

Respiratory Virus Guidance

What to know

CDC's Respiratory Virus Guidance provides practical recommendations and information to help people lower health risks posed by a range of common respiratory viral illnesses, including COVID-19, flu, and RSV.

Overview

Each year, respiratory viruses are responsible for millions of illnesses and thousands of hospitalizations and deaths in the United States. In addition to the virus that causes COVID-19, there are many other types of respiratory viruses, including flu and respiratory syncytial virus (RSV). The good news is there are actions you can take to help protect yourself and others from health risks caused by respiratory viruses.

Prevention strategies

Core prevention strategies



CDC recommends that all people use core prevention strategies. These are important steps you can take to protect yourself and others:

- Stay up to date with [immunizations](#)
- Practice good [hygiene](#) (practices that improve cleanliness)
- Take [steps for cleaner air](#)
- When you may have a respiratory virus:
 - Use [precautions to prevent spread](#)
 - Seek health care promptly for testing and/or treatment if you have [risk factors for severe illness](#); [treatment](#) may help lower your risk of severe illness

CDC offers separate, specific guidance for healthcare settings ([COVID-19](#), [flu](#), and [general infection prevention and control](#)). Federal civil rights laws may require reasonable modifications or reasonable accommodations in various circumstances. Nothing in this guidance is intended to detract from or supersede those laws.

Additional prevention strategies



Additional prevention strategies you can choose to further protect yourself and others include:

- [Masks](#)
- [Physical distancing](#)
- [Tests](#)

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).
 - Many factors can make it more likely for someone to become very sick from a respiratory virus. In addition to this guidance, there are several specific considerations for people with certain [risk factors for severe illness \(young children, older adults, people with weakened immune systems, people who are pregnant, and people with disabilities\)](#).
- You may not be aware of the things that can make others more vulnerable to serious illness. Using the core prevention strategies will provide a degree of protection regardless. If you are unsure about the health condition or risk status of those around you, the most protective option is choosing to use additional prevention strategies, like masking, physical distancing, and testing.

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Immunizations

What to know

Immunizations are a core prevention strategy to lower risk from respiratory viruses. Core prevention strategies are important steps you can take to protect yourself and others from respiratory viruses.

Recommendation

Stay up to date with the [immunizations that are recommended for you](#).

- For most people that means getting a current flu and COVID-19 vaccine.
- Adults ages 60 years and older should talk to their healthcare provider about whether an RSV vaccine is right for them.
- To prevent severe RSV disease in infants, CDC recommends either the pregnant mother gets an RSV vaccine, or the infant gets an immunization with an RSV monoclonal antibody. Most infants will not need both.

How it works

Immunizations help prepare your body to defend itself from viruses and severe illness. Some immunizations teach your immune system what the virus looks like so it can prepare to protect against it. Other immunizations directly provide you with antibodies to protect you from the virus. Getting vaccinated can reduce your chances of getting infected to some degree, but its main strength is preventing severe illness and death. More and more evidence suggests that the COVID-19 vaccine can also lower your chances of developing Long COVID.

Steps you can take

Individuals can

- Talk with a healthcare provider to make sure you are up to date on vaccines.
- Review the [vaccine schedule](#) to become familiar with the immunizations recommended for you and when you should get them.
- Visit www.vaccines.gov to locate flu and COVID-19 vaccines near you.
- Learn more about [how vaccine recommendations](#) are made.
- Talk to your friends and family about the benefits of getting vaccinated.

Organizations can

- Organize vaccination clinics at workplaces. This helps with staff accessing vaccines.
- Partner with trusted community members (such as doctors, nurses, health educators, or faith-based and community leaders) and have them attend vaccination events to share accurate information about vaccines.
- Provide employees with paid time off to get vaccinated and recover from any side effects.

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

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Hygiene

What to know

Hygiene (practices that improve cleanliness) is a core prevention strategy to lower risk from respiratory viruses. Core prevention strategies are important steps you can take to protect yourself and others from respiratory viruses.

Recommendation

Practice good hygiene by covering your coughs and sneezes, washing or sanitizing your hands often, and cleaning frequently touched surfaces.

How it works

Covering your coughs and sneezes limits the spread of germs to protect others. Handwashing with soap removes germs from your hands, making them less likely to infect your respiratory system when you touch your eyes, nose, or mouth. If soap and water are not available, using a hand sanitizer with at least 60 percent alcohol can kill these germs. To remove germs and dirt on surfaces, use household cleaners that contain soap or detergent.

Steps you can take

Individuals can

- Cover your mouth and nose with a tissue when you [cough or sneeze](#). Throw used tissues in the trash. If you don't have a tissue, cough or sneeze into your elbow, not your hands.
- Learn and use [proper handwashing technique](#).
- [Teach children](#) the correct way to wash their hands.
- [Clean](#) frequently touched surfaces, such as countertops, handrails, and doorknobs regularly.

Organizations can

- Order [free hygiene posters](#) and display them in highly visible areas.
- Make sure facilities are equipped with soap, water, and a way to dry hands (for example, paper towels or a hand dryer).
- Place hand sanitizer dispensers with at least 60 percent alcohol near frequently touched surfaces and in areas where soap and water are not easily accessible, such as near elevators, shared equipment, and building entrances and exits.
- [Clean](#) frequently touched surfaces, such as countertops, handrails, and doorknobs regularly.

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

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Taking Steps for Cleaner Air

What to know

Taking steps for cleaner air is a core prevention strategy to lower risk from respiratory viruses. Core prevention strategies are important steps you can take to protect yourself and others from respiratory viruses.

Recommendation

Take [steps for cleaner air](#). This can mean bringing in fresh outside air, purifying indoor air, or gathering outdoors. Virus particles do not build up in the air outdoors as much as they do indoors.

How it works

Some germs spread in the air between people. This happens more easily in indoor, crowded spaces with poor airflow. To reduce the risk of exposure, it helps to improve air quality by increasing airflow, cleaning the air, or opting to gather outdoors.

Steps you can take

Individuals can

- Bring as much fresh air into your home as possible by opening doors and windows and/or using exhaust fans.
- If your home has a central heating, ventilation, and air conditioning system (HVAC, a system with air ducts that go throughout the home) that has a filter, set the fan to the "on" position instead of "auto" when you have visitors and use pleated filters. Change your filter every three months or according to the manufacturer's instructions.
- Use a portable high-efficiency particulate air (HEPA) cleaner.
- Move activities outdoors, where airflow is best.
- Use CDC's [Interactive Home Ventilation Tool](#) to see how virus particle levels change as you adjust ventilation settings.

Organizations can

- Ensure existing HVAC systems are providing at least the minimum outdoor air ventilation requirement in accordance with ventilation design codes. Applicable codes are based on the year of building construction or latest renovation and intended building occupancy.
- Aim for 5 or more air changes per hour (ACH) of clean air. This can be achieved through any combination of central ventilation system, natural ventilation, or additional devices that provide equivalent ACH to your existing ventilation.

Key times for prevention

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- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

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Preventing Spread of Respiratory Viruses When You're Sick

What to know

Taking steps to prevent the spread of respiratory viruses when you are sick is a core prevention strategy to lower risk from respiratory viruses. Core prevention strategies are important steps you can take to protect yourself and others from respiratory viruses.

Recommendation

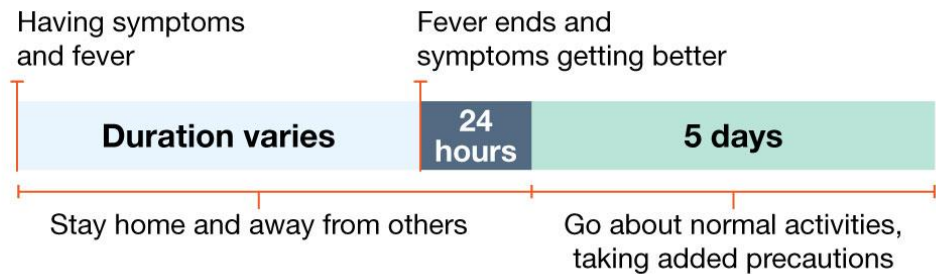
When you may have a respiratory virus...

- Stay home and away from others (including people you live with who are not sick) if you have respiratory virus symptoms that aren't better explained by another cause. These symptoms can include fever, chills, fatigue, cough, runny nose, and headache, among others.*
- You can go back to your normal activities when, for at least 24 hours, both are true:
 - Your symptoms are getting better overall, **and**
 - You have not had a fever (and are not using fever-reducing medication).
- When you go back to your normal activities, take added precaution over the next 5 days, such as taking additional [steps for cleaner air](#), [hygiene](#), [masks](#), [physical distancing](#), and/or [testing](#) when you will be around other people indoors. This is especially important to protect people with factors that increase their risk of severe illness from respiratory viruses. This is especially important to protect people with factors that increase their risk of severe illness from respiratory viruses.
 - Keep in mind that you may still be able to spread the virus that made you sick, even if you are feeling better. You are likely to be less contagious at this time, depending on factors like how long you were sick or how sick you were.
 - If you develop a fever or you start to feel worse after you have gone back to normal activities, stay home and away from others again until, for at least 24 hours, both are true: your symptoms are improving overall, and you have not had a fever (and are not using fever-reducing medication). Then take added precaution for the next 5 days.

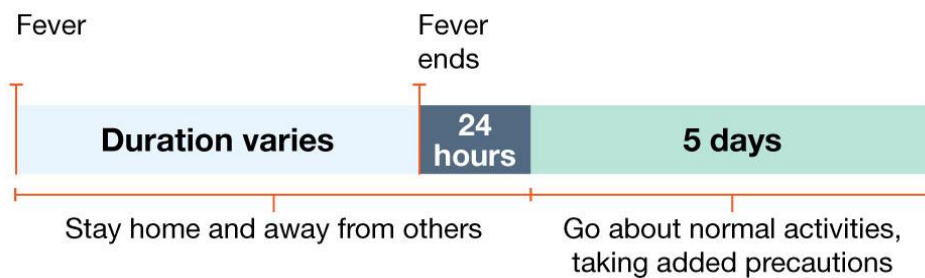
Examples

For illustrative purposes, not to scale

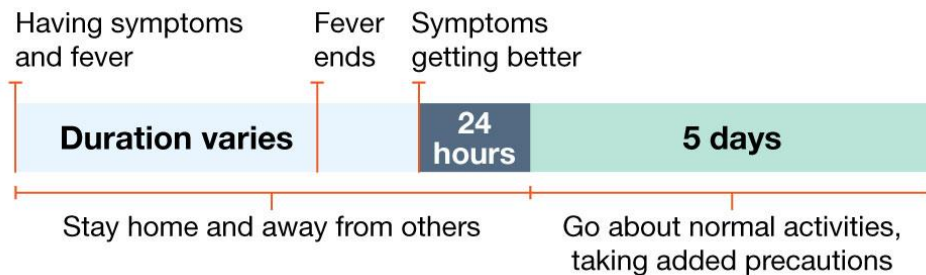
Example 1: Person with fever and symptoms.



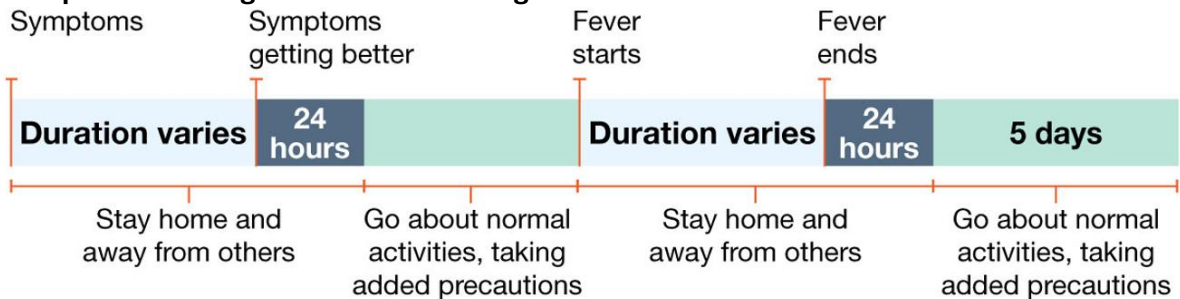
Example 2: Person with fever but no other symptoms.



Example 3: Person with fever and other symptoms, fever ends but other symptoms take longer to improve.



Example 4: Person gets better and then gets a fever.



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If you never had symptoms but tested positive for a respiratory virus

You may be contagious. For the next 5 days: take added precaution, such as taking additional [steps for cleaner air](#), [hygiene](#), [masks](#), [physical distancing](#), and/or [testing](#) when you will be around other people indoors. This is especially important to protect people with factors that increase their risk of severe illness from respiratory viruses.

How it works

When you have a respiratory virus infection, you can spread it to others. How long someone can spread the virus depends on different factors, including how sick they are (severity) and how long their illness lasts (duration). This is not the same for everyone.

When, for at least 24 hours, your symptoms are getting better overall and you have not had a fever (and are not using fever-reducing medication), you are typically less contagious, but it still takes more time for your body to fully get rid of the virus. During this time, you may still be able to spread the virus to others. Taking precautions for the next 5 days can help reduce this risk. After this 5-day period, you are typically much less likely to be contagious. However, some people, especially people with weakened immune systems, can continue to spread the virus for a longer period of time. For COVID-19, taking an [antigen](#) test can help you know how likely you are to spread the virus. A positive test tends to mean it is more likely that you can spread the virus to others.

Steps you can take*Individuals can*

- Consider using additional prevention tools, such as taking [steps for cleaner air](#), being diligent about [hygiene](#), and using [masks](#) when you're home sick to protect others in your home. This can be especially helpful if you do not have space at home to stay entirely away from others.
- Monitor your symptoms. If you have an emergency warning sign (like trouble breathing or chest pain), seek emergency medical care immediately.

Organizations can

- Advise people to stay home if they are sick.
- Provide employees with paid time off and develop flexible leave and telework policies to support workers to stay home if sick or to care for sick family members.
- Adopt flexible cancellation or refund policies for customers who are sick.

*Symptoms may include but are not limited to chest discomfort, chills, cough, decrease in appetite, diarrhea, fatigue (tiredness), fever or feeling feverish, headache, muscle or body aches, new loss of taste or smell, runny or stuffy nose, sneezing, sore throat, vomiting, weakness, wheezing.

Treatment of Respiratory Viruses

What to know

Treatment is a core prevention strategy to lower risk from respiratory viruses. Core prevention strategies are important steps you can take to protect yourself and others from respiratory viruses.

Recommendation

Seek health care right away for [testing](#) and/or treatment if you believe you may have a respiratory virus (if you feel sick or tested positive for one) and you have [risk factors for severe illness](#). If you have flu or COVID-19, treatment may be an option to make your symptoms less severe and shorten the time you are sick. Treatment needs to be started within a few days of when your symptoms begin.

How it works

Treatments for COVID-19 and for flu can lessen symptoms and shorten the time you are sick. They also may reduce the risk of complications, including those that can result in hospitalization. For people with [risk factors for severe illness](#) early treatment can mean having milder illness.

Steps you can take

Individuals can

- Know the treatment options for [flu](#) and [COVID-19](#) before you get sick.
- Talk with a healthcare provider about planning to access treatment in advance of when you might need it.
- Talk with friends and family about how antiviral treatment could help reduce their chances of being hospitalized or dying from respiratory viruses like COVID-19 and flu.
- Take all treatments as prescribed.
- Talk to a healthcare provider about any questions you have about treatments.

Organizations can

- Share educational materials about respiratory virus treatment options:
 - [Flu](#)
 - [COVID-19](#)
- Provide employees with paid time off to seek treatment for a respiratory virus, as needed.

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

Masks and Respiratory Viruses Prevention

What to know

Wearing a mask is an additional prevention strategy that you can choose to further protect yourself and others.

An additional prevention strategy to further protect yourself and others

Wearing a [mask](#) can help lower the risk of respiratory virus transmission. When worn by a person with an infection, masks reduce the spread of the virus to others. Masks can also protect wearers from breathing in infectious particles from people around them. Different masks offer different levels of protection. Wearing the most protective one you can comfortably wear for extended periods of time that fits well (completely covering the nose and mouth) is the most effective option.

How it works

Generally, masks can help act as a filter to reduce the number of germs you breathe in or out. Their effectiveness can vary against different viruses, for example, based on the size of the virus. When worn by a person who has a virus, masks can reduce the chances they spread it to others. Masks can also protect wearers from inhaling germs; this type of protection typically comes from better fitting masks (for example, N95 or KN95 respirators).

There are many [different types of masks](#) that have varying abilities to block viruses depending on their design and how well they fit against your face. Cloth masks generally offer lower levels of protection to wearers, surgical/disposable masks usually offer more protection, international filtering facepiece respirators (like KN95 respirators) offer even more, and the most protective respirators are NIOSH Approved® filtering facepiece respirators (like N95® respirators).

Steps you can take

Individuals can

- When choosing to wear a mask, choose the most protective type you can. Determine how well it fits. Gaps can let air leak in and out. Check for gaps by cupping your hands around the outside edges of the mask. If the mask has a good fit, you will feel warm air come through the front of the mask and may be able to see the mask material move in and out with each breath.
- Learn about [proper technique](#) for wearing an N95 respirator.

Organizations can

- Provide free, high-quality masks to your workforce or visitors in times of higher respiratory viral spread.

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

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Testing and Respiratory Viruses

What to know

Testing is an additional prevention strategy that you can choose to assist in making decisions to further protect yourself and others.

An additional prevention strategy to further protect yourself and others

Testing for respiratory viruses can help you decide what to do next, like getting [treatment](#) to reduce your risk of severe illness and taking steps to lower your chances of spreading a virus to others. There are various types of tests for respiratory virus infections. Antigen tests ("self-tests" or "rapid tests") usually return results quickly (around 15 minutes). PCR tests are normally conducted by a healthcare provider. Although antigen tests are usually faster, they are not as good at detecting viruses as PCR tests. This means that you might get a negative result with an antigen test, but actually be infected with the virus.

How it works

Tests can help you find out if you are currently infected with a certain respiratory virus. While testing doesn't change how likely you are to catch or spread respiratory viruses, or how severe your illness might be, it can provide useful information to help you make prevention or treatment choices.

Steps you can take

Individuals can

- Plan in advance of any illness so you can be ready to get tested quickly, particularly if you are someone who could benefit from treatment for respiratory viruses.
- [Order](#) free COVID-19 antigen tests through the U.S. Postal Service or purchase them from many retailers.
- Antigen tests can be used for screening before gathering with others, especially to help protect people in your life who have [risk factors for severe illness](#). However, false negatives are possible; false positives are uncommon.

Organizations can

- Provide employees with paid time off to seek testing for respiratory viruses, as needed.

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

Physical Distancing and Respiratory Viruses

What to know

Physical distancing is an additional prevention strategy that you can choose to further protect yourself and others.

An additional prevention strategy to further protect yourself and others

Putting physical distance between yourself and others can help lower the risk of spreading a respiratory virus. There is no single number that defines a "safe" distance, since spread of viruses can depend on many factors.

How it works

Generally, infectious droplets and particles build up closer to the person who is releasing them. The closer you are to someone who has a respiratory virus, the more likely you are to catch it.

Steps you can take

Individuals can

- Avoid being near someone who has respiratory virus symptoms.
- Avoid crowded areas where you may be unable to maintain physical distance.

Organizations can

- Provide employees with paid time off and flexible telework policies to support workers to stay home if sick.

Key times for prevention

All of the prevention strategies described in this guidance can be helpful to reduce risk. They are especially helpful when:

- Respiratory viruses are causing a lot of [illness in your community](#).
- You or the people around you were recently exposed to a respiratory virus, are sick, or are recovering.
- You or the people around you have [risk factors for severe illness](#).

Risk Factors for Severe Illness from Respiratory Viruses

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness.

Overview

Illnesses caused by respiratory viruses like COVID-19, flu, and RSV can make anyone sick. However, there are a range of risk factors that can increase a person's chances of getting very sick (severe illness). Generally, people at higher risk of severe illness from respiratory viruses are older adults, young children, people with compromised immune systems, people with disabilities, and pregnant people.

Making a plan

If you or someone around you has one or more risk factors for severe illness, using the prevention strategies described in CDC's [Respiratory Virus Guidance](#) is especially important. In addition, there are several specific considerations for people with certain risk factors for severe illness:

- [Older adults](#)
- [Young children](#)
- [People with weakened immune systems](#)
- [People with disabilities](#)
- [Pregnant people](#)

Respiratory Viruses and Older Adults

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness, including older adults.

Overview

As people get older, their immune systems do not work as well. Older adults are also more likely to have underlying health conditions. Most deaths from respiratory viruses occur in people older than 65, with risk increasing sharply with advancing age.

Why prevention is important

Studies have shown that:

- Compared to people ages 18-39 years, people ages over 75 are about 9 times as likely to die from COVID-19. [Learn more.](#)
- Each year, it is estimated that 60,000-160,000 older adults in the United States are hospitalized due to RSV infection and 6,000-10,000 die. [Learn more.](#)
- In recent years, it's estimated that between 70 percent and 85 percent of seasonal flu-related deaths in the United States have occurred among people 65 years and older, and between about 50 percent and 70 percent of seasonal flu-related hospitalizations have occurred among people in this age group. [Learn more.](#)
- Over 95% of adults hospitalized in 2023-2024 due to COVID-19 had no record of receiving the latest vaccine.

Reducing risk

If you are, or if you spend time with, an older adult, using the prevention strategies described in CDC's [Respiratory Virus Guidance](#) is especially important. In addition, there are several specific considerations for older adults listed below.

- [Immunizations](#)
 - In addition to getting a current COVID-19 vaccine, there are some unique respiratory virus immunization recommendations for older adults:
 - All adults ages 65 years and older are recommended to receive an additional updated 2023-2024 COVID-19 vaccine dose.
 - All adults should have a current flu vaccine, but adults aged 65 years or older are recommended to receive a high dose or adjuvanted flu vaccine (for example, Fluzone High-Dose Quadrivalent inactivated flu vaccine, Flublok Quadrivalent recombinant flu vaccine, or Fluad Quadrivalent adjuvanted inactivated flu vaccine).
 - Adults ages 60 years and older should talk to their healthcare provider about whether an RSV vaccine is right for them.
 - [The Eldercare Locator](#), a national resource funded by the Administration for Community Living, can help older adults find local vaccination clinics, connect with accessible transportation, and provide other assistance in accessing vaccinations.

- **[Masks](#)**
 - Note that better fitting [masks](#) (for example, N95 or KN95 respirators) are more effective at protecting you from inhaling germs than other types of masks are (for example, cloth masks or surgical/disposable masks).
- **[Treatment](#)**
 - [COVID-19 antivirals](#) are recommended for all older adults (over age 50) and certain people at higher risk for complications from COVID-19.
 - [Flu antivirals](#) are recommended for certain people at high risk for complications from flu, including adults ages 65 years and older.
 - To learn more about if treatment is right for you, speak with a healthcare provider.
- **[Tests](#)**
 - The Administration for Community Living and the Administration for Strategic Preparedness and Response are partnering to distribute tests to the aging and disability networks. You may be able to get COVID-19 tests for free through your [Area Agency on Aging](#).

Respiratory Viruses and Young Children

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness, including young children.

Overview

Young children, particularly infants, have immune systems that are still developing. In addition, their lungs and airways are smaller, making viruses that affect airways more of a threat.

Why prevention is important

Studies have shown that:

- Infants under 6 months of age have similar COVID-19–associated hospitalization rates to adults ages 65–74 years old. [Learn more.](#)
- Each year in the United States, an estimated 58,000–80,000 children younger than 5 years are hospitalized due to RSV infection, with infants being among those at greatest risk. [Learn more.](#)
- Children younger than 5 years old, but especially those younger than 6 months, are at higher risk of developing serious flu-related complications. CDC estimates that from 2010 to 2020, flu-related hospitalizations among children younger than 5 years ranged from between 6,000 to 27,000 per year in the United States. Many more have to go to a doctor, an urgent care center, or the emergency room because of flu. [Learn more.](#)

Reducing risk

If you care for or spend time around young children, using the prevention strategies described in CDC's [Respiratory Virus Guidance](#) is especially important. In addition, there are several specific considerations for young children.

- [Immunizations](#)
 - *COVID-19 and flu*
 - Young children ages 6 months or above are recommended to have a current COVID-19 vaccine and an annual flu vaccine.
 - Two doses of the flu vaccine (separated by at least 4 weeks) are recommended for those ages 6 months–8 years who have received fewer than 2 flu vaccine doses before July 1, 2023, or whose flu vaccination history is unknown.
 - Though they are not eligible for COVID-19 or flu vaccines, infants under age 6 months can still receive some protection. Getting vaccinated while pregnant or breastfeeding can help protect a baby after birth because antibodies are passed to the baby during pregnancy or through the milk.
 - *RSV*
 - To prevent severe RSV disease in infants, CDC [recommends either](#) RSV vaccination while pregnant or infant immunization with RSV monoclonal antibody. Most infants will not need both.
 - RSV vaccination in pregnancy takes place during weeks 32 through 36 of pregnancy and is administered September through January in most parts of

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the United States. Abrysvo is the only RSV vaccine recommended during pregnancy.

- Immunization for infants and young children with RSV monoclonal antibody consists of:
 - 1 dose of nirsevimab for all infants ages 8 months and younger born during or entering their first RSV season.
 - 1 dose of nirsevimab for infants and children ages 8–19 months who are at increased risk for severe RSV disease and entering their second RSV season.
 - Note: A different monoclonal antibody, palivizumab, is limited to children ages 24 months and younger with certain conditions that place them at high risk for severe RSV disease. It must be given once a month during RSV season.

- **Hygiene**

- Handwashing can become a lifelong healthy habit if you start teaching it at an early age. Teach kids the five easy steps for handwashing—wet, lather, scrub, rinse, and dry—and the key times to wash hands, such as after using the bathroom or before eating.
- Supervise young children when they use hand sanitizer to prevent swallowing alcohol.

- **Masks**

- Masks should not be worn by children younger than 2 years because of suffocation risk.

- **Treatment**

- Paxlovid (nirmatrelvir-ritonavir) antiviral treatment for COVID-19 is not authorized for use in children younger than 12 years of age. Other treatment may be available, speak with a healthcare provider.
- There are [flu antiviral drugs](#) recommended by CDC for use in children. Oseltamivir (available as a generic version or under the trade name Tamiflu®) is approved for treatment of flu in children 14 days old and older.
 - Note: Although not part of the FDA-approved indications, use of oral oseltamivir for treatment of flu in infants less than 14 days old, and for chemoprophylaxis in infants 3 months to 1 year, is recommended by the CDC and the American Academy of Pediatrics. If a child is younger than 3 months old, use of oseltamivir for chemoprophylaxis is not recommended unless the situation is judged critical due to limited data in this age group.
- To learn more about if treatment is right for your child, speak with a healthcare provider.

- **When Sick**

- Parents and caregivers may need to be around young children at home when they are sick because they require supervision. When caring for a young child who has a respiratory virus, make use of other prevention strategies like taking steps for cleaner air, being diligent with [hygiene](#) practices, and choosing to use a [mask](#) if over age 2.

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- Know that the emergency warning signs of respiratory virus complications can be different in children. Seek immediate medical care for any of the following:
 - Fast breathing or trouble breathing
 - Bluish lips or face
 - Ribs that pull in with each breath
 - Chest pain
 - Severe muscle pain (for example, child refuses to walk)
 - Dehydration (no urine for 8 hours, dry mouth, no tears when crying)
 - Lack of alertness or interacting when awake
 - Seizures
 - Fever above 104 degrees Fahrenheit that is not controlled by fever-reducing medicine
 - In children younger than 12 weeks, any fever
 - Fever or cough that improves but then returns or worsens

Respiratory Viruses and People with Weakened Immune Systems

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness, including people with weakened immune systems.

Overview

People with weakened immune systems (immunocompromise) have lower defenses against infections, and their bodies may have a harder time building lasting protection from past immunization or infection. People can be immunocompromised either because of a medical condition or because they receive immunosuppressive medications or treatments. Examples of medical conditions or treatments that may result in moderate to severe immunocompromise include, but are not limited to, cancer treatment, organ transplant with immunosuppressive therapy, and primary immunodeficiency.

Why prevention is important

Studies have shown that:

- Among people who had either a solid organ transplant or a stem cell transplant, about 65 percent of those who got flu were hospitalized. [Learn more.](#)
- Risk of death among hospitalized people with COVID-19 was about 1.44 times greater among those who were immunocompromised than those who were not. [Learn more.](#)

Reducing risk

If you have, or someone you spend time with has, a weakened immune system using the prevention strategies described in CDC's [Respiratory Virus Guidance](#) is especially important. In addition, there are several specific considerations for people with weakened immune systems.

- [Immunizations](#)
 - [COVID-19](#)
 - Everyone ages 6 months and older who is moderately or severely immunocompromised should receive at least 1 dose of a 2023-2024 updated COVID-19 vaccine. Depending on the number of doses you've previously received, you may need more than 1 dose of updated vaccine:
 - If you have not gotten any COVID-19 vaccines (not vaccinated), you should get 2-3 doses of updated COVID-19 vaccine.
 - If you got 1 previous Pfizer-BioNTech or Moderna COVID-19 vaccine you should get 1-2 doses of updated COVID-19 vaccine.
 - If you got 2 or more previous COVID-19 vaccines, you should get 1 updated COVID-19 vaccine.
 - Additional information on COVID-19 vaccines for people who are immunocompromised is available [here](#).
 - [Flu](#)
 - Immunocompromised persons should receive an age-appropriate flu vaccine.
 - Live attenuated influenza vaccine (the nasal spray flu vaccine) should not be used.
 - Note that timing flu vaccination relative to a specified period before or after interventions that compromise immunity may be appropriate.

CDC offers separate, specific guidance for healthcare settings ([COVID-19](#), [flu](#), and [general infection prevention and control](#)). Federal civil rights laws may require reasonable modifications or reasonable accommodations in various circumstances. Nothing in this guidance is intended to detract from or supersede those laws.

- Additional information on flu vaccines for people who are immunocompromised is available [here](#).
- **[Masks](#)**
 - Note that better fitting masks (for example, N95 or KN95 respirators) are more effective at protecting you from inhaling germs than other types of masks are (for example, cloth masks or surgical/disposable masks).
- **[Treatment](#)**
 - If you have COVID-19, [antiviral treatments](#) are recommended for people with weakened immune systems. If you have a weakened immune system, have received antiviral treatment, and continue to experience COVID-19 symptoms, your healthcare provider may recommend additional treatment.
 - If you have flu, [antiviral treatments](#) are recommended for people with weakened immune systems.
 - To learn more about if treatment is right for you, speak with a healthcare provider.
- **[When Sick](#)**
 - It can take longer than average for people with weakened immune systems to recover from respiratory viruses. This includes a possible longer duration during which you can spread a respiratory virus to others. If you are immunocompromised, be aware of this when choosing precautions after you return to normal activities following time at home sick.

Respiratory Viruses and People with Disabilities

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness, including people with disabilities.

Overview

Some disabilities can raise a person's risk of getting very sick from respiratory viruses. For example, some people with disabilities are more likely to have underlying medical conditions, live in congregate settings, or experience factors and conditions stemming from [social determinants of health](#).

Why prevention is important

Studies have shown that:

- People with certain disabilities have a higher risk of getting respiratory virus-related complications, for example:
 - During the first two COVID-19 pandemic waves, people with intellectual disabilities were equally as likely as other people to become infected but had 3.5 times the risk of death. [Learn more](#).
 - Children with neurologic and neurodevelopmental disorders are estimated to be at 5 to 7 times greater risk of hospitalization from respiratory infections than other children. [Learn more](#).

Reducing risk

If you have, or someone you spend time with has, a disability using the prevention strategies described in CDC's [Respiratory Virus Guidance](#) is especially important. In addition, there are several specific considerations for people with disabilities.

- **[Immunizations](#)**
 - The [Disability Information and Access Line \(DIAL\)](#) can help people with disabilities find local vaccination clinics, connect with accessible transportation, and provide other assistance in accessing COVID-19 vaccinations (e.g., set up vaccination appointment).
- **[Masks](#)**
 - Note that better fitting [masks](#) (for example, N95 or KN95 respirators) are more effective at protecting you from inhaling germs than other types of masks are (for example, cloth masks or surgical/disposable masks).
 - Some people with disabilities may find it difficult to wear a mask. Challenges may be caused by being sensitive to materials on the face, difficulty understanding the value of mask wearing for protection, or having difficulty keeping the mask in place. When considering whether to use a mask, people with disabilities or their caregivers can consider the person's ability to wear a mask correctly (proper mask size and fit), to avoid frequent touching of the mask and face, and to remove the mask without assistance.

CDC offers separate, specific guidance for healthcare settings ([COVID-19, flu](#), and [general infection prevention and control](#)). Federal civil rights laws may require reasonable modifications or reasonable accommodations in various circumstances. Nothing in this guidance is intended to detract from or supersede those laws.

- For people who are deaf or hard of hearing, or people who spend time with someone who is, clear masks or masks with clear panels are an option.
- **[Steps for cleaner air](#)**
 - Note that taking additional [steps for cleaner air](#) can be particularly helpful if you are not able to wear a mask or distance from others; for example, if you need personal assistance or direct support.
- **[Treatment](#)**
 - [COVID-19 antivirals](#) are recommended for certain people at high risk for complications from COVID-19, including people with many types of disabilities.
 - [Flu antivirals](#) are recommended for certain people at high risk for complications from flu, including people who live in congregate settings and people with many types of underlying medical conditions.
 - To learn more about if treatment is right for you, speak with a healthcare provider.
- **[Tests](#)**
 - The Administration for Community Living and the Administration for Strategic Preparedness and Response are partnering to distribute tests to the aging and disability networks. You may be able to get COVID-19 tests for free through your local [Center on Independent Living](#).
 - The [Disability Information and Access Line \(DIAL\) can help people with disabilities connect with local COVID-19 testing options and help with ordering free at-home test kits.](#)
- **Working with support providers**
 - People with disabilities who have direct support providers can also help protect themselves from respiratory viruses in the following ways:
 - Ask direct support providers if they are experiencing any symptoms of or have other reason to believe they might have a respiratory virus.
 - Tell direct service providers to:
 - Wash their hands when they enter your home and before and after touching you (for example, dressing, bathing/showering, transferring, toileting, feeding), handling tissues, or when changing linens or doing laundry.
 - Open windows, use air filters and use other [steps for cleaner air](#) to reduce the amount of virus within indoor areas.
 - Wear a well-fitting [mask](#) over the nose and mouth.

Respiratory Viruses and Pregnancy

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness, including pregnant people.

Overview

Changes in the immune system, heart, and lungs during pregnancy can raise the risk of getting very sick from respiratory viruses.

Why prevention is important

Studies have shown that:

- The odds of admission to an intensive care unit with COVID-19 were 2.5 times higher in pregnant and recently pregnant women than they were for non-pregnant women of reproductive age. [Learn more.](#)
- Approximately 28 percent of reproductive-aged women hospitalized with influenza were pregnant across the 2010-2019 influenza seasons. [Learn more.](#)
- Getting a flu shot can reduce a pregnant person's risk of being hospitalized with flu by an average of 40 percent. [Learn more.](#)
- Flu, COVID, and RSV vaccination during pregnancy also reduce the risk of severe illness and hospitalization in babies during the first few months of life
 - Over 75 percent of babies hospitalized with COVID-19 were born to women who did not receive the COVID-19 vaccine. [Learn more.](#)
 - Flu vaccination during pregnancy reduces the risk of flu hospitalization in infants younger than 6 months by about 40 percent. [Learn more.](#)
 - Clinical trials showed that giving the RSV vaccine to pregnant people reduced the risk of their babies being hospitalized for RSV by more than 50 percent. [Learn more.](#)

Reducing risk

If you are pregnant or recently had a baby, or if you spend time with someone who is pregnant or recently had a baby, using the prevention strategies described in CDC's [Respiratory Virus Guidance](#) are especially important. In addition, there are several specific considerations related to pregnancy.

- [Immunizations](#)
 - In addition to providing protection to the pregnant person, certain vaccines during pregnancy can help lower the risk for the baby after birth.
 - *COVID-19*
 - COVID-19 vaccination is recommended for persons who are pregnant, might become pregnant, recently pregnant or breastfeeding.
 - *Flu*
 - Flu vaccination can be administered at any time during pregnancy, before and during the flu season.
 - Those who are or will be pregnant during flu season should receive inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV). Live attenuated influenza vaccine (LAIV) is not recommended for use during pregnancy.
 - *RSV*

CDC offers separate, specific guidance for healthcare settings ([COVID-19](#), [flu](#), and [general infection prevention and control](#)). Federal civil rights laws may require reasonable modifications or reasonable accommodations in various circumstances. Nothing in this guidance is intended to detract from or supersede those laws.

- To prevent RSV-associated lower respiratory tract infection in infants, CDC recommends either:
 - Administering RSVpreF (Abrysvo) vaccine to the pregnant person **OR**
 - Administering RSV monoclonal antibody, nirsevimab (Beyfortus) to the infant.
 - Most infants will not need protection from both products.
 - RSVpreF (Abrysvo) vaccine is the **ONLY** Respiratory Syncytial Virus (RSV) vaccine approved for use during pregnancy to protect infants from RSV-associated lower respiratory tract infection.
 - The vaccine should be administered during weeks 32 through 36 of pregnancy (i.e., 32 weeks 0 days through 36 weeks 6 days).
 - In most of the continental United States, the vaccine should be administered from September through January.
- **Masks**
 - Note that better fitting [masks](#) (for example, N95 or KN95 respirators) are more effective at protecting you from inhaling germs than other types of masks are (for example, cloth masks or surgical/disposable masks).
- **Treatment**
 - The COVID-19 Treatment Guidelines Panel recommends against withholding treatment for COVID-19 from pregnant or lactating individuals because of theoretical safety concerns. For more information on the treatment of COVID-19 in pregnant people, see the NIH Treatment Guidelines on [Special Considerations in Pregnancy](#).
 - [Flu antivirals](#) are recommended for certain people at high risk for complications from flu, including pregnant people.
 - To learn more about if treatment is right for you, speak with a healthcare provider.