AMERICAN COLLEGE of CARDIOLOGY®

KEY TAKEAWAYS

Adult Immunization as Part of Cardiovascular Care: 2026 ACC Concise Clinical Guidance

This Concise Clinical Guidance (CCG) supports cardiovascular risk reduction through routine adult vaccination – focusing on influenza, pneumococcal, COVID-19, RSV, and zoster (shingles) – and equips clinicians with actionable strategies for assessing, prioritizing, and recommending these vaccines while addressing patient hesitancy.

1 **Treat vaccination as a core cardiovascular risk-reducing therapy.**

- Incorporate vaccine assessment into every cardiovascular visit where risk reduction is addressed
- Address immunization alongside lipid, blood pressure, and other guideline-directed medical therapy optimization

2 **Do not miss the opportunity to recommend vaccination.**

- Strong clinician recommendation is the most effective driver of uptake
- Use clear language: "You should get this vaccine today"
- Do not defer to primary care, act or refer directly

3 **Use the care team and system to support delivery.**

- Engage nurses, pharmacists, and advanced practice providers in vaccine assessment and counseling
- Use reminders, workflows, and checklists to standardize care
- Reinforce messaging with patient education tools

4 **Reassess vaccination status during key clinical transitions.**

- After hospitalization (especially following hospitalization for myocardial infarction or heart failure)
- At new diagnosis of cardiovascular disease

5 **Address patient hesitancy openly and proactively.**

- Emphasize that benefits far outweigh risks in patients with cardiovascular disease
- Correct misconceptions (eg, vaccines cause infection)
- Use personalized, patient-centered education

6 **Remove access barriers in real time.**

- If you cannot vaccinate in clinic, refer immediately (eg, pharmacy, community site)
- Avoid delays; missed opportunities reduce uptake
- Ensure patients leave with a clear next step

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7 **Prioritize vaccines that reduce cardiovascular events not just infection.**

Influenza

- Recommend in all adults every year
- Use high-dose formulations in patients ≥65 years
- Reduces myocardial infarction and major cardiovascular events

Pneumococcal

- Recommend in adults ≥50 years and at-risk patients
- Use PCV20/21 (or PCV15 + PPSV23 when indicated)
- Reduces pneumonia and cardiovascular complications

COVID-19

- Recommend in all adults with cardiovascular disease
- Ensure patients are up to date with current vaccine formulations
- Reduces severe illness, hospitalization, and cardiovascular complications

RSV

- Recommend in adults ≥50 years with cardiovascular disease
- Especially important in heart failure and high-risk patients
- Reduces hospitalization and cardiorespiratory complications

Zoster (Shingles)

- Recommend 2-dose series in adults ≥50 years
- Associated with reduced risk of stroke and myocardial infarction

Scan this QR code to access the full CCG for detailed figures and clinical nuance