Table 5. RSV Vaccination Guidance by Immunocompromised Population [1-5]

Group	**Suggested timing of RSV vaccine**[*, **]
Solid organ transplant	• At least 2 weeks pre-SOT; or ≥6 months post-SOT, can be given as early as 1 month after transplant during RSV season
Hematologic malignancy	• Optimal timing includes ≥2 weeks before starting treatment and ≥ 6 months after last infusion o For B-cell depletion, consider ≥6 months after last infusion • If optimal timing not feasible, administer during treatment (blunted immune response likely)
HCT/CAR-T	• Optimal timing includes ≥6 months after transplant or CAR-T treatment o For B-cell depletion, consider ≥6 months after last infusion • If optimal timing not feasible, administer during treatment (blunted immune response likely)
Solid tumor chemotherapy	• Optimally at least 2 weeks before starting therapy; during/after is acceptable
Primary Immuno-deficiency	• Align with IVIG/SCIG or clinic access
Autoimmune immunosuppression	• Optimal timing includes ≥2 weeks before starting treatment and ≥ 3-6 months after last infusion o For B-cell depletion, consider ≥6 months after last infusion • If optimal timing not feasible, administer during treatment (blunted immune response likely)
HIV	• Align with preventive routine care

*Defer during acute transplant rejection treatment or severe/acute illness

**Use shared-decision making for early windows based on levels of community virus circulation