To: All North Carolina Clinicians

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Subject: 2025-2026 Respiratory Virus Season: Immunization Guidance for NC Clinicians (2

pages)

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This memo provides information and guidance to NC clinicians regarding immunizations to protect against respiratory viral diseases. As guidance may change during the respiratory season, up to date information will be available at <u>flu.nc.gov.</u> Preventive measures to reduce the spread of influenza, RSV, COVID-19 and other respiratory viruses are critical, because increased activity of all three viruses at the same time could have a significant impact on the healthcare system.

- In September, the CDC's Advisory Committee on Immunization Practices (ACIP) voted to recommend the COVID-19 vaccine to everyone 6 months of age and older if an individual or parent/guardian chooses to get one for themself or their child after discussion with a doctor, nurse, pharmacist, or other health care provider. On October 6, 2025, the CDC adopted that recommendation.
- This allows for immunization coverage through all payment mechanisms including entitlement programs such as the Medicare, Medicaid, and the Vaccines for Children Program.
- Professional medical societies have <u>recommended COVID-19 vaccination</u> for all children 6-23 months of age, children 2-18 years of age with risk factors for severe illness or whose parents would like to have their child receive the vaccine, and all adults, especially those with risk factors or who have never received a COVID-19 vaccine. Detailed recommendations for specific groups are available from the <u>American Academy of Family Physicians</u>, <u>American Academy of Pediatrics</u> and <u>American College of Obstetricians and Gynecologists</u>.
- There are limited changes to influenza and RSV vaccine recommendations; of note, RSV vaccine recommendations for adults at risk for severe disease have been expanded to include 50-59 year olds with risk factors for severe illness.
- Seasonal vaccination is especially important for people who are at high risk of developing severe
 illness or complications (including pregnant women) and people who live with or care for others
 who are at high risk of developing complications. CDC lists conditions conferring highest risk for
 severe COVID-19 and severe RSV infections in adults, and AAP lists conditions conferring highest risk
 for severe RSV in children.
- Encourage patients to check with their Local Health Departments, Federally Qualified Health Centers, Rural Health Clinics, other providers, and pharmacies to locate vaccines.
- Influenza, COVID-19, and RSV vaccines may be co-administered. Co-administration of these vaccines
 might be especially important when the patient has risk factors for severe respiratory illness and
 there might not be an opportunity to vaccinate the patient with all their recommended vaccines in
 the near future.
- A <u>pneumococcal vaccine</u> should be administered to all patients for whom it is indicated, including children younger than 5 years old, adults 50 years or older, and those with certain <u>risk factors</u>.
- Confirm that all children in child care and school age children are up to date on all recommended
 and required vaccines. The ACIP routine immunization schedules can be found <a href="https://www.here.com/he

	<u>INFLUENZA</u>		COVID-19		RSV	
Infants and Children Birth – 17 years	All infants and children 6+ months (<u>AAP</u> , <u>CDC</u>)	Previously unvaccinated children 6 months-8 years should receive 2 doses, given ≥ 4 weeks apart	All children 6-23 months (AAP, CDC) Children 2-17 years who are immunocompromised and/or at high risk of severe disease (AAP) Children 2-17 years of parents/ guardians who desire vaccination (AAP, CDC)	Updated, single dose 2025-2026 vaccine using shared clinical decision making Pediatric vaccine options: - 6+ months old: Moderna (mRNA) - 5+ years old: Pfizer (mRNA) - 12+ years old: Novavax (protein)	All infants birth-8 months entering their first RSV season (OR maternal vaccination at 32-36 weeks gestation; see Pregnancy indications below) (AAP, CDC) Children 8-19 months at high risk of severe RSV entering their second RSV season (AAP, CDC)	One dose of nirsevimab (Beyfortus) OR clesrovimab (Enflonsia) Most infants only need protection from either maternal RSV vaccine or infant immunization but not both. (Exception for babies born < 2 weeks after maternal vaccination)
Pregnant & Lactating People	Everyone at any point in pregnancy (<u>AAP</u> , <u>CDC</u>)	Live attenuated vaccine (FluMist) contraindicated during pregnancy but can be used postpartum	Everyone at any point in pregnancy (ACOG)	Updated, single dose 2025-2026 COVID-19 vaccine using shared clinical decision making (CDC) Timing: As early as possible during pregnancy	Previously unvaccinated pregnant people at 32-36 weeks gestation (ACOG, CDC) (OR vaccination of infants and children; see indications above)	One dose of bivalent, maternal RSV vaccine (Abrysvo) at 32-36 weeks gestation to prevent severe RSV in infants If RSV vaccine was given in previous pregnancy, infant should receive immunization after birth
Adults 18+ years	Adults 18- 64 years (CDC)	One dose of annual influenza vaccine	Adults 18-64 years (CDC)	1 or more doses of updated 2025-2026 COVID-19 vaccine using shared clinical decision making	Adults 50-74 years at increased risk of severe RSV (CDC)	One-time, single dose of RSV vaccine Timing: Any time, but late summer/early fall preferred
	Adults 65+ years (CDC)	High-dose (Fluzone), recombinant (Flublok) OR adjuvanted (Fluad) vaccine preferred	Adults 65+ years (CDC)	2 or more doses of updated 2025-2026 COVID-19 vaccine using shared clinical decision making	All Adults 75+ years (CDC)	
Additional Information	Regarding insurance coverage for RSV immunizations: Doses administered through the NC Immunization Program (NCIP) are for Vaccines For Children eligible children only. Fully insured children must receive privately purchased immunizations. For uninsured pregnant individuals \geq 19 years, please reach out to Pfizer Patient Assistance Program. Doses of Abrysvo obtained through NCIP are available for VFC-eligible pregnant adolescents only. Fully insured, pregnant adolescents must receive privately purchased Abrysvo.					