




# HIV 101: Adult Immunization Schedule

The following are recommended as a standard of care.

**FIGURE 1: Recommended Adult Immunization Schedule by age group – United States, 2003-2004\***
























VACCINE	AGE GROUP (yrs.)		
	19-49	50-64	≥65
Tetanus diphtheria (Td)	1 dose booster every 10 years.		
Influenza	1 dose annually	1 dose annually	
Pneumococcal (polysaccharide)	1 dose		1 dose
Hepatitis B	3 doses (0,1-2,4-6 months)		
Hepatitis A	2 doses (0,6-12 months)		
Measles, Mumps, Rubella (MMR)	1 dose if MMR vaccination history is unreliable; 2 dose for persons with occupational or other indications.		
Varicella	2 doses (0,4-8 weeks) for persons who are susceptible		
Meningococcal	1 dose		

 For persons with medical/exposure indications    
  Catch-up on childhood vaccinations    
  For all persons in this age group

**FIGURE 2: References**

- A. For women without chronic diseases/conditions, vaccinate if pregnancy will be at second or third trimester during influenza season. For women with chronic diseases/conditions, vaccinate at any time during the pregnancy.
- B. Although chronic liver disease and alcoholism are not indicator conditions for influenza vaccination, administer 1 dose annually if the patient is aged >50 years, has other indications for influenza vaccine, or requests vaccination.
- C. Asthma is another indicator condition for influenza but not for pneumococcal vaccination.
- D. For all persons with chronic liver disease.
- E. For persons aged <65 years, revaccinate once after 5 years have elapsed since initial vaccination.
- F. Persons with impaired humoral but not cellular immunity may be vaccinated.
- G. For hemodialysis patients use special formulation of vaccine (40 mg/mL) or two 1.0 mL 20 microgram doses administered at one site. Vaccinate early in the course of renal disease. Assess antibody titers to hepatitis B surface antigen (anti-HBs) levels annually. Administer additional doses if anti-HBs levels decline to ≤10 mIU/mL.
- H. No data have been reported specifically on risk for severe or complicated influenza infections among persons with asplenia. However, influenza is a risk factor for secondary bacterial infections that might cause severe disease in asplenic.
- I. Administer meningococcal vaccine and consider Haemophilus influenzae type b vaccine.
- J. In the event of elective splenectomy, vaccinate >2 weeks before surgery.
- K. Vaccinate as close to diagnosis as possible when CD4 cell counts are highest.
- L. Withhold MMR or other measles-containing vaccines from HIV-infected persons with evidence of severe immunosuppression.

**FIGURE 2: Recommended Adult Immunization Schedule by medical condition – United States, 2003-2004\***

MEDICAL CONDITION	VACCINE						
	Tetanus-diphtheria (Td)	Influenza	Pneumococcal (polysaccharide)	Hepatitis B	Hepatitis A	Measles, mumps, rubella (MMR)	Varicella
Pregnancy		A					
Diabetes, heart disease, chronic pulmonary disease, and chronic liver disease, including chronic alcoholism		B	C				
Congenital immunodeficiency, leukemia, lymphoma, generalized malignancy, therapy with alkylating agents, antimetabolites, radiation, or large amounts of corticosteroids			E				
Renal failure/end-stage renal disease and patients receiving hemodialysis or clotting factor concentrates			E	G			
Asplenia, including elective splenectomy and terminal complement-component deficiencies		H	E,I,J				
Human immunodeficiency virus (HIV) infection			E,K				

 For all persons in this group.    
  For persons with medical/exposure indications    
  Catch-up on childhood vaccinations    
  Contraindicated

\*Notice to Readers: "Recommended Adult Immunization Schedule -- United States, 2003-2004". MMWR. 10 October, 2003 / 52(40); 965-969. Available at [www.cdc.gov/mmwr/preview/mmwrhtml/mm5240a6.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5240a6.htm). Please visit website for additional references for Figures 1 and 2.