**COVID-19 vaccine recommended schedules by age, health status and product**

* **See** [**Table 1**](#Table1) **for information on the primary series**
* **See** [**Table 2**](#Table2) **for information on the booster dose**

**Table 1: Primary series vaccine recommendations by age, health status, and product**

**General notes:**

* For the primary series, the recommended products are the monovalent original formulations of mRNA vaccines.
* Immunocompromised refers to those who are moderately to severely immunocompromised.
* Those who are [moderately to severely immunocompromised](https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-26-covid-19-vaccine.html#a6.4.considerations) are recommended to receive an additional dose in the primary series, with each dose being administered 4 to 8 weeks apart.
* More details about vaccine schedules and intervals can be found in the [Canadian Immunization Guide](https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-26-covid-19-vaccine.html) based on the National Advisory Committee on Immunization (NACI) recommendations.

| **Primary Series**  **Age / health status** | | **NACI**  **recommendations** | **Pfizer-BioNTech Comirnaty**  **Original Monovalent**  3 mcg per 0.2 mL dose  Maroon cap / label  **6 months to 4 years**  2.2 mL of diluent | **Pfizer-BioNTech**  **Comirnaty**  **Original Monovalent**  10 mcg per 0.2 mL dose  Orange cap / label  **5 to 11 years**  1.3 mL of diluent | **Pfizer-BioNTech**  **Comirnaty**  **Original Monovalent**  30 mcg per 0.3 mL dose  Grey cap / label  **≥ 12 years**  No diluent | **Moderna**  **Spikevax**  **Original Monovalent**  0.1 mg per mL dose  Royal blue cap and purple label border  **6 months to 11 years**  No diluent | **Moderna**  **Spikevax**  **Original Monovalent**  0.2 mg per mL dose  Red cap and light blue label border  **≥ 6 years**  No diluent | **Novavax**  **Nuvaxovid**  5 mcg per 0.5 mL dose  **≥ 12 years**  No diluent  Only recommended if not able or willing to receive mRNA vaccined |
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| **6 months to 4 years of age (less than 5 years of age)** | | | | | | | | |
| NOT Immunocompromised | | May be offered | 3 doses of **0.2 mL** (3 mcg);  At least 8 weeks apart;  6 months to 4 years |  |  | 2 doses of **0.25 mL** (25 mcg);  At least 8 weeks apart;  6 months to 5 years |  |  |
| Immunocompromised | May be offered  Moderna preferreda | 4 doses of **0.2 mL** (3 mcg);  4 to 8 weeks apart;  6 months to 4 years |  |  | 3 doses of **0.25 mL** (25 mcg);  4 to 8 weeks apart;  6 months to 5 years |  |  |
| **5 years of age** | | | | | | | | |
| NOT Immunocompromised | | Should be offered  Pfizer-BioNTech preferredb |  | 2 doses of **0.2 mL** (10 mcg);  At least 8 weeks apart;  5 to 11 years |  | 2 doses of **0.25 mL** (25 mcg);  At least 8 weeks apart;  6 months to 5 years |  |  |
| Immunocompromised | | Should be offered  Pfizer-BioNTech preferredb; however Moderna may be considered due to potential benefit of inducing higher immune response and more durable protectionc |  | 3 doses of **0.2 mL** (10 mcg);  4 to 8 weeks apart;  5 to 11 years |  | 3 doses of **0.25 mL** (25 mcg);  4 to 8 weeks apart;  6 months to 5 years |  |  |
| **6 to 11 years of age** | | | | | | | | |
| NOT Immunocompromised | | Should be offered  Pfizer-BioNTech preferredb |  | 2 doses of **0.2 mL** (10 mcg);  At least 8 weeks apart;  5 to 11 years |  | 2 doses of **0.5 mL** (50 mcg);  At least 8 weeks apart;  6 to 11 years | 2 doses of **0.25 mL** (50 mcg);  At least 8 weeks apart;  6 to 11 years |  |
| Immunocompromised | | Should be offered  Pfizer-BioNTech preferredb; however Moderna may be considered due to potential benefit of inducing higher immune response and more durable protectionc |  | 3 doses of **0.2 mL** (10 mcg);  4 to 8 weeks apart;  5 to 11 years |  | 3 doses of **0.5 mL** (50 mcg);  4 to 8 weeks apart;  6 to 11 years | 3 doses of **0.25 mL** (50 mcg);  4 to 8 weeks apart;  6 to 11 years |  |
| **12 to 17 years of age** | | | | | | | | |
| NOT Immunocompromised | | Should be offered  Pfizer-BioNTech preferredb |  |  | 2 doses of **0.3 mL** (30 mcg);  8 weeks apart |  | 2 doses of **0.5 mL** (100 mcg);  8 weeks apart | 2 doses of **0.5 mL** (5 mcg);  8 weeks apart  Not yet reviewed by NACI |
| Immunocompromised | | Should be offered  Pfizer-BioNTech preferredb; however Moderna may be considered due to potential benefit of inducing higher immune response and more durable protectionc |  |  | 3 doses of **0.3 mL** (30 mcg);  4 to 8 weeks apart |  | 3 doses of **0.5 mL** (100 mcg);  4 to 8 weeks apart | 2 to 3 doses of **0.5 mL** (5 mcg);  4 to 8 weeks apart  Not yet reviewed by NACI |
| **18 years of age and over** | | | | | | | | |
| NOT Immunocompromised | | Should be offered  Pfizer-BioNTech preferred for 18 to 29 years of ageb |  |  | 2 doses of **0.3 mL** (30 mcg);  8 weeks apart |  | 2 doses of **0.5 mL** (100 mcg);  8 weeks apart | 2 doses of **0.5 mL** (5 mcg);  8 weeks apart |
| Immunocompromised | | Should be offered  Pfizer-BioNTech preferred for 18 to 29 years of ageb; however Moderna may be considered due to potential benefit of inducing higher immune response and more durable protectionc |  |  | 3 doses of **0.3 mL** (30 mcg);  4 to 8 weeks apart |  | 3 doses of **0.5 mL** (100 mcg);  4 to 8 weeks apart | 2 to 3 doses of **0.5 mL** (5 mcg);  4 to 8 weeks apart |

1. Moderna Spikevax is the preferred product for the primary series for children 6 months to less than 5 years of age who are moderately to severely immunocompromised as it is a 3-dose series as compared to 4-dose series with Pfizer-BioNTech Comirnaty.
2. Pfizer-BioNTech Comirnaty is the preferred product for the primary series in those 5 to 29 years of age because it has been shown to have a lower risk of myocarditis/pericarditis in adolescents and adults compared to Moderna Spikevax.
3. This consideration is based on data from adult populations (≥ 18 years of age) with original mRNA COVID-19 vaccines that suggests that Moderna Spikevax original (100 mcg) may result in higher vaccine effectiveness after a 2-dose primary series compared to Pfizer-BioNTech Comirnaty original (30 mcg) and is associated with a higher seroconversion rate among adult immunocompromised patients.
4. The National Advisory Committee on Immunization (NACI) preferentially recommends mRNA vaccines due to their demonstrated high efficacy and effectiveness and favourable safety profile.

**Table 2: Booster dose vaccine recommendations by age, risk status and product**

**General notes:**

* For the booster dose, the recommended products are the mRNA bivalent formulations (containing mRNA encoding for the original strain and either Omicron BA.1 or BA.4/BA.5). The original products may be offered as a booster to those unwilling to receive a bivalent product but are not summarized here.
* Booster doses are offered at least 6 months from the completion of the primary series, a previous booster dose or a COVID-19 infection, whichever is later.
* More details can be found in the [Canadian Immunization Guide](https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-26-covid-19-vaccine.html) based on the NACI recommendations.

| **Booster dose**  **Age / risk status** | **NACI recommendations** | **Pfizer-BioNTech Comirnaty**  **Bivalent BA.4/BA.5**  5 mcg of original and 5 mcg of Omicron BA.4/BA.5 per 0.2 mL dose  Orange cap / label  **5 to 11 years**  1.3 mL of diluent | **Pfizer-BioNTech**  **Comirnaty**  **Bivalent BA.4/BA.5**  15 mcg of original and 15 mcg of Omicron BA.4/BA.5 per 0.3 mL dose  Grey cap / label  **≥ 12 years**  No diluent | **Moderna**  **Spikevax**  **Bivalent**  **BA.1**  0.1 mg per mL  25 mcg of original and 25 mcg of Omicron BA.1 per 0.5 mL dose  Royal blue cap and green label border  **≥ 6 years**  No diluent | **Moderna**  **Spikevax**  **Bivalent BA.4/BA.5**  0.1 mg per mL  25 mcg of original and 25 mcg of Omicron BA.4/BA.5 per 0.5 mL dose  Royal blue cap and grey label border  **≥ 18 years**  No diluent | **Novavax**  **Nuvaxovid**  5 mcg per0.5 mL dose  **≥ 18 years**  No diluent  Only recommended if not able or willing to receive mRNA vaccinee |
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| **6 months to 4 years of age (less than 5 years of age)** | | | | | | |
| All | Not recommended  No authorized product |  |  |  |  |  |
| **5 years of age** |  |  |  |  |  |  |
| NOT at increased risk for severe diseasea | May be offered one booster  Only Pfizer-BioNTech is authorized | **0.2 mL** (5 mcg of original and 5 mcg of Omicron BA.4/BA.5);  5 to 11 years |  |  |  |  |
| At increased risk for severe diseasea | Should be offered one boosterb  Only Pfizer-BioNTech is authorized | **0.2 mL** (5 mcg of original and 5 mcg of Omicron BA.4/BA.5);  5 to 11 years |  |  |  |  |
| **6 to 11 years of age** |  |  |  |  |  |  |
| NOT at increased risk for severe diseasea | May be offered one booster | **0.2 mL** (5 mcg of original and 5 mcg of Omicron BA.4/BA.5);  5 to 11 years |  | **0.25 mL** (12.5 mcg of original and 12.5 mcg of Omicron BA.1);  6 to 11 years |  |  |
| At increased risk for severe diseasea | Should be offered one boosterb | **0.2 mL** (5 mcg of original and 5 mcg of Omicron BA.4/BA.5);  5 to 11 years |  | **0.25 mL** (12.5 mcg of original and 12.5 mcg of Omicron BA.1);  6 to 11 years |  |  |
| **12 to 17 years of age** | | | | | | |
| NOT at increased risk for severe diseasea | If have not received a booster since the start of fall of 2022, a booster may be offeredc |  | **0.3 mL** (15 mcg of original and 15 mcg of Omicron BA.4/BA.5) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.1) |  |  |
| At increased risk for severe diseasea | If have not received a booster since the start of fall of 2022, a booster should be offeredc |  | **0.3 mL** (15 mcg of original and 15 mcg of Omicron BA.4/BA.5) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.1) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.4/BA.5)  Off labeld |  |
| **18 to 64 years of age** | | | | | | |
| NOT at increased risk for severe diseasea | Should be offered at least one booster. In addition, if previously received a booster, may be offered a booster if one has not yet been received since the start of fall of 2022c. |  | **0.3 mL** (15 mcg of original and 15 mcg of Omicron BA.4/BA.5) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.1) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.4/BA.5) | **0.5 mL** (5 mcg)  Not yet reviewed by NACI |
| At increased risk for severe diseasea | If have not received a booster since the start of fall of 2022, a booster should be offeredc. In addition, those who are moderately to severely immunocompromised may also be offered a booster starting in the spring 2023. |  | **0.3 mL** (15 mcg of original and 15 mcg of Omicron BA.4/BA.5) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.1) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.4/BA.5) | **0.5 mL** (5 mcg)  Not yet reviewed by NACI |
| **65 years of age and over** | | | | | | |
| All | If have not received a booster since the start of fall of 2022, a booster should be offeredc. In addition, may also be offered a booster starting in the spring 2023. |  | **0.3 mL** (15 mcg of original and 15 mcg of Omicron BA.4/BA.5) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.1) | **0.5 mL** (25 mcg of original and 25 mcg of Omicron BA.4/BA.5) | **0.5 mL** (5 mcg)  Not yet reviewed by NACI |

1. Those at increased risk for severe disease include those with [underlying medical conditions](https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/signs-symptoms-severity.html#a3) (including those who are [moderately to severely immunocompromised](https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-26-covid-19-vaccine.html#a6.4.considerations)), and racialized and marginalized populations who have been disproportionately affected due to a number of intersecting equity factors. Other groups considered at increased risk are identified in the [Interim guidance on planning considerations for a fall 2022 COVID-19 vaccine booster program in Canada](https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/guidance-planning-fall-2022-covid-19-vaccine-booster.html).
2. Children 5 to 11 years of age who already received a booster dose with an original COVID-19 mRNA vaccine are not recommended to receive a bivalent Omicron-containing booster. However, at the provider’s discretion, a bivalent booster dose (as [per recommended interval](#Interval)) could be offered to children considered at high risk of severe COVID-19 who have previously received a booster dose with the original Pfizer-BioNTech Comirnaty mRNA vaccine.
3. The start of the fall 2022 booster program varied across Canadian jurisdictions from August to September 2022. If a booster dose has not been received since the start of fall 2022, it should or may be offered as per the [recommended interval](#Interval), as per the recommendation in [Table 2](#Table2).
4. Moderna Spikevax bivalent BA.4/BA.5 is off label for 12 to 17 years of age but may be considered for those who are moderately to severely immunocompromised as Moderna Spikevax original (50 mcg) as booster may have somewhat higher vaccine effectiveness compared to Pfizer-BioNTech Comirnaty original (30 mcg) as a booster based on a study in adults conducted during the Delta and early Omicron periods.
5. The National Advisory Committee on Immunization (NACI) preferentially recommends mRNA vaccines due to their demonstrated high efficacy and effectiveness and favourable safety profile.

**Key resources:**

* [COVID-19 Chapter of the Canadian Immunization Guide](https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-26-covid-19-vaccine.html)
* [COVID-19 vaccine: Canadian Immunization Guide - Suggested intervals between previous SARS-CoV-2 infection and COVID-19 vaccination](https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-26-covid-19-vaccine.html#a6.2)
* [National Advisory Committee on Immunization (NACI) statements](https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html)
* [Planning guidance for immunization clinics for COVID-19 vaccines: Managing vaccine administration errors or deviations](https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/quick-reference-guide-covid-19-vaccines/managing-administration-errors-deviations.html)
* [Planning guidance for immunization clinics for COVID-19 vaccines: Vaccine product comparison and overview of key features](https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/planning-immunization-clinics-covid-19-vaccines/vaccine-product-comparison-overview-key-features.html)