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Committee on Infectious Diseases

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AMERICAN ACADEMY OF PEDIATRICS

POLICY STATEMENT

Organizational Principles to Guide and Define the Child Health System and/or Improve the Health of All Children

Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement

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INTRODUCTION

This policy statement updates the recommendations of the American Academy of Pediatrics (AAP)¹ for the use of coronavirus disease 2019 (COVID-19) vaccines in the prevention of severe COVID-19 in children. These COVID-19 vaccine recommendations may change in future seasons or as additional variants emerge. These recommendations for the use of 2025-2026 COVID-19 vaccine are contingent upon the approval by the US Food and Drug Administration of updated COVID-19 vaccine products.

COVID-19 continues to be a cause of hospitalization^{2,3} and death⁴ in the pediatric population. COVID-19 vaccines are safe⁵⁻¹² and effective¹³ in protecting individuals and populations against serious outcomes associated with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection, including post-acute sequelae of SARS-CoV-2 infection (PASC)¹⁴ and multisystem inflammatory syndrome in children (MIS-C).¹⁵

RECOMMENDATIONS

- Infants and children 6 through 23 months of age are at high risk for severe COVID-19.²⁻⁴ The AAP recommends all infants and children in this age group who do not have contraindications* receive 2025-2026 COVID-19 vaccine, as follows:
 - Those who are previously unvaccinated should receive an initial vaccine series.

* COVID-19 vaccine contraindication includes a history of severe allergic reaction (eg, anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine.

- Those who are previously vaccinated but did not complete their initial vaccine series should complete their initial vaccine series.
- Those who are previously vaccinated and completed their initial series should receive a single dose. This dose should be administered at least 8 weeks after the last dose was received.
- Those with a previous asymptomatic infection or symptomatic disease caused by SARS-CoV-2 should also receive COVID-19 vaccination.
- Children 6 months through 18 years of age who are moderately or severely immunocompromised require 2 or more doses of age-appropriate 2025-2026 COVID-19 vaccine depending on previous vaccination status.¹⁶ Refer to the [AAP Recommended Child and Adolescent Immunization Schedule](#) for dosing recommendations.
- The AAP recommends a single dose of age-appropriate 2025-2026 COVID-19 vaccine for all children and adolescents 2 through 18 years of age in the following risk groups (as described in Table 1) regardless of prior COVID-19 vaccination status:
 - Persons at high risk of severe COVID-19²
 - Residents of long-term care facilities or other congregate settings
 - Persons who have never been vaccinated against COVID-19
 - Persons whose household contacts are at high risk for severe COVID-19^{2,17}
- Children 2 through 18 years of age not included in the risk groups above whose parent or guardian desires their protection from COVID-19 should be offered a single dose of age-appropriate 2025-2026 COVID-19 vaccine.¹⁸ This dose should be administered at least 8 weeks after the last dose was received.
- Any available COVID-19 vaccine appropriate by age and health status that is approved by the US Food and Drug Administration through a biologics license application or authorized through emergency use authorization can be used. The most updated version of the COVID-19 vaccine that is available should be used.

For additional clinical guidance on COVID-19, refer to the [Red Book: 2024 Report of the Committee on Infectious Diseases](#). For more information on the dosing and administration of COVID-19 vaccines, storage and handling, reporting, and patient education, visit <https://www.aap.org/en/patient-care/covid-19/>.

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The guidance in this statement does not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.

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Table 1. Populations Recommended for Vaccination Including Those at High Risk for Severe COVID-19 Among Children Aged 6 Months Through 18 Years*

Population Characteristics	
Infants and children 6 through 23 months of age	
Residents of long-term care facilities or other congregate settings ^a	
Children who have never been vaccinated against COVID-19	
Infants and children with household contacts who are at high risk for severe COVID-19 ^{2,7}	
Underlying Condition or Treatment With Common Examples^b	
Chronic pulmonary disease	Asthma/reactive airway disease Chronic lung disease of prematurity Compromised respiratory function (eg, abnormality of airway, tracheostomy, or ventilator dependent)
Cardiovascular disease	Congenital heart disease
Gastrointestinal disorders	Feeding tube dependent Inflammatory bowel disease
Hepatic disease	Chronic liver disease
Hematologic disease	Sickle cell disease
Metabolic disorders	Diabetes mellitus
Obesity	BMI \geq the 95 th percentile in children
Neurologic and neurodevelopmental conditions	Cerebral palsy Epilepsy Intellectual developmental disorder Compromised mobility (eg, wheelchair dependent)
Immunosuppressive conditions ^c	Receipt of immunosuppressive therapy Primary immunodeficiency HIV infection Receipt of hematopoietic cell transplant or solid organ transplant
Rheumatologic, autoimmune disease	Systemic lupus erythematosus Juvenile idiopathic arthritis

^a Congregate care settings refer to places where individuals live together in structured environments outside of their home, including residential treatment facilities, group homes, emergency shelters, juvenile detention centers, etc.

^b List of examples is not exhaustive.

^c Children who are **moderately or severely immunocompromised require 2 or more doses** of COVID-19 vaccine. Additional doses may be administered at ≥ 2 month intervals, informed by the clinical judgment of a health care provider and personal preference and circumstances.¹⁶ Refer to [AAP Recommended Child and Adolescent Immunization Schedule](#) for dosing guidance.

* Adapted from Free RJ, Patel K, Taylor CA, et al. Hospitalization for COVID-19 and risk factors for severe disease among children: 2022-2024. *Pediatrics*. Published online July 3, 2025. DOI: 10.1542/peds.2025-072788.²

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