## Contraindications and Precautions(a) to Commonly Used Vaccines

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Contraindications</th>
<th>Precautions</th>
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</table>
| DT, Td  | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component | GBS <6 weeks after previous dose of tetanus-toxoid–containing vaccine  
History of Arthus-type hypersensitivity reactions after a previous dose of diphtheria-toxoid-containing or tetanus-toxoid–containing vaccine; defer vaccination until at least 10 years have elapsed since the last tetanus-toxoid–containing vaccine  
Moderate or severe acute illness with or without fever |
| DTaP    | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component  
Encephalopathy (e.g., coma, decreased level of consciousness, prolonged seizures), not attributable to another identifiable cause, within 7 days of administration of previous dose of DTP or DTaP | Progressive neurologic disorder, including infantile spasms, uncontrolled epilepsy, progressive encephalopathy; defer DTaP until neurologic status clarified and stabilized  
GBS <6 weeks after previous dose of tetanus-toxoid–containing vaccine  
History of Arthus-type hypersensitivity reactions after a previous dose of diphtheria-toxoid–containing or tetanus-toxoid–containing vaccine; defer vaccination until at least 10 years have elapsed since the last tetanus-toxoid–containing vaccine  
Moderate or severe acute illness with or without fever |
| Hepatitis A | 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 | 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 |
| Hib     | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component  
Age <6 weeks | Moderate or severe acute illness with or without fever |
| HPV(b)  | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component, including yeast | Moderate or severe acute illness with or without fever |
| IIV     | Severe allergic reaction (e.g., anaphylaxis) after previous dose of influenza vaccine or to vaccine component. | GBS <6 weeks after a previous dose of influenza vaccine  
Moderate or severe acute illness with or without fever  
Egg allergy other than hives (e.g., angioedema, respiratory distress, lightheadedness, recurrent emesis; or required epinephrine or another emergency medical intervention). If a vaccine other than RIV or ccIIV is used, the selected vaccine should be administered in an inpatient or outpatient medical setting (including but not necessarily limited to hospitals, clinics, health departments, and physician offices). Vaccine administration should be supervised by a health care provider who is able to recognize and manage severe allergic reactions. |
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<tr>
<td>IPV</td>
<td>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</td>
<td>Pregnancy, Moderate or severe acute illness with or without fever</td>
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<tr>
<td>LAIV&lt;sup&gt;(a)&lt;/sup&gt;</td>
<td>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Concomitant use of aspirin or aspirin-containing medication in children and adolescents LAIV&lt;sub&gt;4&lt;/sub&gt; should not be administered to persons who have taken oseltamivir or zanamivir within the previous 48 hours, peramivir within the previous 5 days, or baloxavir within the previous 17 days.&lt;sup&gt;(a)&lt;/sup&gt; Pregnancy Children aged 2 through 4 years who have received a diagnosis of asthma or whose parents or caregivers report that a health care provider has told them during the preceding 12 months that their child had wheezing or asthma or whose medical record indicates a wheezing episode has occurred during the preceding 12 months. Persons with active cerebrospinal fluid/oropharyngeal communications/leaks. Close contacts and caregivers of severely immunosuppressed persons who require a protected environment. Persons with cochlear implants (due to the potential for CSF leak, which might exist for some period of time after implantation. Providers might consider consultation with a specialist concerning risk of persistent CSF leak if an age-appropriate inactivated or recombinant vaccine cannot be used). Altered Immunocompetence Anatomic or functional asplenia (e.g. sickle cell disease)</td>
<td>GBS &lt;6 weeks after a previous dose of influenza vaccine Asthma in persons aged 5 years old or older Medical conditions which might predispose to higher risk of complications attributable to influenza&lt;sup&gt;(a)&lt;/sup&gt; Moderate or severe acute illness with or without fever</td>
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<tr>
<td>MenACWY</td>
<td>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component, including yeast</td>
<td>Moderate or severe acute illness with or without fever Preterm birth (MenACWY-CRM)&lt;sup&gt;(f)&lt;/sup&gt;</td>
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<td>MenB</td>
<td>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</td>
<td>Moderate or severe acute illness with or without fever Pregnancy Latex sensitivity (MenB-4C)</td>
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| MMR<sup>(a,h)</sup> | 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, long-term immunosuppressive therapy<sup>(i)</sup> or patients with HIV infection who are severely immunocompromised)  
Family history of altered immunocompetence<sup>(i)</sup> | Recent (≤11 months) receipt of antibody-containing blood product (specific interval depends on product)  
History of thrombocytopenia or thrombocytopenic purpura  
Need for tuberculin skin testing or interferon-gamma release assay (IGRA) testing<sup>(k)</sup>  
Moderate or severe acute illness with or without fever |
| 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 |
| PCV13 | Severe allergic reaction (e.g., anaphylaxis) after a previous dose of PCV13 or any diphtheria-toxoid–containing vaccine or to a component of a vaccine (PCV13 or any diphtheria-toxoid–containing vaccine), including yeast | Moderate or severe acute illness with or without fever |
| PPSV23 | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component | Moderate or severe acute illness with or without fever |
| RIV | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component | GBS <6 weeks after a previous dose of influenza vaccine  
Moderate or severe acute illness with or without fever |
| Rotavirus | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component  
SCID  
History of intussusception | Altered immunocompetence other than SCID  
Chronic gastrointestinal disease<sup>(l)</sup>  
Spina bifida or bladder extrophy<sup>(l)</sup>  
Moderate or severe acute illness with or without fever |
| Tdap | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component  
Encephalopathy (e.g., coma, decreased level of consciousness, prolonged seizures), not attributable to another identifiable cause, within 7 days of administration of previous dose of DTP, DTaP, or Tdap | GBS <6 weeks after a previous dose of tetanus-toxoid–containing vaccine  
Progressive or unstable neurological disorder, uncontrolled seizures, or progressive encephalopathy until a treatment regimen has been established and the condition has stabilized  
History of Arthus-type hypersensitivity reactions after a previous dose of diphtheria-toxoid—containing or tetanus-toxoid–containing vaccine; defer vaccination until at least 10 years have elapsed since the last tetanus-toxoid–containing vaccine  
Moderate or severe acute illness with or without fever |
### Appendix A

#### Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component

<table>
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<tr>
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<td>Varicella&lt;sup&gt;(g,h)&lt;/sup&gt;</td>
<td>Known severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, congenital immunodeficiency, long-term immunosuppressive therapy&lt;sup&gt;(l)&lt;/sup&gt; or patients with HIV infection who are severely immunocompromised)&lt;sup&gt;(g)&lt;/sup&gt;</td>
<td>Recent (≤11 months) receipt of antibody-containing blood product (specific interval depends on product)</td>
</tr>
<tr>
<td></td>
<td>Pregnancy</td>
<td>Moderate or severe acute illness with or without fever</td>
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<tr>
<td>Zoster</td>
<td>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</td>
<td>Use of aspirin or aspirin-containing products&lt;sup&gt;(m)&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

### Abbreviations:
- DT = diphtheria and tetanus toxoids; DTaP = diphtheria and tetanus toxoids and acellular pertussis; DTP = diphtheria toxoid, tetanus toxoid, and pertussis; GBS = Guillain-Barre syndrome; Hib = Haemophilus influenzae type b; HIV = human immunodeficiency virus; HPV = human papillomavirus; ILV = inactivated influenza vaccine; IPV = inactivated poliovirus; LAIV = live, attenuated influenza vaccine; MenACWY = quadrivalent meningococcal conjugate vaccine; MMR = measles, mumps, and rubella; MPSV4 = quadrivalent meningococcal polysaccharide vaccine; PCV13 = pneumococcal conjugate vaccine; PPSV23 = pneumococcal polysaccharide vaccine; SCID = severe combined immunodeficiency; RV = recombinant influenza vaccine; Td = tetanus and diphtheria toxoids; Tdap = tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis.

<sup>(g)</sup> 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. Whether and when to administer DTaP to children with proven or suspected underlying neurologic disorders should be decided on a case-by-case basis.

<sup>(h)</sup> HIV vaccine is not recommended during pregnancy.

<sup>(i)</sup> In addition, ACIP recommends LAIV not be used for pregnant women, immunosuppressed persons, and children aged 2–4 years who have asthma or who have had a wheezing episode noted in the medical record within the past 12 months, or for whom parents report that a health-care provider stated that they had wheezing or asthma within the last 12 months. LAIV should not be administered to persons who receive influenza antiviral medications oseltamivir or zanamivir within the previous 48 hours, peramivir within the previous 5 days, or baloxavir within the previous 17 days. Persons who care for severely immunosuppressed persons who require a protective environment should not receive LAIV, or should avoid contact with such persons for 7 days after receipt.


<sup>(k)</sup> These values are based on the particular antiviral. LAIV4 should not be administered to persons who have taken oseltamivir or zanamivir within the previous 48 hours, peramivir within the previous 5 days, or baloxavir within the previous 17 days. This “contraindication” is due to concern with reduced effectiveness of the vaccine. To obtain specific information, please refer to Grohskopf LA, Alyanak E, Broder KR, et. al. Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2020–21 Influenza Season. MMWR Recomm Rep 2020;69(No. RR-8):1-26. Also at https://www.cdc.gov/mmwr/volumes/69/nr/pdfs/rr6908a1-H.pdf.

<sup>(l)</sup> This precaution applies to infants younger than 9 months old.

<sup>(m)</sup> A substantially immunosuppressive steroid dose is considered to be ≥2 weeks of daily receipt of 20 mg or 2 mg/kg body weight of prednisone or equivalent.

<sup>(n)</sup> Family history of congenital or hereditary immunodeficiency in first-degree relatives (e.g., parents and siblings), unless the immune competence of the potential vaccine recipient has been substantiated clinically or verified by a laboratory.

<sup>(o)</sup> If active tuberculosis is suspected, MMR should be delayed. Measles vaccination might suppress tuberculin reactivity temporarily. Measles-containing vaccine can be administered on the same day as tuberculin skin or IGRA testing. If testing cannot be performed until after the day of MMR vaccination, the test should be postponed for ≥24 weeks after the vaccination. If an urgent need exists to skin test or IGRA, do so with the understanding that reactivity might be reduced by the vaccine.


<sup>(q)</sup> MMW and varicella-containing vaccines can be administered on the same day. If the same day, these vaccines should be separated by at least 14 days.

<sup>(r)</sup> If active tuberculosis is suspected, MMR should be delayed. Measles vaccination might suppress tuberculin reactivity temporarily. Measles-containing vaccine can be administered on the same day as tuberculin skin or IGRA testing. If testing cannot be performed until after the day of MMR vaccination, the test should be postponed for ≥24 weeks after the vaccination. If an urgent need exists to skin test or IGRA, do so with the understanding that reactivity might be reduced by the vaccine.

<sup>(s)</sup> For RV1 only, based on latex in product/packaging. Note that anaphylactic allergy to latex is covered in the contraindication, and would also be isolated to RV 1 in the case of latex. For more details see Cortese MM, Parashar UD. Prevention of rotavirus gastroenteritis among infants and children: recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR Recomm Rep. 2009;58(No. RR-2):1-25.

<sup>(t)</sup> No adverse events associated with the use of aspirin or aspirin-containing products after varicella vaccination have been reported; however, the vaccine manufacturer recommends that vaccine recipients avoid using aspirin or aspirin-containing products for 6 weeks after receiving varicella vaccines because of the association between aspirin use and Reye syndrome after varicella.

Adapted from Table 4-1, ACIP General Best Practice Guidelines for Immunization. January 2021