

COVID-19 Vaccine Reference Guide for all who are Immunocompromised

People who are immunocompromised are especially vulnerable to infections including COVID-19.

If you have any of the following medical conditions, you are considered moderately to severely immunocompromised and may benefit from an additional dose of COVID-19 vaccine.



This includes people who:

- » Are receiving active cancer treatment for tumors or cancers of the blood
- » Received an organ transplant and are taking medicine to suppress the immune system
- » Received a stem cell transplant within the last 2 years or are taking medicine to suppress the immune system
- » Have moderate or severe primary immunodeficiency (such as DiGeorge syndrome, Wiskott-Aldrich syndrome)
- » Have advanced or untreated HIV infection
- » Are receiving active treatment with high-dose corticosteroids or other drugs that may suppress the immune response

This list is not inclusive of all immunocompromising conditions, please speak with your medical provider to determine if additional doses would be beneficial to you.

If you are immunocompromised, check out the chart below to see how many doses you are eligible to receive to stay protected against COVID-19:

<i>If you got...</i>	Age Group	Primary Series	Should I get an ADDITIONAL DOSE?	Can I get a BOOSTER?
Pfizer	6 months through 4 years old	Three doses: First two doses administered 21 days apart; third dose 8 weeks after.	No additional primary dose at this time.	No, a booster is not authorized at this time.
	5–11 years old	Two doses administered 21 days apart	Yes, 28 days after your second shot.	Yes, an original monovalent Pfizer mRNA booster is recommended 3 months after the last dose to be up to date.
	12+ years old	Two doses administered 21 days apart	Yes, 28 days after your second shot.	Yes, one updated bivalent Pfizer mRNA booster dose is recommended 2 months after the last dose for people 12–17 to be up to date. Yes, one updated bivalent Pfizer or Moderna mRNA booster dose is recommended 2 months after the last dose for people 18 and older to be up to date.
Moderna	6 months through 11 years old	Two doses administered 28 days apart	Yes, you should get an additional dose 28 days after your second shot.	No, an mRNA booster is not authorized at this time for those who received Moderna as their primary series.
	12+ years old	Two doses administered 28 days apart	Yes, you should get an additional dose 28 days after your second shot.	Yes, one updated bivalent Pfizer mRNA booster dose is recommended 2 months after last dose for people 12–17 to be up to date. Yes, one updated bivalent Pfizer or Moderna mRNA booster dose is recommended 2 months after last dose for people 18 and older to be up to date.
Johnson & Johnson	18+ years old	One dose	Yes, you should get an additional dose with mRNA vaccine 28 days after 1st dose of J&J.	Yes, one updated bivalent Pfizer or Moderna mRNA booster dose is recommended 2 months after the last dose to be up to date.
Novavax	12+ years old	Two doses, administered 21 days apart	No additional primary dose at this time.	Yes, one updated bivalent Pfizer mRNA booster is recommended two months after the last dose to be up to date for people 12–17 years and older. Yes, one updated bivalent Pfizer or Moderna mRNA booster dose is recommended 2 months after the last dose for people 18 and older to be up to date.

Frequently Asked Questions

What's the difference between an additional vaccine dose and a booster vaccine dose?

An additional dose is for patients who completed a primary mRNA vaccine (Pfizer or Moderna) or viral vector vaccine (J&J) but did not have a strong enough immune response. A booster dose is for a patient when it's likely their immunity after the initial vaccine series waned over time.

Everyone over the age of 12 is now eligible for an updated/bivalent booster dose as long as it has been over 2 months since their last dose, whether it was a primary, additional, or booster dose. Following FDA's regulatory action, the Western States Scientific Safety Review Workgroup has weighed in to align with updated Centers for Disease Control and Prevention recommendations on additional booster doses.

What underlying medical conditions place you at a higher risk for severe illness from COVID-19?

People of any age with the conditions listed below are more likely to get severely ill from COVID-19.

COVID-19 vaccines (initial doses and boosters) and other preventive measures for COVID-19 are important, especially if you are older or have multiple or severe health conditions including those on this list. This list does not include all possible conditions that place you at higher risk of severe illness from COVID-19. If you have a condition not included here, talk to your health care provider about how best to manage your condition and protect yourself from COVID-19.

- » Cancer
- » Chronic kidney disease
- » Chronic liver disease
- » Chronic lung diseases
- » Dementia or other neurological conditions
- » Diabetes (type 1 or 2)
- » Down syndrome
- » Heart conditions
- » HIV infection
- » Immunocompromised state (weakened immune system)
- » Mental health conditions
- » Overweight and obesity
- » Pregnancy
- » Sickle cell disease or thalassemia
- » Smoking, current or former
- » Solid organ or blood stem cell transplant
- » Stroke or cerebrovascular disease, which affects blood flow to the brain
- » Substance use disorders
- » Tuberculosis

What is an updated/bivalent booster?

An updated/bivalent COVID-19 booster is a vaccine formula that both boosts immunity against the original coronavirus strain and also protects against the newer Omicron variants that account for most of the current cases. Updated boosters are intended to provide optimal protection against the virus and address waning vaccine effectiveness over time.

What is the rationale for reducing the booster interval—from five months to three months—for people ages 5–11 who are moderately or severely immunocompromised?

People who are moderately or severely immunocompromised may not develop protective immunity after a primary series, even when the recommended mRNA vaccine primary series is used. They are also more likely to lose protective immunity over time and might need to get a booster dose sooner. Early data from several small studies show that people who are moderately or severely immunocompromised often develop increased antibody levels again after a booster dose given at an interval shorter than 5 months. There was no evidence of an increased safety concern. Currently, there is rapid spread of COVID-19 in the United States, and exposures to infected people are hard to avoid. Therefore, providing a booster dose as soon as possible makes sense for those at highest risk for severe complications.

Will people who are moderately or severely immunocompromised need a doctor's note/prescription or other documentation to receive these doses?

No, individuals can self-identify and receive all doses anywhere vaccines are offered. This will help ensure there are not additional barriers to access for this population. If immunocompromised individuals have questions about their specific medical condition, they may discuss whether getting an additional dose is appropriate for them with their health care provider.

If I get a COVID-19 vaccine, do I still need to take other precautions?

Yes, even if you get vaccinated, you may still be required to wear a mask in some public indoor settings. Find more information on our [Masks and Face Coverings FAQ page](#). We also recommend you wash your hands often, stay six feet apart, and limit gatherings.

The COVID-19 vaccines work well, but they are not 100% effective. Some people may get COVID-19 even if they've been vaccinated. With the rise of more transmissible variants, it's important that all people take precautions such as wearing masks to reduce transmission of the virus.

More questions? Visit:
doh.wa.gov/covidbooster