Adult COVID-19 Vaccination:
A guide for primary care

Lung Foundation Australia

Check whether your adult patients are due for COVID-19 vaccination

COVID-19 continues to cause severe respiratory illness, hospitalisation and death, particularly in older adults and people with medical conditions that increase their risk of severe disease.[1] Protection from vaccination and prior infection may decrease over time.[2]

Check your patient's Immunisation History Statement, assess individual risk and recommend COVID-19 vaccination when appropriate.

COVID-19 vaccination at a glance[3]

Patient group	Recommendation	Frequency	National Immunisation Program Funding
Adults ≥75 years	Recommended	Every **6 months**	**Funded**
Adults 65–74 years	Recommended	Every **12 months**; consider every 6 months	**Funded** (only every 12 months)
Aboriginal and Torres Strait Islander adults 50–74 years	Recommended	Every **12 months;** consider every 6 months	**Funded** (only every 12 months)
Adults ≥18 years **with** severe immunocompromise*	Recommended	Every **12 months**; consider every 6 months	**Funded** (only every 12 months)
Adults 18–64 years with medical conditions increasing risk of severe COVID-19 with a medical risk condition but **without** severe immunocompromise**	Can be considered	Every **12 months**	Not NIP funded (must be purchased privately)
Adults 18–64 years	Can be considered	Every **12 months**	Not NIP funded (must be purchased privately)

* What counts as severely immunocompromised?

Examples include:[3]

- Haematological malignancies
- Recent transplantation
- Certain cancer, autoimmune or inflammatory conditions
- HIV infection or inborn errors of immunity
- Chronic kidney disease on dialysis

*Examples are not exhaustive. Not all immunosuppressive therapies are considered severely immunocompromising. Refer to the **Australian Immunisation Handbook** for full criteria.*

**COVID-19 and chronic respiratory disease

Chronic respiratory conditions including **COPD, severe asthma, cystic fibrosis, and bronchiectasis** are medical risk conditions associated with an increased risk of severe COVID-19.[3,4]

Although COVID-19 vaccination is not recommended or funded solely on the basis of chronic respiratory disease, further doses can be considered based on individual circumstances and risk-benefit assessment.

Use routine respiratory and chronic disease appointments as an opportunity to discuss COVID-19 vaccination.

Check the Immunisation History Statement

Due and overdue COVID-19 vaccination for adults aged 65 years and over and First Nations adults aged 50 years and over will now appear on the patient's Immunisation History Statement.[5]

Use this as a prompt to check and discuss COVID-19 vaccination during routine consultations.

Why recommend a COVID-19 vaccination?

Protection decreases over time.[2] Older adults who received a COVID-19 vaccine more than 12 months ago had almost twice the risk of dying from COVID-19 compared with those vaccinated within the previous 3 months.[6]

Previous infection doesn't replace vaccination. Patients with a history of SARS-CoV-2 infection can receive further vaccination according to the recommended schedule.[3]

Patient communication prompts

A recommendation from a health professional is one of the strongest predictors of vaccine uptake among patients.[7,8] Use these prompts to support clear, confident conversations with your patients about vaccination.

"I already had COVID-19."

Previous infection provides some protection, but ongoing vaccination provides protection against severe illness. You can receive vaccination according to the recommended schedule.

"I've already had my flu vaccine"

That's great. COVID-19 and flu can both cause serious respiratory illness. Let's also check whether you're due due for a COVID-19 vaccination. It can be given at the same time as other vaccines, including the flu vaccine.

"I had my COVID-19 vaccine last year."

Protection decreases over time. Let's check whether you're due for a vaccination based on your age and individual risk.

"I've had too many vaccines"

It's understandable to feel this way. Recommendations are based on age and individual risk to provide protection when it is most likely to benefit you.

"Do I still need a COVID-19 vaccination?"

Chronic respiratory conditions can increase your risk of severe COVID-19. Although vaccination isn't routinely recommended or funded based on respiratory disease alone, we can discuss whether vaccination may benefit you.

"I'm healthy. Why do I need another one?"

Your risk of severe COVID-19 may be low, but recommendations are based on the potential benefits and risks for each individual. Let's discuss whether vaccination is right for you.

References

1. Kamalakkannan A et al. *Med J Aust.* 2024:221 Suppl 9:S18-S22. **2.** B Liu et al. *Lancet Reg Health West Pac.* 2023:40:100928. **3.** Australian Technical Advisory Group on Immunisation (ATAGI). Australian Immunisation Handbook. Australian Government Department of Health and Aged Care: Canberra. 2022. immunisationhandbook.health.gov.au. **4.** Asthma Australia. Severe asthma and COVID-19. Asthma Australia, Sydney. 2026. https://asthma.org.au/severe-asthma-and-covid-19/. **5.** National Immunisation Program. Update for immunisation providers: COVID-19 vaccine NIP transition. Australian Government Department of Health and Aged Care, Canberra, 2026.https://www.health.gov.au/resources/publications/covid-19-vaccines-update-for-immunisation-providers. **6.** National Centre for Immunisation Research and Surveillance Australia (NCIRS). Why is COVID-19 vaccination important for older adults? NCIRS, Westmead,NSW. 2026. https://ncirs.org.au/covid-19/covid-19-vaccination-resource. **7.** Taksdal SE et al.*Aust Fam Physician.* 2013;42(8):582-6. **8.** Seale H et al. Med J Aust. 2011;195(6):336-8.

Stay up to date

For current advice, refer to:

- **Australian Immunisation Handbook**
- **Australian Technical Advisory Group on Immunisation (ATAGI)**
- **National Immunisation Program (NIP)**

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