Definitions for severely or moderately immunocompromised patients	
Severely immunocompromised patients:	1. Solid organ transplant recipient 2. Being actively treated for hematological malignancy 3. Received bone marrow or stem cell transplant 4. Taken anti-CD20 agents or B cell depleting agents 5. Severe primary immune deficiencies 6. Taken anti CD20 agents or B cells depleting agents for non hematological reason
Moderately immunocompromised patients:	1. Received treatment for cancer including solid tumors: a. Have received or are receiving systemic therapy (including chemotherapy, molecular therapy, immunotherapy, targeted therapies including CAR-T, monoclonal antibodies other than the hematological malignancies noted above (severely immunocompromised patients), EXCEPT those receiving adjunctive hormonal therapy ONLY b. Have received or are receiving radiation therapy for cancer 2. Taken significantly immune suppressing medication who are not already captured above (severely immunocompromised patients): a. Biologics: abatacept, adalimumab, anakinra, benralizumab, brodalumab, canakinumab, certolizumab, dupilumab, etanercept, golimumab, guselkumab, infliximab, interferon products (alpha, beta, and pegylated forms), ixekizumab, mepolizumab, natalizumab, omalizumab, resilizumab, risankizumab, sarilumab, secukinumab, tildrakizumab, tocilizumab, ustekinumab, or vedolizumab; b. Oral immune-suppressing drugs: azathioprine, baricitinib, cyclophosphamide, cyclosporine, leflunomide, dimethyl fumerate, everolimus, fingolimod, mycophenolate, siponimod, sirolimus, tacrolimus, tofacitinib, upadacitinib, methotrexate, or teriflunomide; c. Oral steroids on an ongoing basis: dexamethasone, hydrocortisone, methylprednisolone, or prednisone; vi. Immune-suppressing infusions/injections: cladribine, cyclophosphamide, glatiramer, methotrexate 3. Advanced untreated HIV infection or those with acquired immunodeficiency syndrome (AIDS) defined as AIDS defining illness or CD4 count ≤ 200/mm3 or CD4 fraction ≤ 15% 4. Moderate primary immunodeficiencies: Have a moderate to severe primary immunodeficiency which has been diagnosed by an adult or pediatric immunologist and requires ongoing immunoglobulin replacement therapy (IVIg or SCIG) or the primary immunodeficiency has a confirmed genetic cause (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome) 5. Glomerulonephritis and receiving steroid treatment