

Summary of Routinely Recommended Maternal Vaccines

Vaccine	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	
Tdap	Can be administered at any time												
COVID-19		Administer as soon as available	However, can be administered any time of the year to eligible individuals										
Influenza		Ideally administer early fall	However, can be administered any time while the virus is circulating										
RSV		Administer September through January in most of the continental U.S.*											



Tdap Vaccine

Vaccine Product: Any Tdap vaccine product may be administered.

Schedule: Administer a dose of Tdap, preferably during the early part of gestational weeks 27 through 36, during each pregnancy irrespective of the patient's prior Tdap vaccination history.

For more information, see [Committee Opinion: Update on Immunization and Pregnancy: Tetanus, Diphtheria, and Pertussis Vaccination](#).



COVID-19 Vaccine

Vaccine Product: Any COVID-19 vaccine product may be administered.

Schedule: Vaccination may occur in any trimester, and emphasis should be on vaccine receipt as soon as possible to maximize maternal and fetal health.

For more information, see [Practice Advisory: COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care](#).

These vaccines can be safely co-administered.



Influenza Vaccine

Vaccine Product: Only administer inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV) products.

Schedule: Administer a dose of IIV or RIV to people who are pregnant during any trimester or will be pregnant during influenza season.

Influenza vaccination should be given before the start of the influenza season, by the end of October, but vaccination at any time during the influenza season is encouraged to ensure protection during the period that virus is circulating in the community.

For more information, see [Practice Advisory: Influenza in Pregnancy: Prevention and Treatment](#).



RSV Vaccine

Vaccine Product: Only administer Pfizer's RSV vaccine (Abrysvo), approved as a one-time dose. Infant monoclonal antibody may be administered to the infant as an alternative to vaccinating during pregnancy and in subsequent pregnancies after a patient has received Abrysvo in a previous pregnancy.

Schedule: Administer a dose of Pfizer's RSV vaccine (Abrysvo) only between 32 through 36 weeks of gestation during September through January in most of the continental United States if the patient was not previously vaccinated.

*In jurisdictions with seasonality that differs from most of the continental United States, (eg, Alaska, jurisdictions with tropical climates) health care professionals should follow state, local, or territorial guidance on the timing of administration.

For more information, see [Practice Advisory: Maternal Respiratory Syncytial Virus Vaccination](#).

Additional vaccines may be needed based on ...

- Patient's age; health status; risk of exposure; and vaccination history such as hepatitis B, meningococcal vaccines, and pneumococcal vaccines. Visit ACOG's [Immunization Tools and Resources](#) for more information.
- For information on travel vaccines during pregnancy, visit the [Pregnant Travelers](#) webpage on the CDC Yellow Book website.