

Guide to Contraindications and Precautions to Commonly Used Vaccines in Adults^{1,*}

Vaccine	Contraindications ¹	Precautions ¹
Influenza, inactivated (IIV)² Influenza, recombinant (RIV)²	<ul style="list-style-type: none"> • For IIV: Severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine (except egg) or to a previous dose of influenza vaccine² • For RIV: Severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine or to a previous dose of influenza vaccine² 	<ul style="list-style-type: none"> • Moderate or severe acute illness with or without fever • History of Guillain-Barré Syndrome (GBS) within 6 weeks of previous influenza vaccination • Egg allergy other than hives (e.g., angioedema, respiratory distress, lightheadedness, or recurrent emesis); or required epinephrine or another emergency medical intervention (IIV may be administered in a medical setting, under the supervision of a healthcare provider who is able to recognize and manage severe allergic conditions)²
Influenza, live attenuated (LAIV)^{2,3,4}	<ul style="list-style-type: none"> • Severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine (except egg), or to a previous dose of influenza vaccine² • Pregnancy • Immunocompromised due to any cause (including immunosuppression caused by medications or by HIV infection) • Close contacts and caregivers of severely immunosuppressed persons who require a protective environment • Receipt of influenza antivirals within the previous 48 hours 	<ul style="list-style-type: none"> • Moderate or severe acute illness with or without fever • GBS within 6 weeks of previous influenza vaccination • Asthma • Other chronic medical conditions (e.g., other chronic lung diseases, chronic cardiovascular disease [excluding isolated hypertension], diabetes, chronic renal or hepatic disease, hematologic disease, neurologic disease, and metabolic disorders)
Tetanus, diphtheria, pertussis (Tdap) Tetanus, diphtheria (Td)	<ul style="list-style-type: none"> • Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component • For pertussis-containing vaccines: encephalopathy (e.g., coma, decreased level of consciousness, or prolonged seizures) not attributable to another identifiable cause within 7 days of administration of a previous dose of a vaccine containing tetanus or diphtheria toxoid or acellular pertussis. 	<ul style="list-style-type: none"> • Moderate or severe acute illness with or without fever • GBS within 6 weeks after a previous dose of tetanus toxoid-containing vaccine • History of Arthus-type hypersensitivity reactions after a previous dose of tetanus or diphtheria toxoid-containing vaccine; defer vaccination until at least 10 years have elapsed since the last tetanus toxoid-containing vaccine • For Tdap only: progressive or unstable neurologic disorder, uncontrolled seizures, or progressive encephalopathy; defer until a treatment regimen has been established and the condition has stabilized
Measles, mumps, rubella (MMR)³	<ul style="list-style-type: none"> • Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component • Severe immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, congenital immunodeficiency, or long-term immunosuppressive therapy⁵), or persons with human immunodeficiency virus [HIV] infection who are severely immunocompromised • Family history of congenital or hereditary immunodeficiency in first-degree relatives (e.g., parents and siblings), unless the immune competence of the potential vaccine recipient has been substantiated clinically or verified by a laboratory test • Pregnancy 	<ul style="list-style-type: none"> • Moderate or severe acute illness with or without fever • Recent (within 11 months) receipt of antibody-containing blood product (specific interval depends on product)⁶ • History of thrombocytopenia or thrombocytopenic purpura • Need for tuberculin skin testing⁷ or interferon-gamma release assay (IGRA) testing • For MMRV only: Family history of seizures
Varicella (Var)³	<ul style="list-style-type: none"> • Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component • Severe immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, congenital immunodeficiency, or long-term immunosuppressive therapy⁵), or persons with human immunodeficiency virus [HIV] infection who are severely immunocompromised • Family history of congenital or hereditary immunodeficiency in first-degree relatives (e.g., parents and siblings), unless the immune competence of the potential vaccine recipient has been substantiated clinically or verified by a laboratory test • Pregnancy 	<ul style="list-style-type: none"> • Moderate or severe acute illness with or without fever • Recent (within 11 months) receipt of antibody-containing blood product (specific interval depends on product)⁶ • Receipt of specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; avoid use of these antiviral drugs for 14 days after vaccination • Use of aspirin or aspirin-containing products • For MMRV only: Family history of seizures

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Human papillomavirus (HPV)⁸	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Hypersensitivity to yeast 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever
Recombinant zoster vaccine (RZV) Zoster vaccine live (ZVL)³	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) to a vaccine component For ZVL only: Severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, or long-term immunosuppressive therapy⁵), or persons with HIV infection who are severely immunocompromised For ZVL only: Pregnancy 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever For ZVL only: Receipt of specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; avoid use of these antiviral drugs for 14 days after vaccination For RZV only: Pregnancy and lactation
Pneumococcal: polysaccharide (PPSV23), conjugate (PCV13)	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component (including, for PCV13, to any vaccine containing diphtheria toxoid) For PCV13 only: Hypersensitivity to yeast 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever
Hepatitis A (HepA)	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever
Hepatitis B (HepB)	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Hypersensitivity to yeast 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever
Meningococcal (MenACWY; MenB)	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever For MenB only: Pregnancy
Haemophilus influenzae type b (Hib)	<ul style="list-style-type: none"> Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component 	<ul style="list-style-type: none"> Moderate or severe acute illness with or without fever

FOOTNOTES

- The Advisory Committee on Immunization Practices (ACIP) recommendations and package inserts for vaccines provide information on contraindications and precautions related to vaccines. Contraindications are conditions that increase chances of a serious adverse reaction in vaccine recipients and the vaccine should not be administered when a contraindication is present. Precautions should be reviewed for potential risks and benefits for vaccine recipient. For a person with a severe allergy to latex (e.g., anaphylaxis), vaccines supplied in vials or syringes that contain natural rubber latex should not be administered unless the benefit of vaccination clearly outweighs the risk for a potential allergic reaction. For latex allergies other than anaphylaxis, vaccines supplied in vials or syringes that contain dry, natural rubber or natural rubber latex may be administered.
- For additional information on use of influenza vaccines among persons with egg allergy, see CDC. "Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP) – United States, . . ." Access links to influenza vaccine recommendations at www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.html.
- Two or more live virus vaccines (i.e., LAIV, MMR, Var, ZVL) may be administered on the same day. If not administered on the same day, separate by at least 28 days.
- LAIV is not recommended for people with functional or anatomic asplenia, complement component deficiency, cochlear implant, or CSF leak.

- Immunosuppressive steroid dose is considered to be 20 mg or more prednisone or equivalent for two or more weeks. Vaccination should be deferred for at least 1 month after discontinuation of immunosuppressive steroid therapy. Providers should consult ACIP recommendations for complete information on the use of specific live vaccines among persons on immune-suppressing medications or with immune suppression because of other reasons.
- Vaccine should be deferred for the appropriate interval if replacement immune globulin products are being administered (see Table 3-5 "General Best Practice Guidelines for Immunization: Timing and Spacing of Immunobiologics, available at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html).
- Measles vaccination may suppress tuberculin reactivity temporarily. Measles-containing vaccine (MCV) may be administered on the same day as tuberculin skin testing (TST) or interferon gamma release assay (IGRA), or should be postponed for at least 4 weeks after the vaccination. No data exist regarding the potential degree of TST suppression that might be associated with other live, attenuated virus vaccines (e.g., Var or yellow fever). However, in the absence of data, following guidelines for MCV when scheduling TST screening and administering other live, attenuated virus vaccines is prudent.
- HPV vaccine is not recommended for use in pregnant women. If a woman is found to be pregnant after initiating the vaccination series, the remainder of the series should be delayed until completion of pregnancy. Pregnancy testing is not needed before vaccination.

* Adapted from "Table 4-1. Contraindications and Precautions to Commonly Used Vaccines" found in: CDC. "General Best Practice Guidelines for Immunization: Contraindications and Precautions" available at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html.