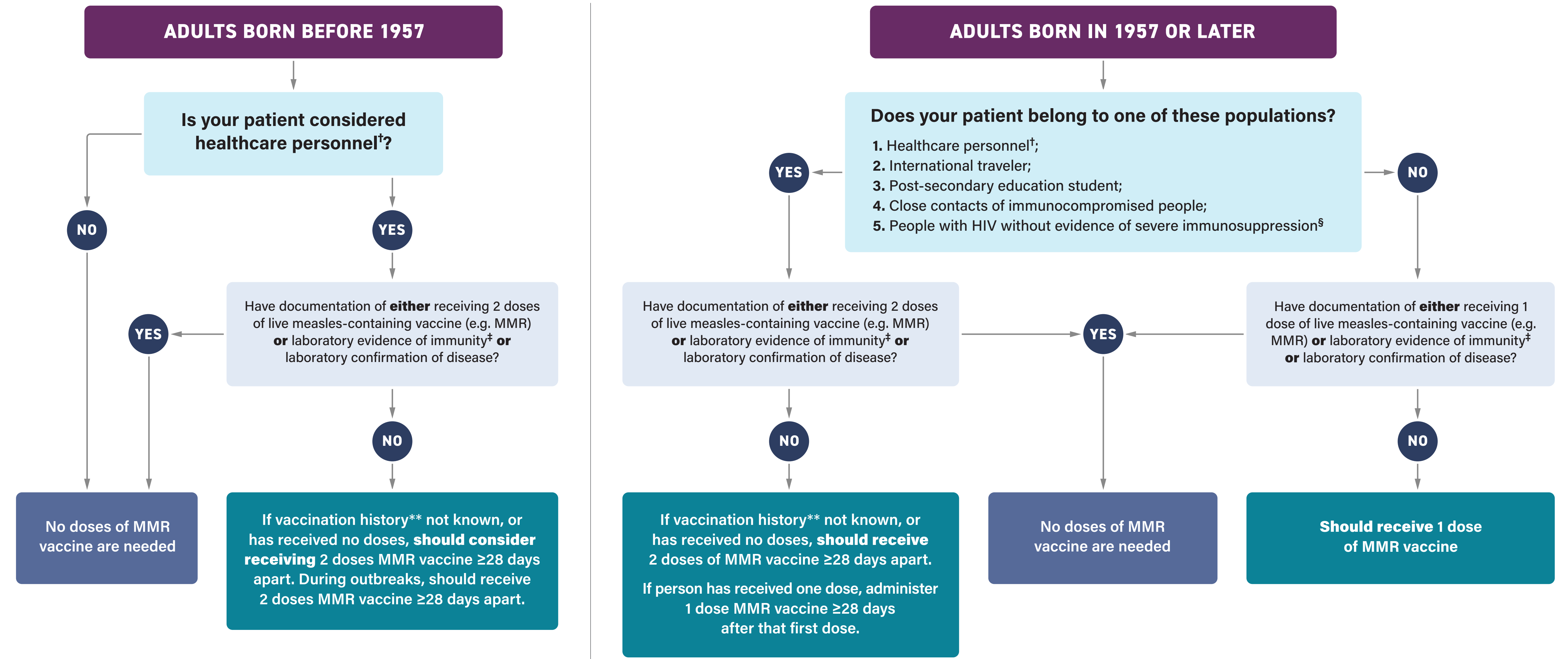


Measles vaccine recommendations for non-pregnant adults* aged ≥19 years by birth year—United States

This infographic for healthcare providers summarizes ACIP and CDC recommendations



*MMR vaccine should NOT be administered during pregnancy. Refer to Adult Immunization Schedule by Age | Vaccines & Immunizations | CDC (www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html) for more contraindications and precautions, and other details.

†Healthcare personnel include all paid and unpaid persons working in healthcare settings who have the potential for exposure to patients and/or to infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air.

‡Acceptable laboratory evidence of immunity includes: measles IgG in serum (equivocal results should be considered negative).

§Refer to Prevention of Measles, Rubella, Congenital Rubella Syndrome, and Mumps, 2013 (www.cdc.gov/mmwr/preview/mmwrhtml/rr6204a1.htm) for details about absence of severe immunosuppression. In addition to the adults belonging to one of these population groups, health departments may consider a second dose for adults (including visitors) who have received one dose who are living in or traveling to domestic areas with sustained, community-wide measles transmission affecting adults where there is ongoing risk of exposure. Refer to VPD surveillance manual (www.cdc.gov/surv-manual/php/table-of-contents/chapter-7-measles.html).

**A small number (<5%) of adults vaccinated between 1963–1967 received an inactivated (killed) measles vaccine. Check documentation to ensure that the adult did not receive inactivated vaccine. Adults who received killed vaccine, or do not know what type of vaccine they received between 1963–1967, should receive 1 or 2 doses of current MMR vaccine (i.e. those killed or unknown doses do not count).

