Guide to Contraindications and Precautions to Commonly Used Vaccines in Adults[1,*]

Vaccine	Contraindications[1]	Precautions[1]
Influenza, inactivated (IIV)[2,3] **Influenza, recombinant (RIV)[2,3]**	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	• Moderate or severe acute illness with or without fever • History of Guillain-Barré Syndrome (GBS) within 6 weeks of previous influenza vaccination • For IIV vaccine only: 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 an inpatient or outpatient medical setting, under the supervision of a health-care provider who is able to recognize and manage severe allergic conditions)
Tetanus, diphtheria, pertussis (Tdap) **Tetanus, diphtheria (Td)**	• 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.	• 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 (including MenACWY); defer vaccination until at least 10 years have elapsed since the last tetanus toxoid-containing vaccine • For pertussis-containing vaccines: progressive or unstable neurologic disorder, uncontrolled seizures, or progressive encephalopathy until a treatment regimen has been established and the condition has stabilized
Varicella (Var)[3]	• 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 therapy[4]), or persons with human immunodeficiency virus [HIV] infection who are severely immunocompromised • Pregnancy	• 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
Human papillomavirus (HPV)	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	• Moderate or severe acute illness with or without fever • Pregnancy
Herpes zoster (HZV)[4]	• Severe allergic reaction (e.g., anaphylaxis) to a vaccine component • Severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, or long-term immunosuppressive therapy[5]), or persons with HIV infection who are severely immunocompromised • Pregnancy	• Moderate or severe acute illness with or without fever • 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
Measles, mumps, rubella (MMR)[4]	• 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 therapy[5]), or persons with HIV infection who are severely immunocompromised • Pregnancy	• 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 testing[7]
Pneumococcal: conjugate (PCV13), polysaccharide (PPSV23)	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component (including, for PCV13, to any vaccine containing diphtheria toxoid-containing vaccine	• Moderate or severe acute illness with or without fever
Hepatitis A (HepA)	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	• Moderate or severe acute illness with or without fever
Hepatitis B (HepB)	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component • Hypersensitivity to yeast	• Moderate or severe acute illness with or without fever
Meningococcal: conjugate (MenACWY), serogroup B (MenB)	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	• Moderate or severe acute illness with or without fever
***Haemophilus influenzae* type b (Hib)**	• Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	• Moderate or severe acute illness with or without fever

FOOTNOTES

1. 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 reipient. 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 vaccinaton 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.
2. Live attenuated influenza vaccine (LAIV) should not be used during the 2016–2017 influenza season.
3. 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, 2016–17 Influenza Season. *MMWR* 2016; 64(RR-5):1–54 available at www.cdc.gov/mmwr/volumes/65/rr/rr6505a1.htm.
4. MMR may be administered with VAR or HZV on the same day. If not administered on the same day, separate live vaccines by at least 28 days.
5. 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.
6. Vaccine should be deferred for the appropriate interval if replacement immune globulin products are being administered (see Table 5 in CDC. "General Recommendations on Immunization: Recommendations of the Advisory Committee on Immunization Practices [ACIP]." *MMWR* 2011; 60 (No. RR-2), available at www.cdc.gov/vaccines/hcp/acip-recs/index.html.
7. Measles vaccination may temporarily suppress tuberculin reactivity temporarily. Measles-containing vaccine may be administered on the same day as tuberculin skin testing, or should be postponed for at least 4 weeks after the vaccination.

* Adapted from CDC. "Table 6. Contraindications and Precautions to Commonly Used Vaccines" found in: CDC. "General Recommendations on Immunization: Recommendations of the Advisory Committee on Immunization Practices (ACIP)." *MMWR* 2011; 60 (No. RR-2), p. 40–41, and from Hamborsky J, Kroger A, Wolfe C, eds. Appendix A. *Epidemiology and Prevention of Vaccine-Preventable Diseases*, 13th ed. Washington, DC Public Health Foundation, 2015, available at www.cdc.gov/vaccines/pubs/pinkbook/index.html.

Technical content reviewed by the Centers for Disease Control and Prevention

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www.immunize.org/catg.d/p3072.pdf ▪ Item #P3072 (3/17)