

Immunizations

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Status: Revised Position Statement

Adopted By: ANA Board of Directors

I. PURPOSE

Historically, the American Nurses Association (ANA) has strongly supported immunizations across the lifespan to protect the public from highly communicable and deadly diseases such as measles, mumps, diphtheria, pertussis, COVID-19, and influenza (ANA, 2023; ANA, 2019; ANA, 2015; ANA, 2006), and has supported mandatory vaccination policies for registered nurses and healthcare personnel (HCP) under certain circumstances. Considering several recent and significant measles outbreaks in the United States, the increase in immunization mis- and dis-information, fundamental governmental health and human services shifts, as well as the global pandemic of COVID-19, ANA has revised its position statement for clarity and intent and examined present best practices and recommendations from the broader healthcare community.

II. STATEMENT OF ANA POSITION

Effective protection of the public mandates that all individuals receive immunizations against vaccine-preventable diseases according to the best and most current evidence. All healthcare personnel (HCP), including registered nurses (RNs), should be vaccinated according to current recommendations for immunization of HCP based on age and evidence that is validated, and informed by current peer-reviewed research. ANA also believes that it is imperative for everyone to receive immunizations for vaccine-preventable diseases as vaccines are critical to infectious disease prevention and control. Moreover, nurses have a professional and ethical obligation to model healthcare standards.

ANA does not support any exemptions, including for philosophical or religious reasons, from immunization other than for medical contraindications. All requests for medical exemption from vaccination should be accompanied by documentation from the appropriate authority to support the request and reauthorized on an annual basis. Individuals exempted from vaccination may be required to adopt measures or practices in the workplace to reduce the chance of disease transmission. Employers should offer reasonable accommodation in such circumstances.

As novel diseases emerge, ANA supports ongoing research and development of safe, easily accessed vaccinations for these public health threats. Vaccinations must be available and accessible to all to ensure public health and safety.

III. BACKGROUND

Since the early 1700's, vaccines have been researched and used to prevent the spread of infectious diseases such as smallpox, polio, and influenza. (World Health Organization, n.d.) Today, vaccination hesitancy and noncompliance coupled with outbreaks of once eradicated and vaccine-preventable illnesses have complicated public health's approach to protection. In 2020, the COVID-19 pandemic brought immunizations and their approval processes under further scrutiny, while the global shutdown and subsequent infection control practices resulted in many people neglecting to get their routine vaccinations. In recent years, the US has seen broad measles outbreaks, particularly in unvaccinated communities (Centers for Disease Control and Prevention, 2025a). Contributing to these outbreaks is the significant mis- and dis-information that is prevalent in social media and other communication sources.

The Public

The reduction or elimination of vaccine-preventable diseases is one of the greatest public health achievements of the United States (CDC, 2011). Findings from current evidence and research support that immunizations are one of the most effective tools in the prevention of disease from infancy throughout adulthood. Effective vaccination programs for children and adults promote and maintain the health of the populace and communities (CDC, 2024b). Even with some vaccine programs in place, the number of flu-related deaths (2023-2024 flu season) was estimated to be 28,000, with hundreds of thousands more people hospitalized due to the severity of symptoms (CDC, 2024b).

Registered Nurses, Ethics, and Vaccine Hesitancy

The COVID-19 pandemic was defined by the constant and rapid stream of changing information, often affecting how nurses practice and how the public viewed vaccination research and safety. Mis- and disinformation was and is highly visible in the media. These fluctuations in information can lead to caution and hesitancy. ANA's *Code of Ethics for Nurses (Code)* states that "nurses have a responsibility to combat the dissemination of health misinformation and disinformation" (ANA, 2025, p. 14). Additionally, some nurses may struggle - to balance personal concerns with obligations to colleagues and patients. When faced with uncertainty about choosing a course of action, nurses are encouraged to turn to the *Code* for guidance.

Provision 1 of the *Code* affirms the nurse's responsibility to promote health and safety, prevent illness and injury, and protect and preserve the health of the public. Interpretive statement 1.4 of the *Code* also supports the right to self-determination. Patients and nurses have the right to make individual choices. However, individual choices may conflict with organizational policies, professional guidelines, and may also impact the health and safety of others. The consequences of these choices may affect the individual nurse's ability to practice.

Nurses are in a unique role to assist patients with decisions about their care and offer accurate, truthful, and non-coercive information that empowers patients to make informed choices. Nurses have an ethical obligation to remain educated and informed in order to fulfill this responsibility effectively. Interpretive statement 1.4 also recognizes that individuals are members of their communities. There may be situations in which one's choices may compromise the health and welfare of the community, requiring nurses to thoughtfully navigate the balance between individual autonomy and public welfare.

Provision 2 of the *Code* states that the nurse's primary commitment is to the recipient(s) of nursing care, whether an individual or population. Participating in recommended evidence-based vaccination protects individuals and contributes to herd immunity, ultimately preventing community transmission and morbidity.

Provision 3 directs nurses to function as leaders who actively participate in assuring safe and appropriate use of interventions to optimize the health and well-being of those in their care. This includes acting to minimize unwarranted, unwanted, or unnecessary medical treatment and patient suffering. Participating in evidence-based vaccination provides nurses the opportunity to model optimization of health.

Provision 5 invites nurses to examine conflicts that arise between their own personal and professional values, the values and interests of others, and the values and interests of patients themselves. Nurses are called to address these conflicts in a way that ensures patient safety and promotes the patient's best interest while preserving professional integrity. This provision also acknowledges that maintaining integrity includes recognizing and honoring the nurse's own well-being. In addition to their duty to patients, nurses also have an obligation to themselves. Interpretive statement 5.1 outlines nurses have a duty to take care of their own health and safety.

These provisional statements from the *Code* support an ethical obligation to participate in and promote vaccination programs. When considering vaccination, nurses must remember their ethical duties towards their patients and the common good.

Furthermore, the Nursing Scope and Standards of Practice (4th Edition) in Standard 7 Ethics asks nurses to contribute “to the establishment and maintenance of an ethical environment that is conducive to safe, quality health care” and Standard 12 Leadership states that nurses implement “evidence-based practices for safe, quality health care, and healthcare consumer satisfaction (ANA, 2021).

It is therefore highly recommended that nurses are fully vaccinated to model public health maintenance standards, foster patient trust in the medical community, and affirm the proven clinical safety and effectiveness of vaccinations.

Immunization of HCP

Many states do not have legislation requiring vaccination of HCPs. Therefore, the responsibility falls upon hospitals and other healthcare facilities to develop and enforce their own policies. Evidence of vaccination against highly communicable diseases such as mumps, measles, and rubella, as well as an annual influenza immunization, is often a prerequisite of employment in healthcare facilities.

Vaccination programs can use two different approaches which hinge on whether vaccinations are voluntary or mandated. During the 2022-2023 flu season, immunization rates among HCPs under a voluntary influenza vaccination program achieved only 75.9 percent coverage signaling that improvement in vaccine uptake is needed (CDC, 2025). Other facilities that have adopted mandatory influenza vaccination policies and programs like those used in Veteran Administration’s hospitals have been highly successful, with 96% of VA hospitals participating (Greene et al, 2024). Such adoption rates support the need for mandatory immunization programs where voluntary programs fail to protect the health of the public.

All individuals may apply for a medically contraindicated vaccination exemption that meets standard criteria. Formal documentation from an appropriate authority such as a healthcare provider must accompany an exemption request that details the condition that compels the request. This medical exemption should be recertified annually.

If an RN or other HCP is medically exempt from vaccination, the healthcare facility will have the discretion to determine what steps, if any, unvaccinated RNs or HCPs must take to reduce the risk of transmitting disease to patients, while complying with all local, state and national regulations. Refusal by RNs or other HCPs to: (a) participate in a mandatory vaccination program, or (b) if medically exempted from vaccination, to follow steps to reduce the risk of disease transmission, may result in disciplinary action by the employer and jeopardizes patient and employee health.

IV. RESPONSIBILITIES OF REGISTERED NURSES AND EMPLOYERS

Successful immunization policies and programs require open communication and transparency between RNs and employers. RNs are responsible for providing patients with evidence-based information to support and promote optimal health and wellness, and for leading by example by participating in health-oriented activities such as immunizations to the greatest possible extent. “Public trust will be damaged if [nurses] appear to suggest vaccines for others but avoid them for themselves” (Galanakis, Jansen, & Lopalco, 2013).

Nurses must advocate for, educate, and advise patients to adhere to vaccination schedules recommended by solid research and the patient’s healthcare provider, explaining their need and public health implications. Patients’ fears and questions regarding immunizations should be acknowledged and then answered with evidence-based information. Nurses must emphasize that recommended immunizations are safe and necessary. Please see sections V and VI below for resources to assist with this messaging.

Employers of RNs are responsible for establishing a culture of safety and implementing policies that improve the health of their workers. The Infectious Diseases Society of America, the Society for Healthcare Epidemiology of America, and the Pediatric Infectious Diseases Society recommend that immunizations be provided in the work setting at no cost to HCPs to ensure access to vaccinations, and that workplace immunization programs include appropriate education and training of staff (IDSA, SHEA, & PIDS, 2013).

If RNs are represented by a union or collective bargaining unit, the employer should work with a designated representative to clarify or resolve any issues that may arise associated with implementation of a mandatory vaccination policy or program.

V. SUMMARY OF RELEVANT ANA PUBLICATIONS AND INITIATIVES

ANA’s Immunize Website

ANA’s Immunize website (<https://www.nursingworld.org/practice-policy/work-environment/health-safety/immunize/>) provides nurses and other HCPs with resources related to immunizations.

ANA Healthy Nurse, Healthy Nation (HNHN) Program

Healthy Nurse, Healthy Nation (HNHN), available at www.hnhn.org is a free, online nurse wellness program designed to elevate the health of the nation by first supporting the well-being of

nurses. Open to all, HNHN fosters connection and engagement among nurses and organizations across six key domains: physical activity, rest, nutrition, quality of life, mental health, and safety. Within the safety domain, HCP immunizations are a focus area.

VI. ADDITIONAL RESOURCES

Centers for Disease Control and Prevention. (n.d.) Vaccines and Immunizations. Available at <https://www.cdc.gov/vaccines/index.html>

Champions for Vaccine, Education, Equity + Progress. (2025). Homepage. Available at <https://cveep.org/>

Immunize.org. Homepage. (2025). Available at <https://www.izsummitpartners.org/resources/>

National Adult and Influenza Immunization Summit. (2025). Resources. Available at <https://www.izsummitpartners.org/resources/>

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