

Protocol for Respiratory Syncytial Virus (RSV) Vaccine

1. What's New

- A. In September of 2026, the West Coast Health Alliance (WCHA) issued immunization recommendations for the 2026-2027 respiratory virus season. These recommendations were informed by trusted national medical organizations, including the [American Academy of Pediatrics](#) (AAP), the [American College of Obstetricians and Gynecologists](#) (ACOG), and the [American Academy of Family Physicians](#) (AAFP). The WCHA believes that all recommended immunizations should be accessible to the people of our states and aims to ensure that public health recommendations are guided by safety, efficacy, transparency, access and trust.

2. Immunization Protocol

- A. Administer a single lifetime dose, IM, RSV vaccine to all adults ages 75 years and older.
- B. Administer a single lifetime dose, IM, RSV vaccine to persons ages 50 through 74 years of age if they are at increased risk of severe RSV disease, as described in Section 4.
- C. Administer a single lifetime dose, IM, RSV vaccine to pregnant patients at 32-36 weeks gestational age.
- D. RSV vaccine may be given with all ACIP- and WCHA-recommended adult vaccinations, including COVID-19 vaccines.

3. Vaccine Schedule ¹

	RSV immunization
Pregnancy	32 through 36 weeks gestational age ⁱ
Adults	All ≥ 75 years ⁱⁱ All 50 through 74 years with risk factors ^{ii, iii}

ⁱ Either immunization with nirsevimab/clesrovimab or maternal RSV vaccination is indicated to protect infants from severe RSV infection.

ⁱⁱ Adult RSV immunization recommendations are currently for a single lifetime dose. Those who have previously received a dose do not need a second dose.

ⁱⁱⁱ See Section 4 for additional information on risk factors for severe RSV disease in adults 50-74 years.

4. Additional Considerations for Use

- A. For additional information on risk factors for severe RSV disease in adults 50 through 74 years of age, see: <https://www.cdc.gov/rsv/hcp/vaccine-clinical-guidance/adults.html>.

5. Pregnancy and Lactation ²⁻⁴

- A. It is unknown if RSV vaccines are excreted in human milk.
- B. See current prescribing information additional considerations regarding pregnancy and lactation.

6. Warnings and Precautions ²⁻⁴

- A. Individuals with acute, moderate, or severe illness with or without fever should delay immunization until symptoms have improved.
- B. Individuals with an immunocompromising condition may experience a diminished immune response to the vaccine.
- C. See current prescribing information for more details about warnings, precautions, formulation, and contents.

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7. Contraindications²⁻⁴

- A. Severe allergic reaction (e.g., anaphylaxis) to a previous dose or to any vaccine component.
- B. See current prescribing information for details about contraindications.

8. Storage and Handling²⁻⁴

- A. Store medications according to [OAR 855-041-1036](#).
- B. See current prescribing information for additional details about storage and handling.

9. References

- 1. Consensus WCHA 2026-2027 Respiratory Virus Season Immunization Recommendations.
Available at:
<https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/IMMUNIZATIONPROVIDERRESOURCES/Documents/WCHARespiratorySeasRecommendations.pdf>
- 2. Abrysvo™. [Package insert]. October 2023. <https://www.fda.gov/media/168889/download>
- 3. Arexvy™. [Package insert]. June 2024.
<https://www.fda.gov/media/167805/download?attachment>
- 4. mRESVIA®. [Package insert]. October 2024.
<https://www.fda.gov/media/179005/download?attachment>