

WHICH ADULT VACCINES DO YOU NEED?

We recommend that all adults, including pregnant women, get the following vaccines:

- Influenza, every year
- Tetanus, Diphtheria, Whooping Cough (Tdap), every 10 years.

Check all that apply to you.

Let's discuss these recommended vaccines.

<input type="radio"/> I am 50 or older.	<ul style="list-style-type: none"> • Shingles (Zoster) vaccine
<input type="radio"/> I am 65 or older.	<ul style="list-style-type: none"> • Both types of pneumonia vaccine (Pneumovax and Prevnar; Prevnar given first)
<input type="radio"/> I am 26 or younger (male or female).	<ul style="list-style-type: none"> • HPV vaccine series (3-dose series)
<input type="radio"/> I have type 1 or type 2 diabetes.	<ul style="list-style-type: none"> • Hepatitis B vaccine series (3-dose series) • Pneumonia vaccine (Pneumovax). • Pneumonia vaccine (Pneumovax)
<input type="radio"/> I have heart disease, asthma or chronic lung disease.	<ul style="list-style-type: none"> • Pneumonia vaccine (Pneumovax)
<input type="radio"/> I smoke cigarettes.	<ul style="list-style-type: none"> • Whooping cough (Tdap) vaccine in the late second or third trimester with each pregnancy
<input type="radio"/> I am pregnant or could become pregnant.	<ul style="list-style-type: none"> • Both types of pneumonia vaccines (Prevnar and Pneumovax; Prevnar given first) • HPV vaccine series (if 26 years of age or younger and not previously vaccinated)
<input type="radio"/> I have a weakened immune system from a medical condition or medications..	<ul style="list-style-type: none"> • Hepatitis A vaccine series (2-dose series) • Hepatitis B vaccine series (3-dose series) • Both types of pneumonia vaccines (Prevnar and Pneumovax; Prevnar given first)
<input type="radio"/> I have chronic liver disease.	<ul style="list-style-type: none"> • Hepatitis B vaccine series (3-dose series) • Both types of pneumonia vaccines (Prevnar and Pneumovax; Prevnar given first)
<input type="radio"/> I have chronic kidney failure.	<ul style="list-style-type: none"> • Both types of pneumonia vaccines (Prevnar and Pneumovax; Prevnar given first) • Meningococcal (Meningitis) vaccine(s)
<input type="radio"/> I do not have a spleen or my spleen does not work well, I have a cochlear implant, or cerebrospinal fluid leaks.	<ul style="list-style-type: none"> • Hepatitis B vaccine series (3-dose series) • Both types of pneumonia vaccines (Prevnar and Pneumovax; Prevnar given first) • HPV vaccine series (if 26 years of age or younger and not previously vaccinated) • Meningococcal (Meningitis) vaccine
<input type="radio"/> I have HIV.	<ul style="list-style-type: none"> • Both types of pneumonia vaccines (Prevnar and Pneumovax; Prevnar given first) • Meningococcal (Meningitis) vaccine.
<input type="radio"/> I have sickle cell disease.	<ul style="list-style-type: none"> • Hepatitis A vaccine series (2-dose series) • Hepatitis B vaccine series (3-dose series) • HPV vaccine series (if 26 years of age or younger and not previously vaccinated)
<input type="radio"/> I am a man who has sex with men.	<ul style="list-style-type: none"> • Hepatitis B vaccine series • Measles, mumps, rubella (MMR) vaccine* • Varicella "chickenpox" vaccine*
<input type="radio"/> I am a healthcare worker.	<ul style="list-style-type: none"> • Hepatitis A vaccine series (2-dose series) • Hepatitis B vaccine series (3-dose series) • Meningococcal (Meningitis) vaccine
<input type="radio"/> I am planning to travel out of the U.S.	<ul style="list-style-type: none"> • Hepatitis A vaccine series (2-dose series) • Hepatitis B vaccine series (3-dose series) • Meningococcal (Meningitis) vaccine