

Healthcare Provider Toolkit: Preparing your patients for the fall and winter virus season

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Every year, influenza (flu), COVID-19, and Respiratory Syncytial Virus (RSV) cause hundreds of thousands of hospitalizations and thousands of deaths during the fall and winter virus season. In the United States, we now have more tools than ever before to help people protect themselves, their families, and communities, including:

- **Safe, updated immunizations** – For the first time ever, immunizations are available for all three major fall and winter respiratory diseases – flu, COVID-19, and RSV.
- **Widely available, effective treatments** – Treatments are available for flu and COVID-19 and can reduce severe illness, hospitalization, and death.
- **Testing** – Tests, some of which can be done at home, can quickly detect these respiratory viruses so patients don't delay treatment and other actions that can protect their family, friends, and coworkers.
- **Everyday actions** – Other tools like masking, physical distancing, washing hands, and improving airflow in the places where people live and work can provide an additional layer of protection.

Immunization against flu, COVID-19, and RSV remains the best way to safeguard against hospitalizations, long-term health impacts, and death. In August and September 2023, CDC made the following recommendations:

- Everyone 6 months and older should receive the seasonal 2023-2024 influenza vaccine and the updated 2023-24 COVID-19 vaccine.
- All infants should be protected against severe RSV either through vaccination of pregnant people 32 through 36 weeks of gestation (Pfizer RSVpreF only) from September through January, **or** through immunization of infants less than 8 months born during or who are entering their first RSV season with nirsevimab, a monoclonal antibody. In addition, some children aged 8 through 19 months at increased risk for severe RSV should receive nirsevimab when entering their second RSV season.
- Adults 60 and older may receive RSV vaccine if the provider and patient think it's right for them.

Multiple studies show healthcare providers are the most trusted source of health information for their patients. They are in the best position to ensure their patients receive accurate and actionable information, including recommended immunizations.

Educating patients about the **fall and winter virus season toolkit** will provide patients with a full set of tools to keep themselves and their families safe from respiratory diseases this season.

Before seeing the patient:

1. Review immunization history and recommendations based on age, underlying medical conditions, and other risk factors. Immunization recommendations are available on the CDC website for [pediatric patients](#) and [adults](#).
2. Assess whether the patient has risk factors that place them at higher risk for severe [flu](#) and [COVID-19](#) and should therefore receive prescription antiviral medications if they become ill.

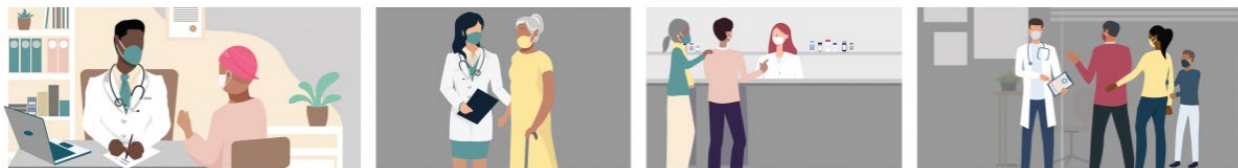
While seeing the patient:

1. Counsel the patient or caregiver that immunizations are safe and the most effective way they can protect themselves or their children against severe disease, hospitalization, and death from flu, COVID-19, and RSV this season. Offer recommended immunizations to patients or caregivers or refer them to where they can get vaccines. Let patients and caregivers know they may need immunizations during their next visit.
2. If a patient is eligible for COVID-19 or flu antiviral medications, explain the importance of testing and treatment early if they experience illness symptoms.
3. Explain how to use the other tools (testing, well-fitted mask, physical distancing, washing hands, and improving airflow or ventilation in the places the patient lives and works) and how these tools can help them and their families stay safe this season.

Immunization remains the most safe and effective way to protect patients against serious disease. Using these additional tools will also help increase protection against respiratory viruses.

How to talk to your patients about flu, COVID-19, and RSV immunizations

Many people have questions about the new or updated immunizations for flu, COVID-19, and RSV. As your patients' most trusted source of information on immunizations, you play a critical role in helping them understand the importance of immunizations and that immunizations are safe and effective.



[Talking to Recipients about COVID-19 Vaccination | CDC](#)

[Building confidence with COVID-19 vaccines | CDC](#)

[How to talk to your patients about flu | CDC](#)

[How to talk to adults 60 and older about RSV vaccination using shared clinical decision-making](#)

[How to talk to your patients about nirsevimab / maternal RSV vaccine – coming soon]

Prepare your practice for the fall and winter virus season

Educating staff on the new and updated flu, COVID-19, and RSV immunizations will help prepare your practice for the upcoming fall and winter virus season and build trust between you and your patients.



Provider Slide Deck

Updated (2023-2024 Formula) COVID-19 Vaccine Interim 2023-2024 COVID-19 Immunization Schedule for Persons 6 Months of Age and Older			
The following tables provide COVID-19 vaccination schedules based on age, health status, and product. For detailed guidance see Interim Clinical Considerations for Use of COVID-19 Vaccines CDC.			
Table 1a. For people who are NOT moderately or severely immunocompromised ^a			
2023-24 Moderna COVID-19 Vaccine Vaccine type: mRNA. Do NOT use any previously available Moderna COVID-19 vaccine products.			
Age	COVID-19 Vaccination History ^b (regardless of COVID-19 vaccine formula)	2023-24 Vaccine Schedule	Administer
6 months through 4 years	Unvaccinated (0 doses)	Give a 2-dose initial series. Administer: • Dose 1 now • Dose 2 at least 4-8 weeks after Dose 1 ^c	0.25 mL/25 µg
	1 previous dose of any Moderna COVID-19 Vaccine (Dose 1) ^d	Give Dose 2 at least 4-8 weeks after the last dose ^e	From single-dose vial with dark blue cap and green label
	2 or more doses Moderna COVID-19 Vaccine, NOT including at least 1 dose of 2023-24 vaccine ^f	Give 1 dose at least 8 weeks (2 months) after the last dose	Intramuscular (IM) injection
5 through 11 years	2 or more doses Moderna COVID-19 Vaccine, INCLUDING at least 1 dose of 2023-24 vaccine ^g	No further doses are indicated	
	Unvaccinated (0 doses)	Give 1 dose now	0.25 mL/25 µg
	Any number of previous doses COVID-19 vaccine, NOT including at least 1 dose of 2023-24 vaccine	Give 1 dose at least 8 weeks (2 months) after the last dose	From single-dose vial with dark blue cap and green label Intramuscular (IM) injection
12 years and older	Any number of previous doses COVID-19 vaccine, INCLUDING at least 1 dose of 2023-24 vaccine	No further doses are indicated	
	Unvaccinated (0 doses)	Give 1 dose now	0.5 mL/50 µg
	Any number of previous doses COVID-19 vaccine, NOT including at least 1 dose of 2023-24 vaccine	Give 1 dose at least 8 weeks (2 months) after the previous dose	From single-dose vial with dark blue cap and blue label Intramuscular (IM) injection
	Any number of previous doses COVID-19 vaccine, INCLUDING at least 1 dose of 2023-24 vaccine	No further doses are indicated	

^a Persons with a recent SARS-CoV-2 infection may consider delaying vaccination by 3 months from symptom onset or positive test (if infection was asymptomatic).

^b COVID-19 vaccination history includes previous receipt of doses of original mRNA or inactivated COVID-19 vaccine, or a combination of the two, unless otherwise specified.

^c CDC is recommending a minimum 4-week interval between COVID-19 vaccine doses. However, if the person has a medical condition that may increase the risk of severe illness or hospitalization, a longer interval may be used.

^d A 0.25 mL dose of the 2023-24 vaccine.

^e If the person has a medical condition that may increase the risk of severe illness or hospitalization, a longer interval may be used.

^f People who are recommended to receive a booster COVID-19 vaccine for health care workers, children ages 6 months-4 years, and people who are moderately or severely immunocompromised should receive a booster COVID-19 vaccine at the following recommended intervals: at least 8 weeks (2 months) after the last dose of any COVID-19 vaccine, or at least 8 weeks (2 months) after the last dose of any COVID-19 vaccine, or at least 8 weeks (2 months) after the last dose of any COVID-19 vaccine, or at least 8 weeks (2 months) after the last dose of any COVID-19 vaccine.

^g For children who have received 1 Moderna and 1 Pfizer-BioNTech vaccine of any formulation, follow a 2-dose schedule. A third dose of either Moderna vaccine or Pfizer-BioNTech vaccine is possible administration 8 weeks after the second dose.

09/22/2023 COVID-19

[Updated COVID-19 Vaccine Schedule](#)

Other vaccination materials for providers:

[U.S. COVID-19 Vaccine Product Information | CDC](#)

RSV vaccines for older adults

[Healthcare Provider Fact Sheet: RSV Vaccination for Adults 60 and Older | CDC](#)

[Healthcare Providers: RSV Vaccination for Adults 60 Years of Age and Over | CDC](#)

RSV immunizations for infants and young children

[Nirsevemab Visual Guide | AAP](#)

[Healthcare Providers: RSV Immunization for Children 19 Months and Younger | CDC](#)

[Nirsevimab Frequently Asked Questions | aap.org](#)

[Respiratory Syncytial Virus \(RSV\) Prevention | aap.org](#)

RSV vaccines for pregnant people: Pfizer RSV PreF only

[Healthcare Providers: RSV Vaccination for Pregnant People | CDC](#)

[Maternal Respiratory Syncytial Virus Vaccination | ACOG](#)

Vaccine Standing Orders

[Vaccine Standing Orders for Healthcare Providers | immunize.org](#)

Coadministration of flu, COVID-19, and older adult RSV vaccines

Flu, COVID-19, and RSV vaccines may be co-administered (given at the same visit). Co-administration of these vaccines might be especially important when the patient has risk factors for severe respiratory illness (including but not limited to advanced age, cardiopulmonary disease, immunocompromising conditions, and residence in a long-term care facility) and there might not be an opportunity to vaccinate the patient with all of their recommended vaccines in the near future.

To optimize protection for the fall and winter virus season, providers should consider offering the patient all recommended respiratory virus vaccines during their current visit. Patients should be aware that they may experience more side effects, like fever and fatigue, if multiple vaccines are given together; however, these side effects are generally mild or moderate and only last a day or two.

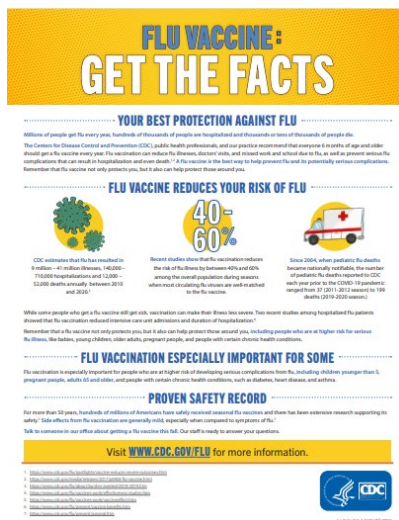
Current evidence from multiple studies supports the safety of co-administering flu and COVID-19 vaccines. There are fewer data on co-administering RSV with other vaccines; however, in clinical trials, coadministration of RSV and flu vaccines was safe. For patients at high risk of becoming seriously ill from

one of these diseases, the benefits of timely protection from coadministration of more than one vaccine likely outweigh the possible risks of increased side effects.

If the provider is confident there will be additional opportunities to vaccinate the patient, and the patient prefers to receive these vaccines during different visits, there is no minimum wait period between these vaccines.

The most important thing is that patients receive all their recommended vaccines in a timely way to help protect them against these major respiratory diseases this fall and winter virus season.

Print Materials for Patients



**FLU VACCINE:
GET THE FACTS**

YOUR BEST PROTECTION AGAINST FLU

Millions of people get the flu every year. Thousands of thousands of people are hospitalized and tens of thousands die.

The Centers for Disease Control and Prevention (CDC), public health professionals, and our practice recommend that everyone 6 months of age and older should get the vaccine every year. The vaccination can reduce flu illness, doctor visits, and missed work and school due to flu, as well as prevent serious flu complications that can result in hospitalization and even death. *A flu vaccine is the best way to help yourself and your community reduce complications. Remember that the vaccine not only protects you, but it also can help protect those around you.

FLU VACCINE REDUCES YOUR RISK OF FLU

40-60%

CDC estimates that flu has resulted in 8 million - 41 million flu cases, 140,000 - 710,000 hospitalizations and 12,000 - 52,000 deaths annually between 2010 and 2020.*

Recent studies show that flu vaccination reduces the risk of flu illness by between 40% and 60% among the overall population during seasons when most circulating flu viruses are well matched to the flu vaccine.

Since 2014, when publicly flu deaths became nationally notifiable, the number of deaths reported to CDC each year prior to the COVID-19 pandemic (September 17, 2019 - 2020 season) is 198 deaths (2019-2020 season).

When some people who get a flu vaccine still get sick, vaccination can make their illness less severe. Two recent studies among hospitalized patients showed that flu vaccination reduced intensive care unit admissions and duration of hospitalization.*

Remember that the vaccine not only protects you, but it also can help protect those around you, including people who are at higher risk for serious flu illness. See below, among children, older adults, pregnant people, and people with certain chronic health conditions.

FLU VACCINATION ESPECIALLY IMPORTANT FOR SOME


The vaccination is especially important for people who are at higher risk of developing serious complications from flu, including children younger than 5, pregnant people, adults 65 and older, and people with certain chronic health conditions, such as diabetes, heart disease, and asthma.

PROVEN SAFETY RECORD

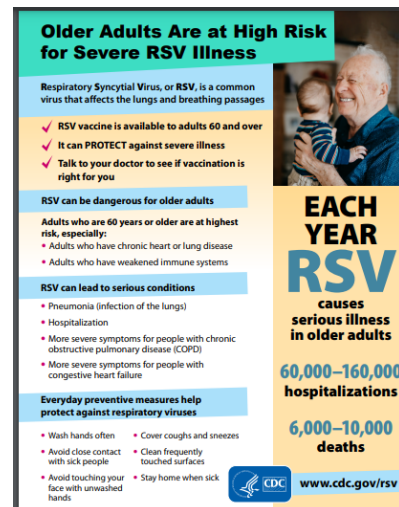
For more than 50 years, hundreds of millions of Americans have safely received seasonal flu vaccines and there has been extensive research supporting its safety. Side effects from the vaccination are generally mild, especially when compared to symptoms of flu.

Talk to your doctor or your local health department about getting a flu vaccine this fall. Our staff is ready to answer your questions.

Visit www.cdc.gov/flu for more information.



Last updated: August 2022



Older Adults Are at High Risk for Severe RSV Illness

Respiratory Syncytial Virus, or RSV, is a common virus that affects the lungs and breathing passages.

✓ RSV vaccine is available to adults 60 and over
✓ It can PROTECT against severe illness
✓ Talk to your doctor to see if vaccination is right for you

RSV can be dangerous for older adults

Adults who are 60 years or older are at highest risk, especially:

- Adults who have chronic heart or lung disease
- Adults who have weakened immune systems

RSV can lead to serious conditions

- Pneumonia (infection of the lungs)
- Hospitalization
- More severe symptoms for people with chronic obstructive pulmonary disease (COPD)
- More severe symptoms for people with congestive heart failure


Everyday preventive measures help protect against respiratory viruses

- Wash hands often
- Avoid close contact with sick people
- Avoid touching your face with unwashed hands
- Cover coughs and sneezes
- Clean frequently touched surfaces
- Stay home when sick

EACH YEAR RSV causes serious illness in older adults

60,000-160,000 hospitalizations

6,000-10,000 deaths

 www.cdc.gov/rsv

Flu materials for patients | CDC



Protect yourself and your baby from COVID-19. Get vaccinated.

- COVID-19 vaccination is recommended for people who are pregnant, breastfeeding, trying to get pregnant now, or might become pregnant in the future.
- There is currently no evidence that any vaccines, including COVID-19 vaccines, cause problems with becoming pregnant.
- Getting a COVID-19 vaccine while pregnant can protect you from getting very sick from COVID-19.
- If you are pregnant or breastfeeding, COVID-19 vaccination builds antibodies that can transfer to and help protect your baby.
- The COVID-19 vaccine has gone through the same strict development studies that all vaccines go through to ensure they are safe.

Ask your healthcare provider about the COVID-19 vaccine.

 cdc.gov/coronavirus

RSV in older adults | CDC

COVID-19 materials for patients | CDC

Vaccine or Immunization Information Sheets

[Inactivated Influenza Vaccine Information Statement | CDC](#)

[Live Intranasal Influenza Vaccine Information Statement | CDC](#)

[COVID-19 Vaccine Information Sheet – coming soon]

[RSV \(Respiratory Syncytial Virus\) Preventive Antibody Immunization Information Statement | CDC](#)

[RSV Vaccine Information Sheet for Adults 60 and older](#)

[RSV Vaccine Information Sheet for Pregnant People](#)

Comprehensive Clinical Guidance

Clinician resource hub for vaccines, testing, and treatment for flu, COVID-19, and/or RSV. CDC webpages are regularly updated to reflect the most current guidance and recommendations for clinicians.

Vaccines

[COVID-19 vaccination clinical guidance](#)

[Influenza vaccination clinical guidance](#)

[RSV Clinical considerations | CDC](#)

Testing and Treatment

[Interim Clinical Considerations for COVID-19 Treatment in Outpatients | CDC](#)

[COVID-19 Treatment Guidelines | NIH](#)

[Influenza Antiviral Medications: Summary for Clinicians | CDC](#)

[RSV Clinical considerations | CDC](#)

FAQs

[Frequently Asked Questions about COVID-19 vaccines | CDC](#)

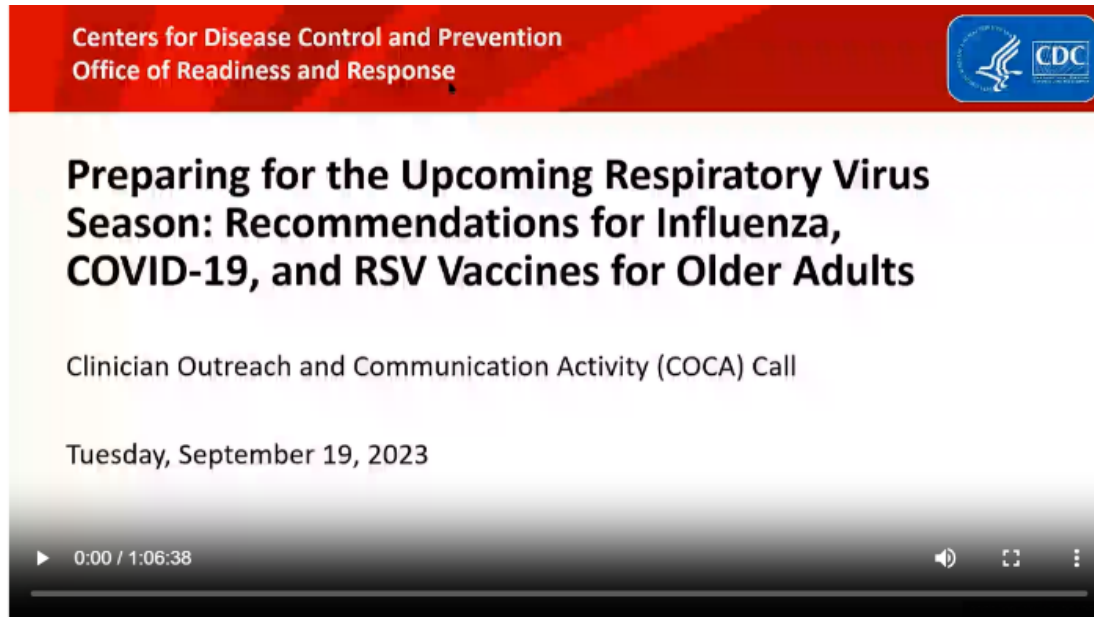
[Frequently Asked Questions About RSV Vaccine for Adults | CDC](#)

[Frequently Asked Questions About RSV Immunization for Children 19 Months and Younger | CDC](#)

[Frequently Asked Questions about RSV Vaccination for Pregnant People | CDC](#)

Educational Videos and Webinars for Providers

CDC regularly produces educational videos and webinars to provide healthcare providers with timely and actionable information on disease activity, new clinical guidance, and immunization recommendations.



[Preparing for the Upcoming Respiratory Virus Season: Recommendations for Influenza, COVID-19, and RSV Vaccines for Older Adults | CDC](#)

Other CDC videos:

[COVID-19 Vaccine Training Module \(cdc.gov\)](#)

[How to recommend flu vaccines | CDC](#)

[2023-2024 Recommendations for Influenza Prevention and Treatment in Children: An Update for Pediatric Providers | CDC](#)

[Current Issues in Immunization Webinar \(CIW\) | CDC](#)

[How to recommend flu vaccines | CDC](#)

[Clinical Vaccination Guidance for Pregnant People | CDC](#)

[You Call the Shots: Vaccines Web-based Training Course | CDC](#)