 or more additional doses of any mRNA vaccine.

Table 2c: Ages 12 years and older and ARE moderately or severely immunocompromised –

Recommended number of COVID-19 vaccine doses based on vaccination history

- See footnote* for guidance on children who transition from age 11 years to age 12 years during the initial vaccination series.

COVID-19 vaccination history before 2025–2026 COVID-19 vaccine ^{†‡}	Number of 2025–2026 COVID-19 doses indicated	Recommended 2025–2026 COVID-19 vaccine [§] and interval between doses
Unvaccinated: • Receive an initial series with 2025–2026 vaccine • Receive 1 dose of 2025–2026 vaccine 6 months (minimum interval 2 months) after completing initial series • May receive additional doses of 2025–2026 vaccine under shared clinical decision-making		

Unvaccinated	4	2025–2026 Dose 1 (Moderna Spikevax): Day 0 2025–2026 Dose 2 (Moderna Spikevax): 4 weeks after Dose 1 2025–2026 Dose 3 (Moderna Spikevax): At least 4 weeks after Dose 2 2025–2026 Dose 4 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after Dose 3 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine.
		OR
	3	2025–2026 Dose 1 (Novavax Nuvaxovid): Day 0 2025–2026 Dose 2 (Novavax Nuvaxovid): 3 weeks after Dose 1 2025–2026 Dose 3 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after Dose 2 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and after 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
		OR

	4	2025–2026 Dose 1 (Pfizer-BioNTech Comirnaty): Day 0 2025–2026 Dose 2 (Pfizer-BioNTech Comirnaty): 3 weeks after Dose 1 2025–2026 Dose 3 (Pfizer-BioNTech Comirnaty): At least 4 weeks after Dose 2 2025–2026 Dose 4 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after Dose 3 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
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Initiated but did not complete the initial series before 2025–2026 vaccine:

- Complete the initial series with 2025–2026 vaccine
- Receive 1 dose of 2025–2026 vaccine 6 months (minimum interval 2 months) after completing initial series
- May receive additional doses of 2025–2026 vaccine under shared clinical decision-making

1 dose Moderna	3	2025–2026 Dose 1 (Moderna Spikevax): 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax): At least 4 weeks after 2025–2026 Dose 1 2025–2026 Dose 3 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after 2025–2026 Dose 2 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
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2 doses Moderna	2	2025–2026 Dose 1 (Moderna Spikevax): At least 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE,
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		Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
1 dose Pfizer-BioNTech	3	2025–2026 Dose 1 (Pfizer-BioNTech Comirnaty): 3 weeks after last dose 2025–2026 Dose 2 (Pfizer-BioNTech Comirnaty): At least 4 weeks after 2025–2026 Dose 1 2025–2026 Dose 3 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after 2025–2026 Dose 2 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
2 doses Pfizer-BioNTech	2	2025–2026 Dose 1 (Pfizer-BioNTech Comirnaty): At least 4 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
1 dose Novavax	2	2025–2026 Dose 1 (Novavax Nuvaxovid): At least 3 weeks after last dose 2025–2026 Dose 2 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and

		Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine
Completed the initial series before 2025–2026 vaccine: • Receive 2 doses of 2025–2026 vaccine spaced 6 months apart • May receive additional doses of 2025–2026 vaccine under shared clinical decision-making		
3 or more doses Moderna or Pfizer Bio-NTech [#] OR 2 or more doses Novavax [#]	2	2025–2026 Dose 1 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): At least 8 weeks after last dose, except for Moderna mNEXSPIKE, which requires a minimum interval of 3 months 2025–2026 Dose 2 (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after 2025–2026 Dose 1 Additional doses (Moderna Spikevax, Moderna mNEXSPIKE, Novavax Nuvaxovid, or Pfizer-BioNTech Comirnaty): May be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and at least 3 months for Moderna mNEXSPIKE after last dose of any 2025–2026 vaccine

*Children who transition from age 11 years to age 12 years during the initial vaccination series should complete the 3-dose series using the dosage for people ages 12 years and older for all doses received on or after turning age 12 years:

- Moderna series: 2025–2026 Moderna Spikevax, 0.5 mL/50mcg
- Pfizer-BioNTech series: 2025–2026 Pfizer-BioNTech Comirnaty, 0.3 mL/30 mcg

†COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2025–2026 COVID-19 vaccines and includes original, bivalent, 2023–2024, and 2024–2025 COVID-19 vaccines.

‡People ages 18 years and older who received 1 or more doses of Janssen COVID-19 Vaccine should receive 1 dose of any 2025–2026 COVID-19 followed by a second dose of any 2025–2026 COVID-19 vaccine 6 months (minimum interval 2 months except for Moderna mNEXSPIKE which requires a minimum interval of 3 months) after the first dose. Additional doses of any 2025–2026 COVID-19 vaccine may be administered under shared clinical decision-making at least 2 months for Moderna Spikevax, Novavax Nuvaxovid, and Pfizer-BioNTech Comirnaty and after 3 months for Moderna mNEXSPIKE after the last dose of any 2025–2026 vaccine.

§Dosage for Moderna Spikevax: 50 mcg/0.5 mL; dosage for Moderna mNEXSPIKE: 10 mcg/0.2 mL; dosage for Novavax Nuvaxovid: 5 mcg rS protein and 50 mcg Matrix-M adjuvant/0.5 mL; dosage for Pfizer-BioNTech Comirnaty: 30 mcg/0.3 mL.

¶Additional doses may be administered, informed by the clinical judgment of a healthcare provider and personal preference and circumstances.

#This COVID-19 vaccine history refers to previous receipt of 3 doses of mRNA vaccine from the same manufacturer (i.e., Moderna or Pfizer-BioNTech) for initial vaccination or 2 doses of Novavax for initial vaccination followed by 1 or more additional doses of any COVID-19 vaccine.

Appendix C

Underlying Conditions Placing People at Higher Risk for Severe COVID-19 Illness

Refer to CDC's list of [risk factors](#) for additional details. This list is not exhaustive and there may be other conditions that an individual's health care provider has determined places them at increased risk of severe COVID-19.

Asthma/reactive airway disease	☐	Physical inactivity Any of the below definitions of physical inactivity may be used ¹ : • High sedentary behavior: >7 hours per day of daily TV, PC, screen-based activities, and driving • Moderate sedentary behavior: 4 to 7 hours per day of TV, PC screen-based activities, and driving • Low sedentary behavior <4 hours per day of TV, PC screen-based activities, and driving • Adults: Fewer than 150 minutes of moderate-intensity physical activity (e.g., brisk walking) per week or fewer than 75 minutes of vigorous-intensity physical activity (e.g., jogging or running) per week. • Children: Fewer than 60 minutes or more of moderate-to-vigorous intensity physical activity daily.	☐
Cancer: • Hematologic Malignancies	☐	Pregnancy and recent pregnancy	☐
Cerebrovascular disease, including stroke	☐	Primary immunodeficiencies	☐
Chronic kidney disease* • Risk may be further increased for people receiving dialysis	☐	Smoking, current and former	☐
Chronic lung diseases: • Asthma • Bronchiectasis • COPD (Chronic obstructive pulmonary disease) • Interstitial lung disease • Pulmonary embolism • Pulmonary hypertension	☐	Solid organ or blood stem cell transplantation	☐

Chronic liver diseases: • Cirrhosis • Non-alcoholic fatty liver disease • Alcoholic liver disease • Autoimmune hepatitis	☐	Tuberculosis	☐
Cystic fibrosis	☐	Use of corticosteroids or other immunosuppressive medications	☐
Diabetes mellitus, type 1	☐	Children with certain underlying conditions not already listed, including but not limited to ^{§, #} • Chronic lung disease of prematurity • Compromised respiratory function (e.g., abnormality of airway, tracheostomy, or ventilator dependent) • Congenital heart disease • Feeding tube dependent • Inflammatory bowel disease • Cerebral palsy • Intellectual development disorder • Compromised mobility (e.g, wheelchair dependent) • Rheumatologic, autoimmune disease (e.g., systemic lupus erythematosus, juvenile idiopathic arthritis)	☐
Diabetes mellitus, type 2*	☐	Hemophilia	☐
Disabilities‡, including Down syndrome (For the list of all conditions that were part of the review, see CDC underlying conditions webpage .)	☐	Sickle cell disease	☐
Heart conditions (such as heart failure, coronary artery disease, or cardiomyopathies)	☐	Substance use disorders	☐
HIV (human immunodeficiency virus)	☐		

Mental health conditions: • Mood disorders, including depression • Schizophrenia spectrum disorders	☐		
Neurologic conditions: • Dementia‡ • Parkinson’s disease • Epilepsy	☐		
Obesity (BMI ≥30 kg/m ² or ≥95 th percentile in children) or Overweight (BMI >25 kg/m ² but <30 kg/m ²)	☐		

* Indicates presence of evidence for pregnant and non-pregnant women

‡ Underlying conditions for which there is evidence in pediatric patients

§ [CDC Information for Pediatric Healthcare Providers](#); [AAP Committee on Infectious Diseases, Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement](#)

¶ <https://www.cdc.gov/covid/media/pdfs/2025/02/Brief-Summary-of-Findings-on-the-Association-Between-Physical-Inactivity-and-Severe-COVID-19-Outcomes.pdf> ; [CDC Guidelines and Recommended Strategies | Physical Activity](#)