

Recommended Adult Immunization Schedule – United States, 2013

Note: These recommendations **must** be read with the footnotes that follow; these notes contain the number of doses, intervals between doses, and other important information.

Figure 1. Recommended adult immunization schedule, by vaccine and age group¹

Vaccine ▼	Age Group ►	19–21 years	22–26 years	27–49 years	50–59 years	60–64 years	≥65 years
Influenza ^{2,*}		1 dose annually					
Tetanus, diphtheria, pertussis (Td/Tdap) ^{3,*}		Substitute 1-time dose of Tdap for Td booster; then boost with Td every 10 yrs					
Varicella ^{4,*}		2 doses					
Human papillomavirus (HPV) ^{5,*}	Females	3 doses					
	Males	3 doses					
Zoster ⁶		1 dose					
Measles, mumps, rubella (MMR) ^{7,*}		1 or 2 doses					
Pneumococcal polysaccharide (PPSV23) ^{8,9}		1 or 2 doses					
Pneumococcal 13-valent conjugate (PCV13) ^{10,*}		1 dose					
Meningococcal ^{11,*}		1 or more doses					
Hepatitis A ^{12,*}		2 doses					
Hepatitis B ^{13,*}		3 doses					

*Covered by the Vaccine Injury Compensation Program.

Figure 2. Recommended vaccinations that might be indicated for adults based on medical and other indications¹

Vaccine ▼	Indication ►	Pregnancy	Immunocompromising conditions (excluding human immunodeficiency virus [HIV]) ^{4,6,7,10,15}	HIV infection ^{4,6,7,10,14,15}		Men who have sex with men (MSM)	Heart disease, chronic lung disease, chronic alcoholism	Asplenia (including elective splenectomy and persistent complement component deficiencies) ^{10,14}	Chronic liver disease	Kidney failure, end-stage renal disease, receipt of hemodialysis	Diabetes	Healthcare personnel
				CD4+ T lymphocyte count <200 cells/μL	≥200 cells/μL							
Influenza ^{2,*}												
Tetanus, diphtheria, pertussis (Td/Tdap) ^{3,*}		1 dose Tdap in each pregnancy										
Varicella ^{4,*}			Contraindicated									
Human papillomavirus (HPV) ^{5,*}	Females											
	Males											
Zoster ⁶			Contraindicated									
Measles, mumps, rubella (MMR) ^{7,*}			Contraindicated									
Pneumococcal polysaccharide (PPSV23) ^{8,9}												
Pneumococcal 13-valent conjugate (PCV13) ^{10,*}												
Meningococcal ^{11,*}												
Hepatitis A ^{12,*}												
Hepatitis B ^{13,*}												

*Covered by the Vaccine Injury Compensation Program.

 For all persons in this category who meet the age requirements and who lack documentation of vaccination or have no evidence of previous infection; zoster vaccine recommended regardless of prior episode of zoster

 Recommended if some other risk factor is present (e.g., on the basis of medical, occupational, lifestyle, or other indication)

 No recommendation

These schedules indicate the recommended age groups and medical indications for which administration of currently licensed vaccines is commonly indicated for adults ages 19 years and older, as of January 1, 2013. For all vaccines being recommended on the Adult Immunization Schedule: a vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Licensed combination vaccines may be used whenever any components of the combination are indicated and when the vaccine's other components are not contraindicated. For detailed recommendations on all vaccines, including those used primarily for travelers or that are issued during the year, consult the manufacturers' package inserts and the complete statements from the Advisory Committee on Immunization Practices (www.cdc.gov/vaccines/pubs/acip-list.htm). Use of trade names and commercial sources is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.

The recommendations in this schedule were approved by the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP), American Academy of Family Physicians (AAFP), American College of Physicians (ACP), American College of Obstetricians and Gynecologists (ACOG), and American College of Nurse-Midwives (ACNM).