


























































The 5 W's of Respiratory Virus Vaccines

What You Need to Know

Vaccination is important to lower the risk of getting sick from common respiratory infectious diseases including influenza, COVID-19, respiratory syncytial virus (RSV), pneumococcal disease, pertussis and Haemophilus influenzae type B (Hib). Staying up to date with your vaccinations is key to preventing serious complications.

	Influenza	COVID-19	Respiratory Syncytial Virus (RSV)				
WHO	 Everyone 6 months of age and older	 Everyone 6 months of age and older²	 Infants (entering or born during their first RSV season OR at ongoing risk during their second RSV season)	 Pregnant individuals (expecting to deliver near the start of or during the RSV season) ⁵	 Adults 50-74 years of age⁷ (in consultation with their healthcare provider OR 60 years of age and older who are residents of nursing homes or chronic care facilities)	 Adults 75 years of age and older⁷	
WHAT	 1 dose¹ (previously vaccinated OR 9 years of age and older)	 1 dose³ (previously vaccinated OR 5 years of age and older)	 1 dose⁴ (refers to use of nirsevimab , an RSV monoclonal antibody, as there are no RSV vaccines for this age group)	 1 dose⁶	 1 dose⁸	 2 doses¹ (previously unvaccinated AND between 6 months to less than 9 years of age)	 2 doses³ (previously unvaccinated AND between 6 months to less than 5 years of age; OR specific high-risk populations)
WHEN	Annually (during respiratory illness season – late fall to early spring)	Annually (1st dose during respiratory illness season – late fall to early spring; 2nd dose (if needed) in the spring)	Near the start of or during the RSV season (generally November to April)	Between 32–36 weeks of gestation	Before, during or at the end of the RSV season (generally November to April)		
WHERE [#]	<ul style="list-style-type: none"> Participating pharmacies (ages 2+) Primary care offices Some public health units 	<ul style="list-style-type: none"> Participating pharmacies Participating primary care offices Public health units Indigenous-led immunization clinics 	<ul style="list-style-type: none"> Hospitals Primary care offices Public health units 	<ul style="list-style-type: none"> Primary care offices Public health units Obstetricians and midwives Pharmacies (\$) 	<ul style="list-style-type: none"> Hospitals Primary care offices Some public health units Congregate living residences (if applicable) Indigenous health-care organizations Pharmacies (\$) 		
WHY	Prevents influenza and its complications that can lead to severe disease, hospitalizations and death. Prevents the spread of influenza.	Prevents SARS-CoV-2 infection, severe disease, hospitalizations, and death. Decreases the risk of post-COVID-19 condition.	Protects against RSV disease which can lead to hospitalizations, complications and death.				

	Pneumococcal*			Pertussis			Haemophilus Influenzae Type B (Hib)	
WHO	 Infants and children (6 weeks to less than 5 years of age)	   Children and adults (5 to 64 years of age) with increased risk	 Adults 65 years of age and older	   Infants, children and adolescents	 Pregnant individuals	  Adults 18 years of age and older	  Infants and children 2 months to less than 5 years of age	    Children and adults 5 years of age and older with increased risk
WHAT	   Up to 3 doses⁹     Up to 4 doses¹⁰ if increased risk	 1 dose^{10,11}	 1 dose^{10,11}	    4 doses plus 2 boosters	 1 dose	 1 dose	    4 doses	 1 dose¹²
WHEN	2, 4, and 12 months of age <small>(additional dose at 6 months of age if 4 doses required)</small>	Individualized schedule	1 lifetime dose	2, 4, 6, and 18 months of age Boosters at 4-6 years of age and at 14-16 years of age	Between 27-32 weeks of gestation for each pregnancy	1 lifetime dose	2, 4, 6 and 18 months of age	Individualized schedule
WHERE#	<ul style="list-style-type: none"> • Primary care offices • Some public health units • Pharmacies (ages 5+) (\$) 			<ul style="list-style-type: none"> • Primary care offices • Some public health units 			<ul style="list-style-type: none"> • Primary care offices • Some public health units • Pharmacies (ages 5+) (\$) 	
WHY	Prevents illness caused by pneumococcal bacteria which can cause serious and life-threatening infections including invasive pneumococcal disease (IPD) that can lead to serious symptoms, lifelong complications and death.			Protects against whooping cough which can lead to serious complications, hospitalizations and death.			Protects against Hib disease which can cause serious infections that can lead to complications and death.	

 Infant,
  Child,
  Adolescent,
  Adult,
  Older Adult,
  Pregnant |
  Dose

Information provided is based on the recommendations for most healthy individuals. For special circumstances, e.g., increased risk of severe illness, immunocompromised individuals, catch-up schedules, etc. and for specific dosing instructions, please refer to the applicable guidance for more information. Some individuals may be eligible for publicly funded programs and should refer to the applicable eligibility criteria for more information.

Examples of providers/settings that may offer the vaccine

* Information is based on the eligibility criteria of the publicly funded pneumococcal vaccine program in Ontario.

\$ Additional costs may apply. Pharmacies do not have access to publicly funded vaccines but are authorized to administer the vaccine outside of the publicly funded programs.

1. Based on the available influenza vaccines in Ontario as part of the Universal Influenza Immunization Program (UIIP) 2025-2026, individuals 6 months to 64 years of age are recommended to receive a trivalent inactivated vaccine (TIV). Individuals 65 years of age and older are recommended to receive the high-dose trivalent inactivated vaccine (TIV-HD) or the adjuvanted trivalent inactivated vaccine (TIV-adj), however, if the preferred vaccine is not available, any of the available age-appropriate influenza vaccines should be used.
2. As per the Canadian Immunization Guide, individuals at increased risk of SARS-CoV-2 infection or severe COVID-19 disease are recommended to be vaccinated; all others may receive the vaccine.
3. Based on Ontario's 2025-2026 COVID-19 Vaccine Program. Dosing may depend on the number of prior doses received; please refer to the applicable guidance for more information.
4. Dosing refers to the use of nirsevimab (RSV monoclonal antibody) in infants, which is preferred over palivizumab.
5. Vaccination of a pregnant individual may be considered in consultation with their healthcare provider for the prevention of severe RSV disease in infants; however, it is not required if it is anticipated that the infant will be administered nirsevimab (the preferred method of protection for infants).
6. Only the RSVpreF (Abrysvo™) vaccine is indicated for use during pregnancy.
7. As per the Canadian Immunization Guide, RSV immunization may be considered for adults 50-74 years of age in consultation with their healthcare provider but is recommended for adults 60 years of age and older who are residents of nursing homes and other chronic care facilities OR are 75 years of age and older, particularly if they are at increased risk of severe RSV disease.
8. Adults 60 years of age and older can get RSVpreF (Abrysvo™), RSVPreF3 (Arexvy), or mRNA-1345 (mRESVIA®). Only RSVPreF3 (Arexvy) can be used in adults 50-59 years of age. Individuals who have received a dose of the RSV vaccine previously do not need to receive an additional dose during the upcoming season.
9. Using Pneu-C-15 vaccine (Vaxneuvance®).
10. Using Pneu-C-20 vaccine (Prevnar 20™).
11. One dose may be recommended (exceptions apply) but depends on previous vaccination history, refer to applicable guidance for more information.
12. In most cases, one dose is given, even if previously vaccinated when younger, with at least a one-year interval from a previous dose. Refer to the Canadian Immunization Guide for more information and exceptions.

DISCLAIMER

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