Background
Influenza viruses typically circulate in the United States annually, most commonly from the late fall through early spring. Most persons who become ill with the flu recover without serious complications or sequelae. However, during the COVID-19 pandemic, the possibility of concurrent or consecutive flu and COVID-19 infections could increase the risk of more severe complications. Ensuring routine flu and other vaccinations during the COVID-19 pandemic is essential for protecting individuals and communities, and preventing illnesses that lead to unnecessary medical visits, hospitalizations, and further strain on the healthcare system. For the upcoming influenza season, flu vaccination will be essential in reducing respiratory illnesses in the population.

Recommendations
The United South and Eastern Tribes (USET) Tribal Epidemiology Center (TEC) recommends annual influenza vaccination for all persons (except those who are younger than 6 months of age or have a severe, life-threatening allergy to the flu vaccine or any ingredient in the vaccine) to decrease morbidity and mortality caused by influenza.¹ Healthcare providers should utilize the quadrivalent vaccine for patients when available. Intranasal flu vaccination is once again available for low-risk people between the ages of 2-49. Widespread flu vaccination will increase herd immunity and protect vulnerable populations. The flu vaccine should be given as soon as possible to decrease the rate of flu and the potential impact of severe disease due to concurrent or consecutive COVID-19 and influenza infection. The USET TEC also recommends that Tribal Nations consider the flu vaccine for all Tribal citizens, household contacts of Tribal citizens, Tribal Nation employees, and other community members. In cases of limited supply, priority for flu vaccines should be given to:

- All children aged 6 through 59 months;
- All persons aged ≥ 50 years;
- Adults and children who have chronic pulmonary (including asthma), cardiovascular (excluding isolated hypertension), renal, hepatic, neurologic, hematologic, or metabolic disorders (including diabetes mellitus);
- Persons who are immunocompromised due to any cause (including but not limited to immunosuppression caused by medications or human immunodeficiency virus [HIV] infection);
- Women who are or will be pregnant during the influenza season;
- Children and adolescents (aged 6 months through 18 years) who are receiving aspirin- or salicylate-containing medications and who might be at risk for experiencing Reye syndrome after influenza virus infection;
- Residents of nursing homes and other long-term care facilities; and
- Persons who are extremely obese (body mass index ≥ 40 for adults).

¹ CDC: Who Should and Who Should NOT Get a Flu Vaccine