Antigen | Vaccination of Health Care Workers Recommended
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**BCG**<sup>1</sup> | BCG vaccination is recommended for unvaccinated TST- or IGRA-negative persons at risk of occupational exposure in low and high TB incidence areas (e.g. health-care workers, laboratory workers, medical students, prison workers, other individuals with occupational exposure).

**Hepatitis B**<sup>2</sup> | Immunization is suggested for groups at risk of acquiring infection who have not been vaccinated previously (for example HCWs who may be exposed to blood and blood products at work).

**Polio**<sup>3</sup> | All HCWs should have completed a full course of primary vaccination against polio.

**Diphtheria**<sup>4</sup> | HCWs who may have occupational exposure to *C. diphtheriae*. All health-care workers should be up to date with immunization as recommended in their national immunization schedules.

**Measles**<sup>5</sup> | All HCWs should be immune to measles and proof/documentation of immunity or immunization should be required as a condition of enrollment into training and employment.

**Rubella**<sup>6</sup> | If rubella vaccine has been introduced into the national programme, all HCWs should be immune to rubella and proof/documentation of immunity or immunization should be required as a condition of enrollment into training and employment.

**Meningococcal**<sup>7</sup> | One booster dose 3–5 years after the primary dose may be given to persons considered to be at continued risk of exposure, including HCWs.

**Varicella**<sup>9</sup> | Countries should consider vaccination of potentially susceptible health-care workers (i.e. unvaccinated and with no history of varicella) with 2 doses of varicella vaccine.

**Pertussis**<sup>10</sup> | HCWs should be prioritized as a group to receive pertussis vaccine.

**Tetanus**<sup>11</sup> | There is currently no recommendation regarding HCWs.

**Haemophilus influenzae type b**<sup>12</sup> | The main burden of disease lies in infants under 5 years of age. Work in a healthcare setting is not indicated as a factor for increased risk. There is currently no recommendation regarding HCWs.

**Pneumococcal**<sup>13</sup> | The main burden of disease lies in infants under 5 years of age. Immunocompetent adults are not at increased risk for serious pneumococcal disease. HCWs are not indicated as a group at increased risk of pneumococcal disease.

**Rotavirus**<sup>14</sup> | Children are the target group for rotavirus vaccination as they have the greatest burden of disease. Adults including HCWs are not at increased risk of severe disease.

**HPV**<sup>15</sup> | HCWs are not at increased risk of HPV. The primary target group for vaccination is girls aged 9-14.

**Japanese Encephalitis**<sup>16</sup> | Health-care workers are generally not at special risk of contracting JE. Workers at high-risk in endemic areas, such as those involved in vector control, should be vaccinated.

**Yellow Fever**<sup>17</sup> | Individuals in endemic countries and travelers to these countries should receive a single dose of yellow fever vaccine. Work in a healthcare setting is not indicated as a factor for increased risk. There is currently no recommendation regarding HCWs.

**Tick-borne Encephalitis**<sup>18</sup> | Health-care workers are generally not at special risk of contracting JE. Workers at high-risk in endemic areas, such as those involved in vector control, should be vaccinated.

**Typhoid**<sup>19</sup> | Typhoid vaccines should be employed as part of comprehensive control strategies in areas where the disease is endemic. Work in a healthcare setting is not indicated as a factor for increased risk. There is currently no recommendation regarding HCWs.

**Cholera**<sup>20</sup> | Cholera vaccines may be employed as part of comprehensive control strategies in areas where the disease is endemic as well as to prevent and respond to cholera outbreaks. There is currently no recommendation regarding HCWs.

**Hepatitis A**<sup>21</sup> | Hepatitis A is transmitted through contaminated food and water or direct contact with an infectious person. HCWs are not indicated as a group at increased risk of hepatitis A infection.

**Rabies**<sup>22</sup> | PrEP may be considered for medical professionals who regularly provide care to persons with rabies.

**Mumps**<sup>23</sup> | Routine mumps vaccination is recommended in countries with a well-established, effective childhood vaccination programme and the capacity to maintain high level vaccination coverage with measles and rubella vaccination. HCWs are not indicated as a group at increased risk.

**Dengue (CYD-TDV)**<sup>24</sup> | HCWs are not at increased risk of dengue.

**Malaria (RTS,S)**<sup>25</sup> | Vaccine not recommended for adults. HCs are not at increased risk of malaria.
25. Malaria vaccines, WHO Position Paper, Weekly Epidemiological Record 2022, 97: 67-78

References

A Health Care Workers (HCWs) are defined as all persons involved in patient care such as health care professionals, residents, students, laboratory staff, administrative and service staff, as well as persons in public health such as field workers, epidemiologists, laboratory staff and community health workers.