



Adult Immunization Schedule by Age (Addendum updated July 2, 2025)

Recommendations for Ages 19 Years or Older, United States, 2025

JULY 2, 2025

PURPOSE

Guide health care providers in determining recommended vaccines for each age group.

How to use the schedule

Vaccines in the Adult Immunization Schedule

To make vaccination recommendations, healthcare providers should:

1. Determine recommended vaccine by age ([Table 1 - By Age](#))
2. Assess need for additional recommended vaccinations by medical condition or other indication ([Table 2 - By Medical Condition](#))
3. Review vaccine types, dosing frequencies and intervals, and considerations for special situations ([Notes](#))
4. Review contraindications and precautions for vaccine types ([Appendix](#))
5. Review new or updated ACIP guidance ([Addendum](#))

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Download the Schedule

- [Print the schedule, color](#) [PDF]
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[Compliant version of the schedule](#)

Ages 19 Years or Older

Legend

 Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of immunity
 Recommended vaccination for adults with an additional risk factor or another indication
 Recommended vaccination based on shared clinical decision-making
 No Guidance/Not Applicable

Vaccine	19-26 years	27-49 years	50-64 years	≥65 years
COVID-19 ⓘ		1 or more doses of 2024–2025 vaccine (See Notes)		2 or more doses of 2024–2025 vaccine (See Notes)
Influenza inactivated (IIV3, cIIV3) Influenza recombinant (RIV3) ⓘ		1 dose annually		1 dose annually (HD-IIV3, RIV3, or aIIV3 preferred)
Influenza inactivated (aIIV3; HD-IIV3) Influenza recombinant (RIV3) ⓘ		Solid organ transplant (See Notes)		
Influenza live, attenuated (LAIV3) ⓘ		1 dose annually		

Vaccine	19-26 years	27-49 years	50-64 years	≥65 years		
<u>Respiratory Syncytial Virus (RSV)</u> ⓘ		Seasonal administration during pregnancy. (See Notes)		60 through 74 years (See Notes) ≥75 years		
<u>Tetanus, diphtheria, pertussis (Tdap or Td)</u> ⓘ	1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (See Notes)					
<u>Measles, mumps, rubella (MMR)</u> ⓘ	1 or 2 doses depending on indication (if born in 1957 or later)					
<u>Varicella (VAR)</u> ⓘ	2 doses (if born in 1980 or later)	2 doses				
<u>Zoster recombinant (RZV)</u> ⓘ	2 doses for immunocompromising conditions (See Notes)		2 doses			
<u>Human papillomavirus (HPV)</u> ⓘ	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years				
<u>Pneumococcal (PCV15, PCV20, PCV21, PPSV23)</u> ⓘ			See Notes	See Notes		
<u>Hepatitis A (HepA)</u> ⓘ	2, 3, or 4 doses depending on vaccine					
<u>Hepatitis B (HepB)</u> ⓘ	2, 3, or 4 doses depending on vaccine or condition					
<u>Meningococcal A, C, W, Y (MenACWY)</u> ⓘ	1 or 2 doses depending on indication (See Notes for booster recommendations)					
<u>Meningococcal B (MenB)</u> ⓘ	2 or 3 doses depending on vaccine and indication (See Notes for booster recommendations)					
<u>Haemophilus influenzae type b (Hib)</u> ⓘ	19 through 23 years	1 or 3 doses depending on indication				
<u>Mpox</u> ⓘ		2 doses				
<u>Inactivated poliovirus (IPV)</u> ⓘ	Complete 3-dose series if incompletely vaccinated. Self-report of previous doses acceptable (See Notes)					

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Additional Information

Report

- Suspected cases of reportable vaccine-preventable diseases or outbreaks to your state or local health department
- Clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov or (800-822-7967)

Questions or comments

Contact www.cdc.gov/cdc-info or 800-CDC-INFO (800-232-4636), in English or Spanish, 8 a.m.–8 p.m. ET, Monday through Friday, excluding holidays.

Helpful information

- [Complete Advisory Committee on Immunization Practices \(ACIP\) recommendations](#)
- [ACIP Shared Clinical Decision-Making Recommendations](#)
- [General Best Practice Guidelines for Immunization \(including contraindications and precautions\)](#)
- [Vaccine information statements](#)

- [Manual for the Surveillance of Vaccine-Preventable Diseases](#)
(including case identification and outbreak response)

SOURCES

CONTENT SOURCE:

[National Center for Immunization and Respiratory Diseases](#)