



# Oregon

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## 2025-26 Respiratory Virus Vaccine Recommendations Frequently Asked Questions

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The Oregon State Board of Nursing (OSBN) recognizes nurses have ongoing questions regarding vaccine protocols for the 2025-2026 respiratory season. The following Frequently Asked Questions are presented to assist nurses and nurse practitioners with implementing new recommendations issued by Oregon, California, Hawaii, and Washington.

### **Q: What is the issue?**

**A:** On Aug. 27, 2025, the U.S. Food and Drug Administration (FDA) limited approval for updated COVID-19 vaccines to all people 65 years and older and people 6 months through under 64 years with underlying medical conditions. As of Sept. 17, 2025, the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) has not yet issued recommendations for the updated COVID-19 vaccine – while CDC already moved COVID-19 from the list of shots recommended for all healthy kids and pregnant women to a recommendation to have a discussion with your provider about benefits versus risks of getting the shot. As a result, some providers and pharmacies have been reluctant to stock updated COVID-19 vaccines. Many pharmacies have updated stock but are requiring either a prescription from the patient's healthcare provider or an attestation of underlying medical conditions for vaccination. These delays are due to inaction by the ACIP over the summer. The ACIP recommendations in the past have formed the basis of the protocols in Oregon for pharmacists to administer vaccines. What this means is that families are confused, providers are under pressure, pharmacies are under-resourced, and communities have been left more vulnerable.

### **Q: What is the West Coast Health Alliance?**

**A:** The Governors of Oregon, California, Hawaii, and Washington have formed the West Coast Health Alliance (WCHA) as a unified regional response to concerns regarding the CDC's credibility and scientific integrity under its current leadership. The WCHA is committed to safeguarding scientific expertise and vaccine access, and leading with clarity, evidence and care so that individuals and families know their options and can access the protection they deserve.

The WCHA has developed Consensus [WCHA 2025-2026 Respiratory Virus Season Immunization Recommendations](#).

**Q: What are the West Coast Health Alliance’s COVID-19 vaccine recommendations?**

**A:** The West Coast Health Alliance (WCHA) has recommended that the updated COVID-19 vaccines be available to anyone 6 months or older who wants them at no cost—just as they have been during recent respiratory seasons. The WCHA specifically recommends that the following people at increased risk for severe disease get an updated COVID vaccine:

- Children between 6-23 months of age
- Adults 65 years and older
- Anyone at any age over 6 months who is at high risk of severe disease because they have underlying medical conditions
- Anyone who is planning for pregnancy, pregnant, postpartum, or lactating
- People with exposure to others who are at high risk

**Q: What are the WCHA’s influenza vaccine recommendations?**

**A:** The WCHA endorses the ACIP’s current universal recommendation for the influenza vaccine as of Sept. 17, 2025. All people 6 months of age and older should receive an updated influenza vaccine. These recommendations are unchanged from last year.

**Q: What are the WCHA’s RSV vaccine recommendations?**

**A:** As of Sept. 17, 2025, the WCHA also endorses the ACIP’s current recommendations for RSV immunization products:

- All infants younger than 8 months born to mothers who did not receive a maternal RSV vaccine should receive either nirsevimab or clesrovimab shortly before or during the RSV season.
- People who are 32-36 weeks pregnant from September through January should receive a maternal RSV vaccine.
- Children 8-19 months with [risk factors](#) for severe disease should receive nirsevimab for severe disease should receive nirsevimab.
- All adults 75 and older should receive a single lifetime dose of RSV vaccine.
- Adults 50-74 with [risk factors](#) for severe RSV disease should also receive a single lifetime dose of RSV vaccine.

To protect young infants, either maternal vaccination or infant immunization with nirsevimab or clesrovimab is recommended. Infants do not need both.

**Q: If I administer or prescribe vaccines that are not ACIP-approved, will the OSBN discipline my license?**

**A:** The OSBN fully supports all nurse practitioners and nurses in their professional clinical decision-making concerning vaccinations. Nurse practitioners and nurses should review the [WCHA Recommendations](#), screen patients for contraindications and precautions, and proceed with vaccination based on the provider’s clinical expertise and professional judgment of each patient’s unique health care circumstances and risk factors. Any patient who requests a vaccine should receive one, provided there are no contraindications.

The Board will not take disciplinary action against licensees who make appropriate, evidence-based clinical decisions when administering or prescribing vaccines within their scope of practice and in the best interest of patient care, and not otherwise inconsistent with the Oregon Nurse Practice Act.

**Q: How can I ensure vaccines are appropriately administered in my clinic?**

**A:** Nurse Practitioners are advised to establish standing protocols for vaccine administration in their clinics and institutions, in alignment with the [WCHA Recommendations](#).

**Q: Am I permitted to prescribe or administer vaccines for patients?**

**A:** Nurse practitioners with prescriptive authority and nurses should consult the [WCHA Recommendations](#), carefully screen patients for contraindications and precautions, and prescribe or administer vaccinations based on their clinical expertise and professional judgment. Patients requesting a vaccine should be provided with one, provided there are no contraindications.

The Oregon Nurse Practice Act (NPA) permits Licensed Practical Nurses (LPNs) and Registered Nurses (RNs) to deliver nursing care within their established scope of practice. Nurses at all levels are authorized to administer vaccines.

**Q: Can all patients receive a vaccine at the pharmacy?**

**A:** With the exception of the influenza vaccine, children under the age of 7 are not eligible to receive a vaccine at a pharmacy. Therefore, clinics are encouraged to stock respiratory vaccines and ensure their availability to pediatric patients whenever possible. Individuals aged 7 and over can receive a vaccine at a pharmacy. Please note children ages six months and up are able to receive the influenza vaccine at a pharmacy.

**Q: If a pharmacist still requests a prescription to administer a vaccine, what should I do?**

**A:** When a pharmacist requests a prescription for vaccines, include the phrase "to administer at pharmacy" or an equivalent term. For patients under 65 years old, consider adding "medically necessary" or specifying the patient's underlying condition on the prescription to address potential inquiries from the pharmacist.

**Q: Where can I direct my patients for more information about vaccine access?**

**A:** The Oregon Health Authority [provides information](#) on where patients can access vaccines and updates on insurance coverage. Health care leaders of institutions and clinics should also maintain updated information on their websites regarding vaccine availability/stock and appointment scheduling or upcoming vaccine clinics.

**Q: How can I stay updated on vaccine access and insurance coverage?**

**A:** This FAQ and the [OSBN Website \(www.oregon.gov/osbn\)](http://www.oregon.gov/osbn) will be updated as more information becomes available from the West Coast Health Alliance, the Oregon Board of Pharmacy, the Oregon Health Authority, and the Department of Consumer and Business Services. The WCHA will continue to evaluate new evidence and recommendations as they become available and is committed to sharing any updated assessments with our communities.