



**Non-Patient Specific Standing Order for the Administration of the
Moderna SPIKEVAX COVID-19 Vaccine (2026-2027 Formula)
for Persons 2 Years of Age and Older by Pharmacists
(Updated 10/23/2026)**

Purpose: To reduce morbidity and mortality from COVID-19 by administering the Moderna SPIKEVAX COVID-19 vaccine (2026-2027 formula) as permitted by the policy and order sections of this Order. Pursuant to 8 NYCRR § 63.9, the Commissioner of Health is authorized to issue a statewide standing order where they find that there is an outbreak of disease, or that there is imminent threat of an outbreak of disease.

Policy: This non-patient specific standing order authorizes pharmacists to administer the Moderna COVID-19 vaccine (2026-2027 formula) to eligible individuals, as permitted by its Biologics License Application (BLA) approval or Emergency Use Authorization (if applicable) by the U.S. Food and Drug Administration (FDA), state and federal laws, Executive Orders, Public Readiness and Emergency Preparedness (PREP) Act Declaration, recommendations of the Advisory Committee on Immunization Practices (ACIP), the American Academy of Family Physicians (AAFP), the American Academy of Pediatrics (AAP), the American College of Obstetricians and Gynecologists (ACOG), or the Infectious Disease Society of America (IDSA).

Pursuant to this order, Moderna COVID-19 vaccination may be administered by a pharmacist who is:

- holds a certificate of administration of immunizations issued by the New York State Education Department; and administers the vaccine pursuant to this non-patient-specific standing order; and
- certified in cardio-pulmonary resuscitation.

Target Population:

1. FDA-approved indication & formulation

The 2026–2027 Moderna SPIKEVAX formulation has been updated to a monovalent vaccine based on SARS-CoV-2 JN.1-descendant variant XFG and will be referred to as the “Moderna SPIKEVAX COVID-19 Vaccine (2026-2027 Formula)” in this standing order. It has full Biologics License Application approval under the brand name “SPIKEVAX.” The product has Biologics License Application approval for use in the following individuals:

- 65 years of age and older
- 6 months through 64 years of age with at least one underlying condition that puts them at high risk for severe outcomes from COVID-19. Table 1 provides examples of conditions and risk factors associated with increased risk for severe COVID-19; the list is not exhaustive.

Assessment of risk status: Individuals may self-attest to a condition that puts them at high risk for severe COVID-19, including moderate or severe immunocompromise. Documentation of that condition is not required for vaccination under this standing order.

1. Professional Society Recommendations

This standing order is based on medical society recommendations outlined below. The medical society recommendations go beyond FDA-licensed indications for some populations.

- a. The American Academy of Pediatrics (AAP) recommends 2026-2027 COVID-19 vaccination for all children 6 through 23 months of age without a contraindication. For children and adolescents 2 through 18 years of age, the AAP recommends vaccination for specified groups, including those at increased risk for severe COVID-19, and advises offering vaccination when a parent or guardian desires protection.
- b. The American Academy of Family Physicians (AAFP) supports vaccination for children 6 through 23 months, a risk-based approach for 2 through 18 years, and vaccination for all adults 19 years of age and older.
- c. The American College of Obstetricians and Gynecologists (ACOG) recommends updated COVID-19 vaccination for people who are pregnant, recently pregnant, considering pregnancy, or lactating.
- d. The Infectious Diseases Society of America (IDSA) recommends age-appropriate 2026-2027 COVID-19 Vaccination for people with compromised immunity.

For administration under this standing order, eligibility based on a professional society recommendation does not change the product's formulation, dose, or route

NOTE: Pharmacists must follow the requirements set forth in all applicable laws and regulations, including providing patients with requisite information, maintaining adequate records and adhering to reporting requirements.

Procedure: This standing order authorizes the administration of Moderna SPIKEVAX COVID-19 Vaccine (2026-2027 Formula) to individuals 2 years and older. The vaccine is supplied in prefilled, single-dose syringes and is administered intramuscularly.

- For persons ages 2 years through 11 years of age, each dose is 0.25 mL (25 mcg), supplied in a single-dose prefilled syringe with a red label
- For persons ages 12 years and older, each dose is 0.5 mL (50 mcg), supplied in a single-dose prefilled syringe with a blue label.

1. Assess individuals ages 2 through 64 years of age and older who are *not immunocompromised* irrespective of previous COVID-19 vaccination status per table below:

Age	Number of Moderna SPIKEVAX COVID-19 2026-2027 doses indicated	Dosage
2 years through 11 years	1	0.25 mL
12-64 years and older	1	0.50 mL
If previously vaccinated with any COVID-19 vaccine, administer the dose ≥ 2 months after the last dose of COVID-19 vaccine.		

2. Assess individuals ages 65 and older who are *not immunocompromised* irrespective of previous COVID-19 vaccination status per table below:

COVID-19 Vaccination history before 2026-2027 vaccine*	Number of Moderna SPIKEVAX COVID-19 2026-2027 doses indicated	Dosage	Interval between doses
Any vaccination status before 2026-2027 season	2	0.50 mL	2026-2027 Dose 1: At Day 0 2026-2027 Dose 2: 6 months after Dose 1 (minimal interval 2 months)

*COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 202-202 COVID-19 vaccines

3. Assess individuals ages 2 years of age through 4 years of age who *are immunocompromised* for COVID-19 vaccination status per table below:

COVID-19 Vaccination history before 2026-2027 vaccine*	Number of Moderna SPIKEVAX COVID-19 2026-2027 doses indicated	Dosage	Interval between doses
Unvaccinated	4	0.25 mL	2026-2027 Dose 1: Day 0 2026-2027 Dose 2: 4 weeks after Dose 1 2026-2027 Dose 3: ≥4 weeks after Dose 2 2026-2027 Dose 4: At least six months (minimum interval 2 months) after Dose 3 ^{‡, ¶}
Previous 1 dose Moderna vaccine [§]	3	0.25 mL	2026- 2027 Dose 1: At least 4 weeks after previous dose 2026-2027 Dose 2: At least 4 weeks after 2026-2027 Dose 1 2026-2027 Dose 3: At least six months (minimum interval 2 months) after 2026-2027 Dose 2 ^{‡, ¶}
Previous 2 doses of Moderna [§]	2	0.25 mL	2026-2027 Dose 1: At least 4 weeks after previous dose 2026-2027 Dose 2: At least six months (minimum interval 2 months) after 2026-2027 Dose 1 ^{‡, ¶}
Previously completed initial 3-dose vaccination series with 3 or more doses Moderna or Pfizer, 2 or more doses Novavax	2	0.25 mL	2026-2027 Dose 1: Administer at least 8 weeks after previous dose [‡] 2026-2027 Dose 2: At least six months (minimum interval 2 months) after 2026 – 2027 Dose 1 [¶]

*COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2026-2027 COVID-19 vaccines

[§]Vaccine interchangeability: The same vaccine product should be used whenever possible. A different age-appropriate product may be administered if the original product is unavailable, the previous product is unknown, the

individual would otherwise not receive a recommended dose, or the series cannot be completed with the same product because of a contraindication.

[‡]The 3-dose primary series is standard for immunocompromised children in this age group. A **fourth dose is an additional dose**, not part of the primary series. Providers may administer further additional doses (Dose 5, 6, etc.) based on clinical judgment and patient circumstances.

[¶] Providers may administer further additional doses based on clinical judgment, patient circumstance, and product specific standing order. For an incomplete Pfizer or Novavax initial series, complete it using the respective series schedule and the corresponding product standing order before administering Moderna COVID-19 additional vaccine dose.

4. Assess individuals ages 5 years of age through 11 years of age who *are immunocompromised* for COVID-19 vaccination status per table below:

COVID-19 Vaccination history before 2026-2027 vaccine*	Number of Moderna SPIKEVAX COVID-19 2026-2027 doses indicated	Dosage	Interval between doses
Unvaccinated	4	0.25 mL	2026-2027 Dose 1: Day 0 2026-2027 Dose 2: 4 weeks after Dose 1 2026-2027 Dose 3: 4 weeks after Dose 2 2026-2027 Dose 4: At least six months (minimum interval 2 months) after Dose 3 ^{‡, ¶}
Previous 1 dose Moderna vaccine [§]	3	0.25 mL	2026-2027 Dose 1: At least 4 weeks after previous dose 2026-2027 Dose 2: At least 4 weeks after 2026-2027 Dose 1 2026-2027 Dose 3: At least six months (minimum interval 2 months) after 2026-2027 Dose 2 ^{‡, ¶}
Previous 2 doses of Moderna [§]	2	0.25 mL	2026-2027 Dose 1: At least 4 weeks after previous Moderna dose 2026-2027 Dose 2: At least six months (minimum interval 2 months) after 2026-2027 Dose 1 ^{‡, ¶}

Previously completed initial 3-dose vaccination series with 3 or more doses Moderna or Pfizer, 2 or more doses Novavax	2	0.25 mL	2026-2027 Dose 1: Administer at least 8 weeks after previous dose [‡] 2026-2027 Dose 2: At least six months (minimum interval 2 months) after 2026-2027 Dose 1 [¶]
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* COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2026-2027 COVID-19 vaccines

[§]Vaccine interchangeability: The same vaccine product should be used whenever possible. A different age-appropriate product may be administered if the original product is unavailable, the previous product is unknown, the individual would otherwise not receive a recommended dose, or the series cannot be completed with the same product because of a contraindication.

[‡] The 3-dose primary series is standard for immunocompromised children in this age group. A **fourth dose is an additional dose**, not part of the primary series. Providers may administer further additional doses (Dose 5, 6, etc.) based on clinical judgment and patient circumstances.

[¶] Providers may administer further additional doses based on clinical judgment, patient circumstance, and product specific standing order. For an incomplete Pfizer or Novavax initial series, complete it using the respective series schedule and the corresponding product standing order before administering Moderna COVID-19 additional vaccine dose.

- Assess individuals ages 12 years of age and older who *are immunocompromised* for COVID-19 vaccination status per table below:

COVID-19 Vaccination history before 2026-2027 vaccine*	Number of Moderna COVID-19 2026-2027 doses indicated	Dosage	Interval between doses
Unvaccinated	4	0.50 mL	2026-2027 Dose 1: Day 0 2026-2027 Dose 2: 4 weeks after Dose 1 2026-2027 Dose 3: 4 weeks after Dose 2 2026-2027 Dose 4: At least six months (minimum interval 2 months) after Dose 3 ^{‡, ¶}
Previous 1 dose Moderna vaccine [§]	3	0.50 mL	2026-2027 Dose 1: At least 4 weeks after previous dose 2026-2027 Dose 2: At least 4 weeks after 2026 – 2027 Dose 1

			2026-2027 Dose 3: At least six months (minimum interval 2 months) after 2026 – 2027 Dose 2 ^{‡, ¶}
Previous 2 doses of Moderna [§]	2	0.50 mL	2026-2027 Dose 1: At least 4 weeks after previous Moderna dose 2026-2027 Dose 2: At least six months (minimum interval 2 months) after 2026-2027 Dose 1 ^{‡, ¶}
Previously completed initial 3-dose vaccination series with 3 or more doses Moderna or Pfizer, 2 or more doses Novavax	2	0.50 mL	2026-2027 Dose 1: Administer at least 8 weeks after previous dose ^{‡, ¶} 2026-2027 Dose 2: At least six months (minimum interval 2 months) after 2026-2027 Dose 1 [¶]

* COVID-19 vaccination history refers to all doses of COVID-19 vaccine from any manufacturer received before the availability of the 2026-2027 COVID-19 vaccines

[§]Vaccine interchangeability: The same vaccine product should be used whenever possible. A different age-appropriate product may be administered if the original product is unavailable, the previous product is unknown, the individual would otherwise not receive a recommended dose, or the series cannot be completed with the same product because of a contraindication.

[‡] The 3-dose primary series is standard for immunocompromised children in this age group. A **fourth dose is an additional dose**, not part of the primary series. Providers may administer further additional doses (Dose 5, 6, etc.) based on clinical judgment and patient circumstances.

[¶] Providers may administer further additional doses based on clinical judgment, patient circumstance, and product specific standing order. For an incomplete Pfizer or Novavax initial series, complete it using the respective series schedule and the corresponding product standing order before administering Moderna COVID-19 additional vaccine dose.

6. Additional Clinical Considerations

- Moderna COVID-19 Vaccine (2026-2027 Formula) may be simultaneously administered with other routinely recommended vaccines. There are [additional considerations](#) for simultaneous administration of an orthopoxvirus vaccine and COVID-19 vaccine.
- Administration of COVID-19 vaccines should not be delayed in patients taking immunosuppressive therapies. Whenever possible, COVID-19 vaccines should be administered at least 2 weeks before initiation or resumption of immunosuppressive therapies. For patients who receive B-cell-depleting therapies on a continuing basis, COVID-19 vaccines should be administered approximately 4 weeks before the next scheduled therapy.
- Revaccinate persons who received doses of COVID-19 vaccine prior to or during hematopoietic cell transplantation (HCT) or chimeric antigen receptor T-cell (CAR-T-cell) therapy, following the current COVID-19 vaccination schedule. Revaccination should start at least 3 months (12 weeks) after transplant or CAR-T-cell therapy.

7. Screen for contraindications and precautions before each dose
 - a. **Contraindications:** History of a severe allergic reaction (e.g., anaphylaxis) after a previous dose of a mRNA COVID-19 vaccine or to a component of the Moderna COVID-19 vaccine. Do not administer Moderna SPIKEVAX COVID-19 vaccine when this contraindication is present. Refer for assessment of an alternative vaccine type and consider allergist-immunologist consultation.
 - b. **Precautions:** Evaluate the following before proceeding.
 - i. A diagnosed non-severe allergy to a mRNA COVID-19 vaccine or to a component of the Moderna SPIKEVAX COVID-19 vaccine.
 - ii. Non-severe, immediate (onset less than 4 hours) allergic reaction after administration of a previous dose of COVID-19 vaccine, if receiving the same vaccine type.
 - iii. History of multisystem inflammatory syndrome in children (MIS-C) or adults (MIS-A).
 - iv. History of myocarditis or pericarditis within 3 weeks after a dose of any COVID-19 vaccine.
 - v. Moderate to severe illness with or without fever.
8. Provide information on the Moderna SPIKEVAX COVID-19 Vaccine Information Statement and obtain consent.
 - a. Prior to vaccine administration:
 - i. Inform each patient or a patient's legal guardian, as applicable, of the risks, benefits, and alternatives of receiving the Moderna COVID-19 Vaccine (2026-2027 Formula).
 - ii. As the vaccination provider, you must communicate to the recipient or their caregiver, information consistent with the COVID-19 Vaccine Information Statement, including: **(1)** COVID-19 vaccination is recommended for eligible individuals consistent with the applicable recommendations of AAP, AAFP, ACOG and IDSA **(2)** The recipient or their caregiver has the option to accept or refuse Moderna SPIKEVAX COVID-19 Vaccine (2026-2027 Formula); **(3)** The significant known and potential risks and benefits of Moderna SPIKEVAX COVID-19 Vaccine (2026-2027 Formula), and the extent to which such risks and benefits are unknown; and **(4)** Information about available alternative vaccines and the risks and benefits of those alternatives. Moderna mNEXSPIKE COVID-19 vaccine is the only vaccine that may be administered pursuant to this exact non-specific standing order.
 - iii. Provide each patient or patient's legal guardian, as applicable with the Vaccine Information Statement located here:
<https://www.cdc.gov/vaccines/hcp/current-vis/covid-19.html>
 - iv. Obtain consent to administer the vaccine from the patient or the patient's legal guardian, as applicable, following the pharmacy's policies for consent.
 - v. Provide instructions to the parent or legal guardian regarding appropriate course of action in the event of adverse reactions.
 - vi. Provide necessary information on receiving the next dose of vaccine, if applicable.

9. Prepare to administer vaccine

- a. Administration of single dose, prefilled syringes
 - i. Moderna COVID-19 Vaccine single dose syringes contain a frozen suspension that does not contain a preservative and must be thawed prior to administration. Verify that the label on the prefilled syringe states 2026-2027 formula. Thaw frozen SPIKEVAX prefilled syringes prior to administration using one of the following methods: A carton of 10 syringes requires 2 hours and 40 minutes in the refrigerator at 2°C to 8°C (35°F to 46°F) or 1 hour and 20 minutes in the room temperature at 15°C to 25°C (59°F to 77°F). One syringe removed from the carton requires 1 hour and 40 minutes in the refrigerator or 40 minutes at room temperature at 15°C to 25°C (59°F to 77°F). After thawing, do not refreeze.
 - ii. Do not shake. Do not dilute the vaccine.
 - iii. Use a sterile needle of the appropriate size for intramuscular injection.
 - iv. With tip cap upright, remove tip cap by twisting counterclockwise until tip cap releases. Remove tip cap in a slow, steady motion. Avoid pulling tip cap while twisting.
 - v. Attach the needle by twisting in a clockwise direction until the needle fits securely on the syringe.
 - vi. Each syringe contains 0.25mL for ages 2 through 11 years of age (red label) or 0.50 mL for ages 12 years and older (blue label)

10. Administer vaccine:

- a. Choose the correct needle gauge, needle length and injection site based on the patient's age and weight, and the required injection technique. Administer the vaccine intramuscularly at a 90-degree angle.
- b. Assess patient weight and select a needle for vaccine administration based on the following:

Sex	Patient Weight	Needle Length
Female	< 130 lbs	5/8* – 1"
	130–152 lbs	1"
	153–200 lbs	1–1½"
	200+ lbs	1½"
Male	< 130 lbs	5/8* – 1"
	130–152 lbs	1"
	153–260 lbs	1–1½"
	260+ lbs	1½"

* For administration in the deltoid, some experts recommend a 5/8-inch needle for vaccine recipients who weigh less 130 pounds. If used, skin must be stretched tightly (**do not bunch subcutaneous tissue**).

- c. Administer Moderna COVID-19 Vaccine (2026-2027 Formula) by intramuscular injection:
 - 2-11 years: 0.25 mL
 - 12 years of age and older: 0.50 mL

Administer the Moderna COVID-19 Vaccine (2026-2027 Formula) in the deltoid muscle via the intramuscular (IM) route. Alternately, the anterolateral thigh can be used. A 1.5-inch needle is typically used for adults if administering vaccine in this site. More information about choice of needle length can be found at <https://www.cdc.gov/vaccines/hcp/administration/during.html>

- i. For syringes: Administer the entire volume to deliver a single dose. For the prefilled syringe, remove tip cap and attach a sterile needle. Do not shake. Administer the entire volume to deliver a single 0.25 mL or 0.5 mL dose.
- ii. Discard syringe immediately after use.

11. Document vaccination

Document each patient's vaccine administration information and follow-up in the following places:

Medical Record System (including Countermeasure Data Management System [CDMS], as applicable): Ensure that the patient's name, the date the vaccine was administered, the name of the vaccine, the manufacturer and lot number, the vaccination site and route, address of administering site, and the name and title of the authorized pharmacist administering the vaccine is documented in the patient's medical record or on a separate form retained by the authorized pharmacist who has administered the immunization, and in a retrievable format available to the State Education Department and the patient. If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, refusal). Documentation must be completed within 24 hours of administration. This information, whether in a medical record or separately kept, must be recorded and maintained in accordance with 8 NYCRR § 29.2(a)(3).

Signed Certificate of Immunization (given to the patient): Record the patient's name, date of vaccination, name/location of the administering clinic, administering pharmacist, name of vaccine, manufacturer and lot number, and recommendations for future immunizations.

New York State Immunization Information System (NYSIIS) and Citywide Immunization Registry (CIR): Report all doses administered to those 18 years of age and younger within 14 days of administration to NYSIIS if administered outside New York City, or CIR if administered in New York City. For individuals 19 years of age and older, obtain consent and report administered doses to the applicable registry, NYSIIS or CIR. The administering pharmacist must follow their facility's reporting procedures and ensure that the dose is submitted to the applicable registry within the required timeframe.

12. Management of medical emergencies

- a. A post vaccination observation period should be considered to monitor patients for the occurrence of immediate adverse reactions:
 - i. 30 minutes:
 - History of a non-severe, immediate (onset within 4 hours) allergic reaction after a previous dose of COVID-19 vaccine
 - History of allergy-related contraindication to a different type of COVID-19 vaccine
 - History of anaphylaxis after non-COVID-19 vaccines or injectable therapies
 - ii. 15 minutes for all other recipients; extend observation when clinically indicated
- b. Be prepared for management of a medical emergency related to the administration of vaccine by maintaining written copies of the standing orders and protocols for administration of epinephrine and diphenhydramine. Pharmacists shall be responsible for having emergency anaphylaxis treatment agents, related syringes and needles at the immunization site, including sufficient epinephrine to administer at least 3 epinephrine prefilled syringes or autoinjectors, H1 antihistamine, blood pressure cuff, and a stethoscope and timing device to assess pulse. To prevent syncope, vaccinate patients while they are seated or lying down and assess for signs of syncope such as extreme paleness, sweating, coldness of the hands and feet, nausea, lightheadedness, dizziness, weakness or visual disturbances.

For more information, please see:

- i. Preventing and Managing Adverse Reactions at:
<https://cdc.gov/vaccines/hcp/imz-best-practices/preventing-managing-adverse-reactions.html>
- ii. CDC's General Best Practice Guidelines for Immunization, "Preventing and Managing Adverse Reactions," at <https://www.cdc.gov/vaccines/hcp/imz-best-practices/preventing-managing-adverse-reactions.html>
- iii. Immunize.org's "Medical Management of Vaccine Reactions in Adults in a Community Setting" at <https://www.immunize.org/catg.d/p3082.pdf>.
- iv. Immunize.org's "Medical Management of Vaccine Reactions in Children and Teens in a Community Setting" at <https://www.immunize.org/catg.d/p3082a.pdf>.

13. Reporting of adverse events

- a. Report any vaccine adverse events to the US Department of Health and Human Services. Visit <https://vaers.hhs.gov/> to file a report or call 1-800-822-7967.
- b. Conduct any follow-up requested by the U.S government, including the Centers for Disease Control and Prevention, the Food and Drug Administration, or other designee, regarding adverse events to the extent feasible given the emergency circumstances.

14. Storage and Handling of Vaccine for Moderna COVID-19 Vaccine (2026-2027 Formula)

- a. For storage and handling details, please refer to the fact sheet and package insert:
<https://www.fda.gov/media/155675/download?attachment>

Order: I am hereby prescribing this non-patient specific order for administration of Moderna SPIKVAX COVID-19 Vaccine (2026-2027 Formula). Specifically, pharmacists who are employees, volunteers, or contractors of a pharmacy licensed in New York State may administer Moderna SPIKEVAX COVID-19 Vaccine (2026-2027 Formula) pursuant to this non-patient specific order.

This non-patient specific order shall remain in effect for the vaccination of any individuals as set forth herein, beginning on October 23rd, 2026 through October 22nd, 2027. In the event that I discontinue this non-patient specific order prior to October 22nd, 2027, notice of such discontinuance shall be provided to those employees, volunteers, and contractors of the pharmacy licensed in New York State permitted to execute under this Order using the usual methods of communication.

Signature:

Date: October 23rd, 2026

Name of Physician: James V. McDonald, M.D., M.P.H

Title: Commissioner

Institution: New York State Department of Health

NYS License No.: 186383

Effective Date of Order: October 23rd, 2026

Table 1: Examples of conditions and risk factors associated with increased risk for severe COVID-19 ‡

Asthma
Cancer ▪ Hematologic malignancies
Cerebrovascular disease
Chronic kidney disease* ▪ People receiving dialysis^
Chronic lung diseases limited to the following: ▪ Bronchiectasis ▪ COPD (chronic obstructive pulmonary disease) ▪ Interstitial lung disease ▪ Pulmonary embolism ▪ Pulmonary hypertension
Chronic liver disease limited to the following: ▪ Cirrhosis ▪ Nonalcoholic fatty liver disease ▪ Alcoholic liver disease ▪ Autoimmune hepatitis
Cystic Fibrosis
Children with certain underlying conditions §
Diabetes mellitus, type 1
Diabetes mellitus, type 2*
Disabilities ‡, including Down's syndrome
Epilepsy
Hemophilia
Heart conditions (such as heart failure, coronary artery disease, or cardiomyopathies)
HIV (human immunodeficiency virus)
Mental health conditions limited to the following: ▪ Mood disorders, including depression ▪ Schizophrenia spectrum disorders
Neurologic conditions limited to dementia and Parkinson's disease
Obesity (BMI ≥ 30 or ≥ 95 th percentile in children)
Overweight (BMI ≥ 25 kg/m ² but < 30 kg/m ²)
Physical inactivity
Pregnancy and recent pregnancy
Primary immunodeficiencies
Sickle cell disease
Smoking, current and former
Substance use disorders
Solid-organ or blood stem-cell transplantation
Tuberculosis
Use of corticosteroids or other immunosuppressive medications

Underlying conditions associated with increased risk for severe COVID-19 (CDC). This table is a reference for assessing risk, including whether an individual meets the FDA's high-risk indication. It is not an exhaustive list and does not limit eligibility under the CDC or professional society recommendations adopted by this standing order.

* Indicates presence of evidence for pregnant and nonpregnant women.

^ Risk may be further increased for people receiving dialysis

§ Information for Pediatric Healthcare Providers (<https://www.cdc.gov/covid/hcp/clinical-care/for-pediatric-hcp.html>)

‡ Underlying conditions for which there is evidence in pediatric patients.

¥ Centers for Disease Control and Prevention. Underlying Medical Conditions Associated with Higher Risk for Severe COVID-19. CDC. Accessed September 29, 2026. <https://www.cdc.gov/covid/hcp/clinical-care/underlying-conditions.html>. This resource provides detailed evidence grading for each clinical condition listed in the table.