## Guide to Contraindications and Precautions to Commonly Used Vaccines in Adults1,*,†

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| **Influenza, inactivated (IIV)**     | • For IIV, severe allergic reaction (e.g., anaphylaxis) after a previous dose of any influenza vaccine; or to a vaccine component, including egg protein  
• For RIV, severe allergic reaction (e.g., anaphylaxis) after a previous dose of RIV or to a vaccine component. RIV does not contain egg protein2 | • Moderate or severe acute illness with or without fever  
• History of Guillain-Barré Syndrome (GBS) within 6 weeks of previous influenza vaccination  
• Adults who experience only hives with exposure to eggs may receive RIV or, with additional safety precautions, IIV2 |
| **Influenza, live attenuated (LAIV)2,3** | • Severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine, or to a previous dose of any influenza vaccine  
• In addition, ACIP recommends that LAIV not be used in the following populations: pregnant women; immunosuppressed adults; adults with egg allergy of any severity; adults who have taken influenza antiviral medications (amantadine, rimantadine, zanamivir, or oseltamivir) within the previous 48 hours; avoid use of these antiviral drugs for 14 days after vaccination | • Moderate or severe acute illness with or without fever  
• History of GBS within 6 weeks of previous influenza vaccination  
• Asthma in persons age 5 years and older  
• Other chronic medical conditions (e.g., other chronic lung diseases, chronic severe cardiovascular disease [excluding isolated hypertension], diabetes, chronic renal or hepatic disease, hematologic disease, neurologic disease, and metabolic disorders) |
| **Tetanus, diphtheria, pertussis (Tdap)** | • 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 previous dose of Tdap or diphtheria and tetanus toxoids and pertussis (DTP) vaccine or diphtheria and tetanus toxoids and acellular pertussis (DTaP) vaccine | • 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 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)2** | • Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component  
• Known severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, congenital immunodeficiency, or long-term immunosuppressive therapy) or patients 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)2  
• 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 |
| **Zoster (HZV)3** | • Severe allergic reaction (e.g., anaphylaxis) to a vaccine component  
• Known severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, or long-term immunosuppressive therapy) or patients 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)3  
• 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)3** | • Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component  
• Known severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, congenital immunodeficiency, or long-term immunosuppressive therapy) or patients 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)3  
• History of thrombocytopenia or thrombocytopenic purpura  
• Need for tuberculin skin testing |
| **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 diphtheria toxoid-containing vaccine) | • Moderate or severe acute illness with or without fever |
| **Meningococcal: conjugate (MenACWY), polysaccharide (MPSV4)** | • 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 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 | • 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. Vaccine package inserts and the full ACIP recommendations for these vaccines should be consulted for additional information on vaccine-related contraindications and precautions and for more information on vaccine recipients. Events or conditions listed as precautions should be reviewed carefully. Benefits of and risks for administering a specific vaccine to a person under these circumstances should be considered. If the risk from the vaccine is believed to outweigh the benefit, the vaccine should not be administered. If the benefit of vaccination is believed to outweigh the risk, the vaccine should be administered. A contraindication increases the chance of a serious adverse reaction. Therefore, a vaccine should not be administered when a contraindication is present.  
2. For more information on use of influenza vaccines among persons with egg allergies and a complete list of severe allergic reactions after a previous dose of influenza vaccine, see ACIP—United States, 2014–15 Influenza Season. MMWR 2014;63(32):691–97.  
3. LAIV, MMR, varicella, or zoster vaccines can be administered on the same day. If not administered on the same day, these live vaccines should be separated by at least 28 days.  
4. Immunosuppressive steroid dose is considered to be 2 or more weeks of daily receipt of 20 mg prednisone or the equivalent. Vaccination should be deferred for at least 1 month after discontinuation of such therapy. Providers should consult ACIP recommendations for complete information on the use of specific live vaccines among persons on immune-suppressing medications with immune suppression because of other reasons.  
5. 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(RR-3), available at www.cdc.gov/vaccines/pubs/ acip-list.htm).  
6. Measles vaccination may suppress tuberculin reactivity temporarily. Measles-containing vaccine may be administered on the same day as tuberculin skin testing. If testing cannot be performed until after the day of MMR vaccination, the test should be postponed for at least 4 weeks after the vaccination. If an urgent need exists to skin test, do so with the understanding that reactivity might be reduced by the vaccine.

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**Immunization Action Coalition**

Saint Paul, Minnesota • 651-647-9009 • www.immunize.org • www.vaccineinformation.org