CDC recommends everyone 6 months and older get an influenza vaccine every year. Influenza vaccine has been shown to prevent millions of influenza illnesses, tens of thousands of hospitalizations, and thousands of deaths each year. CDC and ACIP preferentially recommends the use of specific flu vaccines in adults 65 and older over standard-dose flu vaccines, when available.

### Your Vaccine Recommendation is Critical

As a health care professional (HCP), your strong recommendation is a critical factor in whether your patients get an influenza vaccine. Most adults believe vaccines are important, but they may need a reminder from you to get vaccinated. After making your recommendation, follow up with each patient during subsequent appointments to ensure the patient received an influenza vaccine. If the patient is still unvaccinated, repeat the recommendation and try to identify and address any questions or concerns.

### Higher Risk Groups Especially Need a Flu Vaccine

The following groups are at higher risk of serious flu complications:

- Children aged 6 months up to their 5th birthday – even those who are healthy – because of their age
- Children of any age with certain long-term health problems, such as asthma, diabetes, or neurological and neurodevelopmental conditions
- People 65 years and older because of their age
- People with asthma, heart disease, diabetes, and certain other chronic health conditions
- People who are pregnant

### When to Vaccinate

- For most people, ideally influenza vaccination should happen in September or October. However, vaccination should continue throughout influenza season as long as influenza viruses are circulating.
- There also are specific timing considerations for certain groups of people:
  - For adults (especially those 65 years and older) and pregnant people in the first and second trimester, vaccination in July and August should be avoided unless there is a concern that later vaccination might not be possible in September or October.
  - Children who need two doses of influenza vaccine should get their first dose of vaccine as soon as it becomes available, with the second dose given at least four weeks after the first.
  - Vaccination in July or August can be considered for children who have health care visits during those months if there might not be another opportunity to vaccinate them.
  - Pregnant people who are in their third trimester can get an influenza vaccine in July or August, if vaccine is available, to protect their babies from flu for the first few months after birth, when babies are too young to get vaccinated.
- If you do not offer vaccine at your facility, make an influenza vaccine referral, and then follow up with each patient during subsequent appointments to ensure they got vaccinated. If the patient remains unvaccinated, repeat the recommendation/referral and try to identify and address any questions or concerns.
How to Make a Strong Flu Vaccine Recommendation

Based on years of research into vaccine motivators, CDC has developed a mnemonic device to help HCPs make a strong vaccine recommendation. This method known as “SHARE” can help you to make a strong vaccine recommendation and provide important information to help patients make informed decisions about vaccinations.

S- SHARE why an influenza vaccine is right for the patient given his or her age, health status, lifestyle, occupation, or other risk factors.

“This vaccine can protect you and your family from getting sick from flu. By getting the vaccine today, you’ll be protecting yourself and the people around you, like your children and parents, who may be more vulnerable to serious flu illness.”

H- HIGHLIGHT positive experiences with influenza vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in influenza vaccination.

“In addition to recommending a yearly flu vaccine to my patients, I get one each year to protect myself and my family from flu.”

A- ADDRESS patient questions and any concerns about influenza vaccines, including for example, side effects, safety, and vaccine effectiveness, in plain and understandable language. Acknowledge that while people who get an influenza vaccine may still get sick, there are studies to show that their illness may be less severe.

“A flu vaccine cannot cause flu infection. The most common side effects of an influenza vaccine are mild, like redness, swelling, soreness, or a low-grade fever for a flu shot. This should go away within a few days.”

“Flu vaccines protect against flu illness but aren’t 100% effective, so even if you get vaccinated you might still become sick with flu. It’s important to get your flu vaccine because studies show that even if you do get sick, vaccination may make your flu illness less severe.”

R- REMIND patients that influenza vaccines help protect them and their loves ones from serious influenza illness and complications that can result in hospitalization or even death for some people.

“Flu activity is going to start to pick up, and CDC says to expect more cases in the coming months. That is why I want to make sure I help protect you and your loved ones against flu and its potentially serious complications.”

E- EXPLAIN the potential costs of getting influenza, including potential serious health effects for the patient, time lost (such as missing work or family obligations), financial costs, and potentially spreading flu to more vulnerable family and friends.

“It’s important to get vaccinated this season because flu vaccination can reduce potential flu illnesses, doctor visits, and missed work and school due to flu, and can protect those around you who are more vulnerable to potentially serious flu complications.”
### Types of Vaccines Available

For the 2023-2024 influenza season, providers may choose to administer any licensed, age-appropriate influenza vaccine — inactivated influenza vaccine (IIV4), recombinant influenza vaccine (RIV4) or live attenuated (LAIV4). Three flu vaccines are preferentially recommended for people 65 years and older when available: Quadrivalent High-Dose Inactivated Influenza Vaccine (HD-IIV4); Quadrivalent Recombinant Influenza Vaccine (RIV4); and Quadrivalent Adjuvanted Inactivated Influenza Vaccine (aIIV4).

<table>
<thead>
<tr>
<th>Vaccine type</th>
<th>Vaccine description</th>
<th>Recommended for*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quadrivalent (4-component) Inactivated Influenza Vaccine (IIV4)</td>
<td>Injectable inactivated vaccine containing the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common</td>
<td>People 6 months and older</td>
</tr>
<tr>
<td>Quadrivalent Live Attenuated Influenza Vaccine (LAIV4)</td>
<td>Intranasal live attenuated vaccine containing the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common</td>
<td>Healthy non-pregnant people 2 through 49 years of age</td>
</tr>
<tr>
<td>Quadrivalent Cell Culture-Based Inactivated Influenza Vaccine (ccIIV4)</td>
<td>Injectable inactivated influenza vaccine manufactured using cell culture rather than eggs, containing the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common</td>
<td>People 6 months and older</td>
</tr>
<tr>
<td>Quadrivalent Recombinant influenza Vaccine (RIV4)</td>
<td>Injectable influenza vaccine produced without the use of influenza viruses or eggs; Contains the influenza A(H1N1), (H3N2) and two influenza B lineage viruses predicted to be most common</td>
<td>Adults 18 years and older</td>
</tr>
<tr>
<td>Quadrivalent Adjuvanted Inactivated Influenza Vaccine (aIIV4)</td>
<td>Injectable inactivated influenza vaccine containing MF59 adjuvant, designed to help promote a stronger immune response in older adults; Contains the influenza A(H1N1), (H3N2) and two influenza B viruses predicted to be most common</td>
<td>Adults 65 years and older</td>
</tr>
<tr>
<td>Quadrivalent High-Dose Inactivated Influenza Vaccine (HD-IIV4)</td>
<td>Injectable inactivated influenza vaccine containing four times the antigen of a standard-dose influenza vaccine, designed to help promote a stronger immune response in older adults; Contains the influenza A(H1N1), (H3N2) and two influenza B viruses predicted to be most common</td>
<td>Adults 65 years and older</td>
</tr>
</tbody>
</table>

* Licensed ages vary for different brands; consult package insert for appropriate ages for specific vaccines

For more information, visit: [www.cdc.gov/flu](http://www.cdc.gov/flu) or call 1-800-CDC-INFO