



AAP's 2026 immunization schedule keeps routine recommendations intact after overhaul of federal schedule

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The AAP continues to recommend vaccines to protect against 18 diseases in its [2026 immunization schedule](#) released Jan. 26, which differs significantly from a federal schedule that underwent an arbitrary overhaul.

The AAP has been publishing its guidance on vaccines for decades. The updated AAP schedule, <https://bit.ly/4pyyV5C>, which is thoroughly researched and rooted in science, contains no changes to AAP's recommendations for routine vaccines.

“As there is a lot of confusion going on with the constant new recommendations coming out of federal government, it is important that we have a stable, trusted, evidence-based immunization schedule to follow and that’s the AAP schedule,” said Pia Pannaraj, M.D., M.P.H., a member of the AAP Committee on Infectious Diseases (COID) and a professor of pediatrics at the University of California San Diego.

The Centers for Disease Control and Prevention (CDC) schedule released in early January removed [routine recommendations](#) for hepatitis A and B, COVID-19, rotavirus, flu and meningococcal disease and downgrades them to immunizations recommended for high-risk groups and/or shared clinical decision-making. It also moved respiratory syncytial virus immunization to the high-risk group, although it still recommends it for all infants under 8 months whose mother did not get vaccinated during pregnancy.

Health officials did not cite new data justifying the changes but instead appear to have modeled the schedule largely after Denmark’s, which has a significantly different population and health care system. They also did not follow the standard process of consulting the CDC’s Advisory Committee on Immunization Practices (ACIP) during a public meeting.

AAP leaders called the CDC’s removal of universal recommendations “dangerous and unnecessary” and is challenging the changes in court. The AAP’s 2026 schedule keeps the routine recommendations intact.

The AAP recommendations for routine immunizations were made after a review of vaccine safety data, the epidemiology of the diseases in the United States, the impact of the diseases and how the vaccines could prevent the diseases and their complications, Dr. Pannaraj said. “And nothing has changed. Therefore, we continue to recommend those vaccines.”

In other differences, the AAP recommends two doses of HPV vaccine starting at ages 9-12 years while the CDC recommends one dose at 11-12 years.

“The evidence of two doses versus one is still under review,” Dr. Pannaraj said. “Until then, the AAP continues to recommend two doses to ensure protection.”

In August, the AAP updated its [COVID-19 vaccine policy](#) to recommend all young children ages 6-23 months get vaccinated along with older children in certain risk groups. The CDC classifies this vaccine under shared clinical decision-making.

“Young children under 2 years of age are at high risk just by age alone even if they don’t have any other underlying disease,” Dr. Pannaraj said.

The AAP also says toddlers can receive either a measles, mumps and rubella (MMR) vaccine plus a monovalent varicella vaccine or the MMRV vaccine for their first dose. The CDC recommends giving them as two separate vaccines.

Federal officials have said insurance coverage and liability protection will continue for all vaccines on the CDC schedule even if they no longer are considered routine. AHIP, a trade association representing the health insurance industry, also [has said](#) its member organizations would cover all immunizations that were recommended by the ACIP as of Sept. 1, 2025, without cost-sharing through the end of 2026.

The AAP has a [long history](#) of providing evidence-based guidance on vaccines and worked with the CDC and others in recent decades to harmonize recommendations when possible. Last August, it [published an independent schedule](#) in the wake of federal officials undermining the rigorous scientific process for making recommendations.

The changes to the AAP schedule since that time are minor, providing clarifications in notes and tables. In addition, some online

resources in the schedule have been updated from federal websites to trusted sites from the AAP and its partners. The AAP also released a [policy statement](#) detailing the changes it has made since November 2024, which can be found at <https://doi.org/10.1542/peds.2025-075754>.

The AAP's 2026 schedule has been endorsed by 12 medical and health organizations representing more than 1 million physicians, pharmacists and other pediatric health care professionals. They include the American Academy of Family Physicians, American College of Nurse Midwives, American College of Obstetricians and Gynecologists, American Medical Association, American Pharmacists Association, Council of Medical Specialty Societies, Infectious Diseases Society of America, National Association of Pediatric Nurse Practitioners, National Medical Association, Pediatric Infectious Diseases Society, Pediatric Pharmacy Association and Society for Adolescent Health and Medicine.

“Following our schedule on time remains the best way to ensure children receive the strongest possible protection,” COID Chair Sean T. O’Leary, M.D., M.P.H., FAAP, said in a press conference. “... We’ll be working with our partners across medicine and public health to ensure that parents have credible, science-backed vaccine recommendations they can trust.”

In July 2025, the AAP and other medical groups filed a lawsuit against the Department of Health and Human Services (HHS), challenging Secretary Robert F. Kennedy Jr.’s unilateral changes to COVID-19 vaccine policy without scientific evidence. The case also includes his decision to replace the CDC’s vaccine advisers with people who lack the credentials and required experience.

On Jan. 19, the groups [filed an amended complaint](#) that seeks to stop implementation of the new federal child and adolescent immunization schedule.

The AAP and more than 200 medical, public health and patient advocacy groups also are [urging Congress](#) to protect access to vaccines.

“The confusion and chaos caused by these changes may make parents doubt the benefits of vaccines and delay or skip these vaccines for their children, with devastating and foreseeable impacts,” the groups said.

While the CDC schedule is discussed in court and in Congress, AAP infectious disease experts are urging pediatricians to continue vaccinating children using the AAP schedule and to continue to be a trusted source of information for parents.

“Our role as pediatricians is to cut through all that noise and understand what the science actually shows so that parents can make informed decisions with confidence alongside their pediatrician,” Dr. O’Leary said.

Resources

- [AAP immunization schedule](#)
- [The AAP will hold a webinar for clinicians on the 2026 immunization schedule at 6 p.m. Central on Jan. 28.](#)
- [Clinician-family immunization communication FAQ](#)
- [AAP Red Book](#)
- [Best practices for immunization](#)
- [Vaccine information statements](#)
- [Information for clinicians on shared decision-making](#)
- [Information for clinicians on standalone immunization counseling](#)
- [Information for parents from HealthyChildren.org on the AAP immunization schedule and the difference between the AAP and CDC schedules](#)
- [AAP Fact Checked articles debunking vaccine misinformation](#)

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