



AAP: CDC plan to remove universal childhood vaccine recommendations ‘dangerous and unnecessary’

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Federal health officials are removing numerous universal childhood vaccine recommendations, a move AAP leaders said is “dangerous and unnecessary.”

Immunizations for hepatitis A and B, rotavirus, respiratory syncytial virus (RSV), flu and meningococcal disease no longer are routinely recommended under a [plan released Monday](#) by the Centers for Disease Control and Prevention (CDC). The agency is overseen by Health and Human Services Secretary Robert F. Kennedy Jr., a longtime anti-vaccine activist.

The AAP will continue to make its own [evidence-based recommendations](#).

“At a time when parents, pediatricians and the public are looking for clear guidance and accurate information, this ill-considered decision will sow further chaos and confusion and erode confidence in immunizations,” AAP President Andrew D. Racine, M.D., Ph.D., FAAP, [said](#) of the new CDC schedule. “This is no way to make our country healthier.”

The CDC said it is classifying immunizations in three categories: recommended for all children, recommended for high-risk children and based on shared clinical decision-making. The move came after a brief review of other countries’ practices. It was not recommended by the CDC’s Advisory Committee on Immunization Practices (ACIP), which Dr. Racine said upends the long-standing process of experts carefully reviewing new data.

Under the new CDC schedule, all children are recommended to be immunized against diphtheria, tetanus, acellular pertussis, *Haemophilus influenzae* type b, pneumococcal disease, polio, measles, mumps, rubella, varicella and HPV. One dose of HPV vaccine will be recommended instead of two, a move that previous ACIP members were considering as stakeholders were examining the data.

Immunizations recommended by the CDC for high-risk children are RSV, hepatitis A, hepatitis B, dengue, meningococcal ACWY and meningococcal B. Risk factors include exposure, underlying conditions and risk of disease transmission. All children whose mother did not receive an RSV vaccine continue to be recommended to receive a dose of a monoclonal antibody.

Rotavirus, COVID-19, influenza, meningococcal disease, hepatitis A and hepatitis B vaccines can be given based on shared clinical decision-making, according to the revised CDC schedule.

Federal health officials said all the childhood vaccines on the schedule, regardless of which of the three categories they fall into, will continue to be covered by private and public insurance, including Affordable Care Act plans, Medicaid, the Children's Health Insurance Program and Vaccines for Children program.

"AAP [continues to recommend](#) that children be immunized against these diseases, and for good reason; thanks to widespread childhood immunizations, the United States has fewer pediatric hospitalizations and fewer children facing serious health challenges than we would without this community protection," Dr. Racine said.

For example, RSV, the leading cause of hospitalization for infants, was cut by as much as half following the implementation of maternal and infant immunization, a [recent study showed](#). Each year, rotavirus prevents an [estimated](#) 40,000 to 50,000 hospitalizations among U.S. infants and young children. Hepatitis B infections in infants and children have dropped 99% since a universal birth dose was recommended in 1991. About 89% of children who died of influenza last season [were not fully vaccinated](#).

The AAP also has been vocal about the difficulties of implementing shared clinical decision-making as it lacks clear guidance and does not emphasize the importance of vaccinating people at high risk of severe disease. When Kennedy unilaterally implemented it for the COVID vaccine earlier this year, it caused confusion among doctors, pharmacists and patients, leading to [denial of vaccines](#), increased stress and [uncertainty about eligibility and insurance coverage](#).

The CDC's immunization schedule changes follow a [Dec. 5 memo](#) from President Donald J. Trump directing health officials to examine the U.S. schedule and how it compares to other countries. Health officials said the changes are based on 20 peer nations and that they will be similar to Denmark, which has among the lowest number of recommended childhood vaccines with just 10. However, they did not address the different disease risks, health care systems and well-child visit schedules in Denmark and other countries.

Sean T. O'Leary, M.D., M.P.H., FAAP, chair of the AAP Committee on Infectious Diseases, said Denmark is an outlier among peer nations, not the U.S.

"You can't just copy and paste public health," Dr. O'Leary said. "Different countries face different disease risks. ... There's no evidence that skipping or delaying certain vaccinations is beneficial for U.S. children. There's no scientific reason to believe that Denmark's vaccine recommendations are safer. What we do know is anytime a child goes without recommended immunizations, they're at risk for these diseases that we can prevent with a very simple, safe, effective intervention. All of (these diseases) can be severe, they're all life-threatening and often have lifelong consequences."

Dr. Racine is urging parents to talk to their pediatricians.

“As a parent, you know your child and what they need to thrive,” he said. “Your child’s pediatrician has the medical training, special knowledge, and scientific evidence about how to support children’s health, safety and wellbeing. Working together, you can make informed decisions about what’s best for your child. If you have questions about vaccines or anything else, your child’s pediatrician is there to help.”

Resources

- [AAP immunization schedule](#)
- [AAP Fact Checked article on vaccine recommendations being appropriate for children in the U.S.](#)
- [Information for parents from HealthyChildren.org on the AAP immunization schedule](#)

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