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Sent: Wednesday, March 25, 2026 1:32 PM
Subject: Consider RSV infant monoclonal antibody administration through April due to late RSV activity

CONNECTICUT
Public Health

March 25, 2026

Extended RSV mAB Clinical Recommendations for the 2025-2026 Respiratory Disease Season

- The Connecticut Department of Public Health (CT DPH) is advising providers to **consider continued administration** of respiratory syncytial virus (RSV) monoclonal antibody (mAB), nirsevimab and clesrovimab, to eligible infants for the prevention of severe RSV disease through April 30, 2026.
- This recommendation is based on ongoing RSV activity observed in Connecticut and the immediate region.
- The optimal timing for administration of RSV mAB is shortly before RSV activity begins, and seasonal vaccination is usually recommended from October 1 through March 31. RSV antibodies do not provide long-term immunity from RSV disease but can provide protection for approximately 5 months after administration.
- Providers should use clinical judgment when weighing current and future risk of severe RSV disease. Infants not considered high risk who receive the RSV mAB at the end of the 2025-2026 season are not eligible to receive a second dose during the 2026-2027 season.
- High-risk infants may need more than one dose. An initial dose can be given during the 2025-2026 season and, if medically necessary, a second dose can be given during the 2026-2027 season. See the AAP Immunization Schedule for high-risk recommendations.

Additional Guidance and Reminders:

- Please note that this extension does not apply to the RSV vaccine given to pregnant individuals.
- Health care providers should continue to assess RSV immunization status of pregnant individuals and infants and administer RSV mAB immunization to eligible infants who have not yet received protection during the current RSV season through April 30, 2026.

Connecticut Vaccine Program (CVP): RSV monoclonal antibody Ordering

CVP-enrolled pediatricians and birthing hospitals should ensure they have sufficient inventory of RSV mAB products needed through the end of April. If your clinic needs additional doses of nirsevimab or clesrovimab, please submit an order in CT WiZ. CVP Providers will be able to order additional RSV mAB in March and April, as needed. However, DPH is monitoring requests and may offer a transfer of doses from another provider to better utilize in-state supply.

Reminders below of the protocol for any inventory on hand:

- All unexpired doses must continue to be stored at proper temperatures and can be administered for the 2025-2026 season.
- If you currently have doses your clinic will not be able to administer, please submit a help desk ticket and select:
    - **System**-Immunizations (CT WiZ)
    - **Category**-Clinic Administration
    - **Topic**-CT WiZ Training and Inventory Support
    - **Sub-topic**-CT WiZ Inventory Management

DPH will provide you with a list of potential transfer clinics.

RSV Immunization Resources

- 2025-2026 Viral Respiratory Disease Surveillance Dashboard (CT DPH) – Use this dashboard to monitor RSV trends in Connecticut.
- Nirsevimab Administration Visual Guide (AAP) - Use this decision tree to determine the right Nirsevimab dose, follow safe storage and injection practices, and ensure the vaccine is administered correctly.
- RSV Immunization Administration Frequently Asked Questions (AAP)
- RSV Information for Health Care Providers (Immunize.org) - Guidance on nirsevimab and clesrovimab use, RSV prevention, and current vaccine recommendations for older adults, pregnant people, and infants.
- Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus Disease Among Infants and Young Children: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023 (CDC MMWR)
- Use of Clesrovimab for Prevention of Severe Respiratory Syncytial Virus–Associated Lower Respiratory Tract Infections in Infants: Recommendations of the Advisory Committee on Immunization Practices — United States, 2025 (CDC MMWR)

Thank you for your continued support and cooperation.

For the CT DPH Immunization Program, visit: Contact Us

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