

To view an online version of these FAQs, visit the vaccine webpage.

Updated 1/7/22: This FAQ provides information on the three FDA-authorized/approved COVID-19 vaccines that are available in the US. These vaccines are made by Moderna, Pfizer, and Janssen/Johnson & Johnson (J&J).

Why is it important to get vaccinated?

It is important to get vaccinated because it is the best way to prevent COVID-19. The vaccines protect people from getting very sick from COVID-19 and ending up in the hospital or dying. They also reduce the risk of becoming chronically ill from COVID-19 and from missing work and school.

Getting vaccinated not only protect ourselves, but also our family and friends. This is especially helpful in protecting people who are not vaccinated and those at higher risk of getting severe disease if they get COVID-19, such as <u>older adults</u> and those with <u>certain medical conditions</u>.

People who've had COVID-19 in the past, should still get the vaccine because they could get infected again. Natural immunity alone does not offer much protection against the Omicron variant. Studies show that those who are vaccinated are better protected.

You can do your part to help stop the pandemic by getting vaccinated.

How well do the vaccines work?

The vaccines work very well at protecting against severe illness, hospitalization, and death against both the Delta and Omicron variants. While vaccines aren't as effective at preventing infection from Omicron, boosters greatly improve it. This is why it is strongly recommended that anyone age 12 and over gets a booster dose when it is due.

The Pfizer and Moderna vaccines are recommended for both primary and booster vaccine doses. They offer better protection against COVID-19 than the J&J vaccine. Also, the potential risks from the J&J vaccine, while still very rare, are greater.

It takes time for your body to build immunity to COVID-19 after you get a vaccine. In addition, once you are vaccinated, there is still a risk that you could get infected. This is called breakthrough infection. When vaccinated people do get infected, they don't usually get as sick as unvaccinated people and their symptoms normally don't last as long. The risk of breakthrough infection appears to be higher with the Omicron variant, especially for people who have not had a booster dose.

As the science and the virus evolves, so do vaccine recommendations. Scientists and medical experts continue to closely watch for signs of decreased immunity in people of different ages and with different risk factors. They also look at how well the vaccines protect against new variants of the virus.

Which vaccines are available in the US?

There are three COVID-19 vaccines with US Food and Drug Administration (FDA) approval or emergency use authorization (EUAs) for use in the US. These vaccines are made by Janssen/Johnson & Johnson (J&J), Pfizer-BioNTech, and Moderna.





COVID-19 VACCINES - FREQUENTLY ASKED QUESTIONS

On 8/23/21 the FDA issued full approval for the Pfizer COVID-19 vaccine to be used in a 2-dose series for people age 16 and over. The vaccine is now marketed under the brand name COMIRNATY. The Pfizer vaccine continues to be authorized by the FDA as a 2-dose series for adolescents 12 through 15 years old, as an additional dose for some people with <u>weakened immune systems</u>, and as a <u>booster</u> for certain people age 12 and over. On 10/29/21 the FDA authorized a pediatric dose of the Pfizer vaccine for children 5-11.

Pfizer plans to request full approval for children ages 12-15 once it has collected and analyzed six months of safety data. Moderna has also applied for full approval of its COVID-19 vaccine, and the FDA is currently reviewing that data.

The CDC now recommends the Pfizer and the Moderna COVID-19 vaccines over the J&J vaccine. Pfizer and Moderna are recommended for both primary and booster vaccine doses. This is because they offer better protection against COVID-19 than the J&J vaccine. In addition, the potential risks from the J&J vaccine, while still very rare, are greater.

The J&J vaccine is still available for:

- Those who can't get a Pfizer or Moderna vaccine for medical reasons (such as severe allergic reaction to a vaccine ingredient).
- Those who prefer it.

What is the difference between emergency use authorization (EUA) and full approval?

For the COVID-19 vaccines, the FDA required two months of safety and efficacy data before the EUA was granted. That included clinical trials with tens of thousands of people and rigorous testing and review. All the vaccines continue to be closely monitored for safety and efficacy.

For full approval of a COVID-19 vaccine, the FDA requires more data on safety, manufacturing, and effectiveness over longer periods of time as well as real-world data.

What does the Pfizer vaccine FDA approval mean?

It means that the Pfizer (COMIRNATY) vaccine now has the same level of approval as vaccines that protect us against many other infections. These include hepatitis, measles, chicken pox, and polio vaccines to name a few. Before approving COMIRNATY, the FDA completed analysis of the additional effectiveness and safety data on top of the rigorous testing and trials that went into the EUA. This included data from approximately 12,000 people who were followed for at least 6 months and data from real-world safety monitoring systems. The FDA's full approval is an important milestone that should reassure people who have concerns about getting vaccinated.

DOSES OF VACCINE

How are the vaccines given?

- The Pfizer vaccine is given as 2 doses 21 days apart.
- The Moderna vaccine is given as 2 doses 28 days apart.
- The J&J/Janssen vaccine is given as a single dose.





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This is known as the primary series. With all 3 vaccines, you are not considered to be <u>fully vaccinated</u> until 2 weeks after your last vaccine of your primary series. BUT getting a booster dose (when it is due) provides the best protection.

If you are late getting the second dose of a 2-dose series, you do not need to start over.

If you have a moderately or severely weakened immune system (immunocompromised) and already received 2 doses of an mRNA vaccine (Pfizer or Moderna), it is recommended that you get an additional (3rd) dose of the same vaccine. This should be given 28 days or more after your 2nd dose. If you received the J&J vaccine initially, it is recommended that you get a booster at least 2 months later. The booster dose may be any COVID-19 vaccine but either Pfizer or Moderna is preferred.

Note: if you are fully vaccinated with a non-FDA authorized/approved vaccine and are moderately or severely immunocompromised, an additional dose of Pfizer vaccine is recommended 28 days or more after completing your primary series. The Pfizer COVID-19 vaccine is the only vaccine currently authorized as an additional dose for people who did not receive an FDA authorized/approved COVID-19 vaccine series. For more information, see Can people with weak immune systems get a COVID-19 vaccine? below.

A booster dose is recommended for everyone age 12 and older. If you received the J&J vaccine as your primary series, a booster dose is recommended 2 months later. If your primary series was Pfizer or Moderna, the booster dose is recommended at least 5 months after your second dose. For people age 18 and over, the booster can be any of the three COVID-19 vaccines but either Pfizer or Moderna is preferred over J&J. For people age 12 to 17, the booster must be Pfizer.

Note: if you are fully vaccinated with a non-FDA authorized/approved vaccine, a booster dose of Pfizer vaccine is recommended at least 5 months after completing your primary series. The Pfizer COVID-19 vaccine is the only vaccine currently authorized as a booster dose for people who did not receive an FDA authorized/approved COVID-19 vaccine series. (see Who are booster doses recommended for? below).

When am I considered to be fully vaccinated?

You are considered <u>fully vaccinated</u> against COVID-19 two weeks after:

- You got a single dose of Johnson & Johnson (J&J)/Janssen COVID-19 vaccine, or
- You got a second dose of a Pfizer (COMIRNATY) or Moderna COVID-19 vaccine, or
- You finished the series of a COVID-19 vaccine that has been <u>listed for emergency use</u> by the World Health Organization.

A booster dose is recommended for everyone age 12 and over, but you are considered fully vaccinated if you have met the criteria above. This is true even if you are eligible for a booster or additional dose of vaccine but have not received it. Being "fully vaccinated" gives you more freedom to work, visit certain venues, and in some cases to travel with fewer restrictions. BUT getting a booster dose (when it is due) provides the best protection.

For more information for people who are immunocompromised, see <u>Can people with weak immune systems get a COVID-19 vaccine?</u> below.



If I received 2 different COVID-19 vaccines, am I considered to be fully vaccinated?

The CDC does <u>not</u> recommend that people mix-and-match COVID-19 vaccines for the primary series. Because some countries do mix-and-match vaccines, the CDC has guidance for determining when you can be considered fully vaccinated. Per CDC guidance you are considered fully vaccinated 2 weeks after getting the second dose of any combination of vaccines that are approved or authorized by the FDA or listed by the WHO as a 2-dose series. There must be at least 17 days between dose 1 and dose 2 for you to be considered fully vaccinated (21 days with a 4-day grace period).

If I received a COVID-19 vaccine outside the US, am I considered to be fully vaccinated when I am in the US?

- If you got a full series of a COVID-19 vaccine that is approved or authorized by the FDA or <u>listed by the WHO</u>:
 - o You are considered fully vaccinated two weeks after your final dose.
- If you got some or all of a series of a COVID-19 vaccine that is <u>NOT</u> approved or authorized by the FDA or listed by the WHO:
 - You are not considered to be fully vaccinated by US authorities.
 - o If you want to be considered fully vaccinated in the US, you will need to complete a new series of a vaccine that is authorized or approved by the FDA or listed by the WHO. You should wait at least 28 days before starting an FDA authorized/approved COVID-19 vaccine primary series.
- If you started a series of a COVID-19 vaccine that is listed by the WHO but is not available in the US:
 - You are not considered to be fully vaccinated by US authorities.
 - If you are already in the US and want to be considered fully vaccinated, you need to complete a series of a vaccine that is authorized or approved by the FDA. You should wait at least 28 days before starting the FDA authorized/approved COVID-19 vaccine primary series.

If I was vaccinated as part of a clinical vaccine trial, am I considered to be fully vaccinated?

If you took part in the AstraZeneca or Novavax clinical vaccine trial and you received the "active" COVID-19 vaccine (not placebo), you are considered fully vaccinated 2 weeks after receiving your second dose of vaccine. For more information, visit the CDC When you have been fully vaccinated webpage.

Who are booster doses recommended for?

Everyone age 12 and older should get a booster dose. This is very important for everyone, but especially if you are age 65 and older or if you have <u>underlying medical conditions</u>.

When you should get your booster dose depends on which vaccine you originally received (your primary series). Talk to your doctor if you have questions about boosters.





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People who got the J&J vaccine should get a booster dose at least 2 months after their initial J&J dose. This includes if you are immunocompromised. The booster dose may be any COVID-19 vaccine but either Pfizer or Moderna is preferred.

People who got Pfizer or Moderna vaccines should get a booster dose at least 5 months after completing their primary series. People age 18 and over can get any of the 3 vaccines as a booster, but either Pfizer or Moderna is preferred. People 16 and 17 can only get a Pfizer booster.

Note: Booster doses are also strongly recommended for people who are considered fully vaccinated with a non-FDA authorized/approved vaccine. However, the Pfizer COVID-19 vaccine is the only vaccine authorized as a booster for people who did not receive an FDA authorized/approved COVID-19 vaccine series. They should get a Pfizer vaccine booster least 5 months after their completing their primary series.

For more information see Booster Doses.

What are the risks of getting a booster?

Reactions reported after booster doses have been similar to those of the primary series. Overall, most side effects were mild to moderate and lasted 2 days or less. As with the primary series, serious side effects are rare, but may occur. The benefits of getting a booster shot outweigh the known and potential risks.

Will I need to show a doctor's note or prescription to get an additional dose or booster dose?

No. You can self-attest (self-report) if you are eligible. When you go to the location, take proof of vaccination such as your CDC white card or digital vaccination record. Visit the How to Get Vaccinated webpage for more information.

Can people with weak immune systems get a COVID-19 vaccine?

Yes. People with weak immune systems (immunocompromised) are strongly urged to get vaccinated because they are at higher risk of getting COVID-19. They are also more likely to become very sick if they do get infected. This is especially important now that the Delta variant is so common because it is more infectious than previous versions of the virus.

The vaccines may not work as well for people with certain health conditions or who are taking medicine that weakens their immune system¹ (for example, blood related cancers or certain treatments for

Talk to your doctor if you have one of these or a similar condition. For more information, including when additional doses of vaccines are recommended, visit the CDC webpage COVID-19 Vaccines for Moderately to Severely Immunocompromised People.



¹ People who have health conditions or who take medications that weaken their immune system may not get full protection from vaccination. This includes people who have:

Been receiving active cancer treatment for tumors or cancers of the blood

Received an organ transplant and are taking medicine to suppress the immune system

Received a stem cell transplant within the last 2 years or are taking medicine to suppress the immune system

Moderate or severe primary immunodeficiency (such as DiGeorge syndrome, Wiskott-Aldrich syndrome)

Advanced or untreated HIV infection

Active treatment with high-dose corticosteroids or other drugs that may suppress the immune response



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cancer, organ transplants, and certain autoimmune conditions).

If you have a <u>moderately or severely weakened immune system</u> and already got 2 doses of an mRNA vaccine (Pfizer or Moderna), it is strongly recommended that you get an additional (3rd) dose of vaccine. The 3rd dose of mRNA vaccine should be given at least 28 days after the 2nd dose. The same type of vaccine should be used if possible. For example, if you got a series of Pfizer vaccine, try to get a Pfizer vaccine for your 3rd dose. In addition, a booster dose is strongly recommended at least 5 months after you get the 3rd dose and may be any COVID-19 vaccine.

If you are <u>considered fully vaccinated</u> with a non-FDA authorized/approved vaccine and are moderately or severely immunocompromised, an additional dose of Pfizer vaccine is recommended 28 days or more after completing your primary series. In addition, a booster dose of Pfizer vaccine is strongly recommended at least 5 months after you get the 3rd dose. The Pfizer COVID-19 vaccine is the only vaccine currently authorized as an additional or booster dose for people who did not receive an FDA authorized/approved COVID-19 vaccine series.

Talk to your doctor about the need to get an additional dose of COVID-19 vaccine. Ask your doctor about the best timing of your additional and/or booster dose based on your current treatment plan. This is especially important if you are about to start or restart immunosuppressive treatment.

Note: The CDC does not recommend additional doses for people who received the J&J vaccine. It is strongly recommended that you get a booster dose at least 2 months after your initial J&J vaccine dose. The booster dose may be any COVID-19 vaccine but either Pfizer or Moderna is preferred. Talk with your doctor about the best timing based on your current treatment plan. This is especially important if you are about to start or restart immunosuppressive treatment.

If you have a weak immune system, it is very important to continue to protect yourself even if you get a 3rd dose of vaccine and/or a booster dose. This includes wearing a mask that fits and filters well, maintaining physical distance, avoiding crowded places or spaces with poor air flow, and washing hands often. Consider "double masking" (wearing a cloth face mask over surgical mask) or an N95 respirator for a higher level of protection. The people you are in close contact with can help to protect you by getting vaccinated and boosted too.

For more information see **Doses for people who are immunocompromised**

GETTING THE VACCINE

Will I have to pay to get a COVID-19 vaccine?

No. If you have insurance, your doctor or pharmacy may charge your insurance company a fee for giving the vaccine. People without health insurance can also get COVID-19 vaccines at no cost. There are no out-of-pocket payments for anyone.

Will I be asked about my immigration status when I get a COVID-19 vaccine?

No. COVID-19 vaccine is being given at no cost regardless of immigration status. You will not be asked about your immigration status when you get a COVID vaccine. Your medical information is private and





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getting a COVID-19 vaccine does not affect your immigration status. You do not need a government-issued ID or a letter from your employer to get a vaccine. For questions about immigration, visit the Office of Immigrant Affairs webpage <u>oia.lacounty.gov</u> or call 800-593-8222.

Do I need to give a mobile phone number or email address when I get a COVID-19 vaccine?

No. When you get a vaccine, you will be asked to give an email address or mobile phone number. This information will be entered into the State of California immunization registry (CAIR) so that you can get a digital COVID-19 vaccine record. It may also be used to send reminders if more COVID-19 vaccine doses are due or recommended. The digital vaccine record is a free and convenient way to prove your vaccination status. It is especially useful if you lose your white vaccine card. You don't need to provide your email address or cell number to get a vaccine and a white CDC COVID-19 vaccination card. But this may make it harder to get a digital vaccine record later. You can learn more about the digital vaccination record at mayaccinerecord.cdph.ca.gov and about the confidentiality protections here.

How can I get vaccinated?

Vaccines are available at hundreds of locations throughout LA County including clinics, pharmacies, worksites, schools, places of worship, senior housing developments and long-term care facilities. There are also community vaccination sites and mobile or pop-up sites in places like metro stations and parks. In-home vaccination is available for people who are homebound. Some locations do not require an appointment.

To get a vaccine visit <u>VaccinateLACounty.com</u> and select "<u>Click Here to Get Vaccinated</u>" to find a location or <u>request</u> an in-home vaccination. If you need help, you can call the **DPH Vaccine Call Center** at **833-540-0473**, 7 days a week from 8am to 8:30pm. They can arrange in-home vaccination, free transportation to a vaccination site, or help with paratransit and other services for people with disabilities. Information is also available in multiple languages 24/7 by calling 2-1-1.

I just moved to LA County and my 2nd dose of vaccine is due. Where can I get it?

Visit <u>VaccinateLACounty.com</u> (see instructions above) and click on the filter to find a location that offers the same type of vaccine that you got for your first dose. Be sure to bring your CDC vaccination card to your 2nd dose appointment.

Where can I get a copy of my vaccine record?

The CDC COVID-19 Vaccination Record Card (white card) is the official proof of vaccination. Everyone should be given one when they are vaccinated. **Please keep it safe as it cannot be replaced.** Consider taking a photo or making a photocopy of it.

Everyone* who is vaccinated in California can request a digital COVID-19 Vaccination Record at myvaccinerecord.cdph.ca.gov. This is also an official record. It can be downloaded to the Google Pay digital wallet on an Android phone or the Apple Health app on an iPhone. You can also take a screenshot of your Digital COVID-19 Vaccine Record and save it to your camera roll. For more information, visit the Vaccination Records webpage.





*If you were vaccinated by a federal agency (e.g., Department of Defense, Indian Health Service or Veterans Affairs), you must request a vaccine record from the agency directly.

ABOUT THE VACCINE

How do vaccines work?

Vaccines work by preparing your body's natural defenses to recognize and fight off germs that can make you sick.

- Some vaccines have dead or weakened versions of the germ.
- Others have substances made to look like part of the germ.
- The currently available COVID-19 vaccines teach the body to make proteins that look like part of the virus that causes COVID-19. They do not have any form of the COVID-19 virus, live, weakened, or dead. (See the question "How do the COVID-19 vaccines work?" for more information).

When you get any vaccine, your immune system responds by:

- Making antibodies. These are proteins produced naturally by the immune system to fight disease.
- Preparing your immune cells to respond to future infection.
- Remembering the disease and how to fight it. If you are exposed to the germ after getting the vaccine, your immune system can quickly destroy it before you become sick.

This is what makes vaccines so effective. **Instead of treating a disease after it happens, vaccines can prevent us from getting sick in the first place.**

How do the COVID-19 vaccines work?

All 3 COVID-19 vaccines work by teaching our immune cells how to make copycat spike proteins (the crown-like spikes on the surface of the COVID-19 virus). Making the spike protein does not harm our cells.

- Our immune system sees the spike protein and knows that it doesn't belong there.
- Our bodies react by building an immune response. It makes antibodies that can act against the COVID-19 virus's spike protein and it prepares immune cells. This will protect us if we are exposed to the virus in the future.

The COVID-19 vaccines differ in how they teach our cells to make the spike protein.

- The vaccines made by Pfizer and Moderna are called mRNA vaccines. Messenger RNA (mRNA) is genetic material that tells our bodies how to make proteins. The mRNA in the vaccine is wrapped in oily bubbles (known as lipid nanoparticles). When the mRNA enters our cells, it teaches them how to make copies of the spike protein. The mRNA does not enter the cell nucleus and does not interact with DNA in any way.
- The vaccine made by J&J/Janssen is called a viral vector vaccine. The vector (or vehicle) uses a
 harmless virus to carry the genetic material to our cells. Our cells read the genetic material and
 make mRNA, and this mRNA teaches our cells to make the spike protein. The viral vector is a
 harmless version of a common cold virus. It can't replicate inside our cells or cause illness and
 it cannot change our DNA in any way.



You can learn more on the <u>Understanding How COVID-19 Vaccines Work CDC</u> website.

What is in the vaccines?

For a full list of ingredients, please see each vaccine's Fact Sheet for Recipients and Caregivers: Pfizer-BioNTech COVID-19 vaccine, BioNTech COVID-19 vaccine for age 5-11, Moderna COVID-19 vaccine, and J&J/Janssen COVID-19 vaccine. The Pfizer (COMIRNATY) and Moderna vaccines contain Polyethylene Glycol (PEG), and the J&J vaccine contains polysorbate. None of the vaccines contain eggs, gelatin, latex, or preservatives.

Do the COVID-19 vaccines contain aborted fetal cells?

No, none of COVID-19 vaccines available for use in the United States contain any fetal tissue or fetal cells.

- **Pfizer and Moderna** did not use any fetal cell lines to develop or produce their COVID-19 vaccines. But they did use a fetal cell line for laboratory testing before their vaccines were tested on people.
- Johnson & Johnson used a fetal cell line to develop and test their COVID-19 vaccine. They also use it for production. The COVID-19 vaccines themselves do not contain any fetal cells.

The fetal cell lines were made in laboratories from cells from 2 abortions conducted in 1973 and 1985. None of the fetal cells used came from a recent abortion or from an abortion done for the sole purpose of vaccine development or other research.

The Catholic Church has reviewed the use of fetal cells for this purpose and has stated that "it is morally acceptable to receive COVID-19 vaccines that have used cell lines from aborted fetuses in their research and production process." If this issue is of concern to you, we encourage you to review the document COVID-19 Vaccine and Fetal Cell Lines carefully so you can make an informed decision about getting vaccinated.

SAFETY AND SIDE EFFECTS

Can you get COVID-19 from a vaccine?

No. You cannot get COVID-19 from the vaccine. None of the COVID-19 vaccines have the virus that causes COVID-19 in them.

If you get COVID-19 shortly after getting vaccinated, it is because you were infected by someone with COVID-19 around the time you were vaccinated. It can take up to 14 days for symptoms to show after you have been infected. So, if you get infected right before getting vaccinated, you might not get sick until after you get your vaccine.

It is also possible to get infected after you get vaccinated, because it takes time for your body to build immunity. And even though the vaccines are very effective, no vaccine is 100% effective.

Sometimes people get a fever or feel tired for a day or two after getting a vaccine. These vaccine side effects are normal and are a sign that the body is building immunity. They should go away in a few days.





Is it safe for me to get a COVID-19 vaccine if I would like to have a baby one day?

Yes. The CDC and medical professional groups recommend vaccination for everyone aged 5 years and older. This includes people who want to get pregnant now or in the future as well as their partners.

There is no evidence that female or male fertility problems are a side effect of any vaccine, including COVID-19 vaccines. Studies have shown no differences in pregnancy success rates in vaccinated and unvaccinated women. And a small study of men found no changes in their sperm (including the sperm count and movement) after they received a Pfizer or Moderna vaccine. There is also no evidence that COVID-19 vaccines affect puberty or teen's development.

For more information, see the CDC webpage <u>COVID-19 Vaccines for People Who Would Like to Have a Baby</u>.

COVID-19 vaccination is recommended for people who are pregnant – see below.

Is the COVID-19 vaccine recommended for people who are pregnant?

Yes. The CDC and pregnancy experts, including the American College of Obstetricians and Gynecologists, the Society for Maternal-Fetal Medicine, and the American College of Nurse-Midwives recommend that pregnant people get vaccinated against COVID-19. For the best protection, this includes getting a booster dose if age 16 and older as well as the primary vaccine series (2 doses of Pfizer or Moderna vaccine or one dose of J&J vaccine).

COVID-19 is a serious concern during pregnancy. Pregnant and recently pregnant people who get COVID-19 are more likely to become severely ill, be hospitalized, and die compared to people who are not pregnant. In addition, pregnant people are more likely to get complications like preterm birth and stillbirth if they get COVID-19.

COVID-19 vaccination can protect pregnant people from severe illness from COVID-19. In studies of people who have received COVID-19 mRNA vaccines, antibodies against the virus were found in the umbilical cord blood of babies and in breastmilk. This means that vaccination during pregnancy might also help protect babies against COVID-19.

There is no evidence that COVID-19 vaccination causes any problems with pregnancy, including the development of the placenta. Over a hundred thousand pregnant people who have been vaccinated have been monitored and no increased risk of pregnancy loss, growth problems, or birth defects has been found.

The growing evidence about the safety and effectiveness of COVID-19 vaccination during pregnancy shows that the benefits of receiving a COVID-19 vaccine outweigh any known or potential risks. For more information, see the Society for Maternal-Fetal Medicine guidance COVID-19 Vaccination if You Are Pregnant or Breastfeeding and the CDC webpage COVID-19 Vaccines While Pregnant or Breastfeeding.

If you are pregnant and have questions about getting vaccinated, talk to your doctor. You can also talk to experts at MotherToBaby who are available to answer questions in English or Spanish. This free and confidential service that is available Monday–Friday 8am–5pm. You can call 866-626-6847, text 855.999.8525, e-mail ContactUs@mothertobaby.org or start a chat on at mothertobaby.org/ask-an-expert/.





Can people who are breastfeeding get the vaccine?

Yes. Experts, including the CDC, American College of Obstetricians and Gynecologists, the Society for Maternal-Fetal Medicine, and the American College of Nurse-Midwives recommend that people who are breastfeeding be vaccinated against COVID-19.

Lactating people were not included in the vaccine studies. However, based on what we know about how these vaccines work, the vaccines are not thought to be a risk for the baby. Recent reports have shown that breastfeeding people who have received the Pfizer (COMIRNATY) or Moderna vaccines have antibodies in their breastmilk, which might help to protect their babies. These vaccines do not pass into breastmilk.

Can the COVID-19 vaccine affect my periods?

Some people have reported a change in their period after getting the vaccine, including heavier flow and painful cramps. We don't yet know if these changes are due to the vaccine - menstrual changes were not reported from the vaccine trials and no study results are available on this issue yet. It is important to remember, many things can cause a change to menstrual cycles such as stress, and changes in sleep, diet, exercise, and some medicines. Irregular periods are very common among teens and may have no specific cause at all. If you have concerns about your period or your child's periods, talk to a doctor.

What are common side effects of the COVID-19 vaccines?

After getting a COVID-19 vaccine, you may have side effects like the ones you get after a flu or shingles vaccine. For two-dose vaccines, side effects are more common after the second dose. These side effects may limit your ability to do daily activities, but they should go away within a day or two. Not everyone gets side effects. They may include:

- Fever, chills, and muscle aches
- Headache
- · Feeling tired
- Sore or red arm where the vaccine was given

Side effects are normal and a sign that the vaccine is working. It shows that your body is learning to fight the virus and is building immunity. Not everyone gets side effects. It is important to get the second dose even if you get side effects after the first dose unless a vaccination provider or your doctor tells you not to.

Contact your doctor if you have:

- Vaccine side effects that last more than 2 days
- New symptoms that start more than 2 days after you get the vaccine
- Cough, shortness of breath, runny nose, sore throat, or new loss of taste or smell (as these are not vaccine side effects)
- Symptoms that get worse or worry you.

Are there any serious side effects?

Yes, serious side effects can happen but are very rare. Vaccine safety monitoring systems have identified four serious health problems, described below. The Pfizer and Moderna COVID-19 vaccines are now recommended over the J&J vaccine. One reason for this is because of the rare, but serious side effects





linked with J&J vaccine. If you receive a vaccine, see After You Get a Vaccine to learn about possible symptoms to look out for.

- Anaphylaxis: Anaphylaxis is a rare but serious allergic reaction that can happen after any
 vaccination. Everyone is observed for a short time after getting a COVID-19 vaccine so that if
 anaphylaxis does happen, it can be treated right away. Other less severe allergic reactions can also
 happen. Learn more on the CDC webpage What to Do If You Have an Allergic Reaction after Getting
 a COVID-19 Vaccine.
- Thrombosis with thrombocytopenia syndrome (TTS): TTS is a rare but serious, and sometimes fatal condition involving blood clots and low platelets. TTS has been reported across a wide age range in males and females who received the J&J vaccine. Women ages 18-49 years should especially be aware of the rare but increased risk of this adverse event. To learn more, visit the CDC's Adverse Events Reported After COVID-19 Vaccination.
- Guillain-Barré Syndrome (GBS): GBS is a rare disorder where the body's immune system damages
 nerve cells. This causes muscle weakness and sometimes paralysis. Most people fully recover from
 GBS, but some have permanent nerve damage. GBS has been reported in people who received
 the J&J vaccine. There were more cases in men, especially men age 50 and older. Nearly all of the
 people became ill within 6 weeks of getting the vaccine. Most became ill in the first 3 weeks.
- Myocarditis and pericarditis Myocarditis is inflammation of the heart muscle and pericarditis is inflammation of the outer lining of the heart. Myocarditis and pericarditis after COVID-19 vaccination is rare. Most cases have been reported in people who received the Pfizer (COMIRNATY) or Moderna vaccines, largely in male adolescents and young adults. Most people with myocarditis or pericarditis who received care improved with medicine and rest and felt better quickly. People who experience these conditions can usually return to their normal daily activities after their symptoms improve.

It is important to note that myocarditis and pericarditis are more common in people who get COVID-19, and the risks to the heart from COVID-19 infection can be more severe than the risk from the COVID-19 vaccines. In a study of people age 16 and over who received at least one dose the Pfizer vaccine, the risk of myocarditis after vaccination was estimated to be around 2 per 100,000 people in ages 16 and above and up to 10 per 100,000 people in the highest risk group.² This compares to a risk of about **150** per 100,000 people, (including people under 16) who get COVID-19.³

Children ages 5-11 receive one third the dose of Pfizer vaccine compared to people ages 12 and over. In a study published by the CDC,⁴ after approximately 8 million doses of pediatric Pfizer vaccine were given to children 5-11 years of age, 11 cases of myocarditis were reported and verified. Most of these cases were mild and recovered quickly. For more information, visit the CDC webpage Myocarditis and Pericarditis Following mRNA COVID-19 Vaccination.



² See https://www.nejm.org/doi/full/10.1056/NEJMoa2110737 for more details.

³ See https://www.cdc.gov/mmwr/volumes/70/wr/mm7035e5.htm for more details.

⁴ See https://www.cdc.gov/mmwr/volumes/70/wr/mm705152a1.htm for more details



To date, over 400 million doses of COVID-19 vaccine have been given in the US. Although side effects may happen, they are very rare. The benefits of getting fully vaccinated outweigh the risk.

Are the COVID-19 vaccines likely to have any long-term side effects?

No, long-term side effects are not likely. Based on what we know from other vaccines, any side effects usually begin to appear within six weeks of getting vaccinated. For this reason, the Food and Drug Administration (FDA) required each of the COVID-19 vaccines that they authorized to be studied in clinical trials for at least eight weeks. In addition, the CDC continues to closely monitor COVID-19 vaccines after they are authorized or approved and are used in more and more people. It has been nearly a year since COVID-19 vaccines were authorized (and over a year since the start of the vaccine trials). Billions of people have received COVID 19 vaccines and no long-term side effects have been noted. In contrast, we do know that the virus that causes COVID-19 can cause several long-term effects in both adults and in children. For example, some people can continue to have symptoms such as feeling very tired, having difficulty sleeping, headaches, and shortness of breath for months after their initial COVID-19 infection, often referred to as long-COVID, or long-haul COVID. Furthermore, a severe condition called Multi-System Inflammatory Syndrome in Children (MIS-C) has affected thousands of children weeks after their initial infection, resulting in hospitalization and death. Vaccination offers protection against these "long-term" effects of the virus.

If I get an adverse reaction (possible side effect) after I am vaccinated, how should I report it?

If you have an adverse event (possible side effect) after you are vaccinated, even if you aren't sure that the vaccine caused it, please report it to VAERS. The Vaccine Adverse Event Reporting System is an early warning system that the FDA and CDC use to detect possible safety problems. To make a report, call 1-800-822-7967 or visit https://vaers.hhs.gov/reportevent.html.

If you have signed up for <u>V-Safe</u>, CDC's after vaccination health checker, you can also report your symptoms through the smart phone app.

Neither VAERS nor V-safe provide medical advice. If you have symptoms or health problems that concern you at any time following COVID-19 vaccination, please contact your healthcare provider or seek medical treatment.

Will getting the vaccine cause me to test positive on a COVID-19 test?

No. Vaccines won't cause you to test positive on a PCR or antigen viral test (swab or spit test) that looks for current COVID-19 infection. You may test positive on some antibody (blood) tests. This is because the vaccines work by teaching your body to make antibodies.

See the public health testing webpage ph.lacounty.gov/covidtests to learn more about COVID-19 tests.



WHO CAN GET THE VACCINE?

If I have already had COVID-19, should I still get vaccinated?

Yes. You should still get vaccinated even if you already had COVID-19. You are at high risk of getting infected again with Omicron. Natural immunity alone does not protect well against Omicron. Getting vaccinated provides the best protection. It will boost your immunity for better and longer protection against COVID-19.

It is safe to get the vaccine after getting COVID-19, but you should wait until after your isolation period is over. This is so that you don't infect healthcare workers and others when you go to get vaccinated. If you have had monoclonal antibody treatment for COVID-19 infection, you should wait for 90 days before getting a COVID-19 vaccine.

Can children get the COVID-19 vaccine?

Currently children age 5 and up can be vaccinated with the Pfizer pediatric vaccine. The Pfizer vaccine for children 5-11 years of age has the same active ingredients as the adult vaccine but is a smaller dose $(1/3^{rd})$ the dose that teens and adults). The dosing schedule is the same for children, teens, and adults: two doses are given 21 days apart.

Over 6.5 million children have tested positive for COVID-19 in the US since the start of the pandemic. Even though COVID-19 is often milder in children than adults, some children can get very sick. Tens of thousands of children have been hospitalized with COVID-19 and over 900 children have died since the start of the pandemic. Since May 2020, over 5,500 children had Multi-system Inflammatory Syndrome (MIS-C)⁻ a serious condition in young people. Children may also get lasting health problems from COVID-19. Getting your child vaccinated lowers their risk of getting infected with the COVID-19 virus and helps to protect them from these serious illnesses.

Children who get infected can spread the virus to others even if they don't feel sick. Getting vaccinated helps to protect friends and families, as well as the larger community. This includes protecting people with weak immune systems and children under 5, who can't be vaccinated yet.

Once your child is fully vaccinated, they will be less likely to get sick if they visit with friends, play sports, travel to see family, and return to school. They won't need to quarantine if a friend, family member, teacher or teammate gets COVID-19.

For more information see COVID-19 FAQs for Parents on the VaccinateLACounty.com webpage.

Can people with allergies get a COVID-19 vaccine?

It depends.

- People who are allergic to things like oral medication, food (including eggs), latex, pets, or pollen, or people who have a family history of allergies, can be vaccinated.
- If you have had an allergic reaction to a vaccine or injectable therapy, even if it was not severe, talk to your doctor to decide if it is safe to get vaccinated.
- If you are allergic to Polyethylene Glycol (PEG), you should not get the Pfizer (COMIRNATY) or



Los Angeles County COVID-19 VACCINE

COVID-19 VACCINES - FREQUENTLY ASKED QUESTIONS

Moderna vaccine. Ask your doctor if you can get the J&J vaccine.

• If you are allergic to polysorbate, you should not get the J&J vaccine. Ask your doctor if you can get the Pfizer or Moderna vaccine.

There is a small risk of anaphylaxis (a severe type of allergic reaction) with any vaccine. This is why everyone is observed for a short time after getting a COVID-19 vaccine.

Information about allergic reactions may change. Be sure to check the latest guidance on the CDC <u>COVID-19 Vaccines for People with Allergies</u> webpage and talk to your doctor.

Can I get the COVID-19 vaccine at the same time as a different vaccine?

Yes. Adults and children age 5 and over can get a COVID-19 vaccine at the same time as other vaccines, such as measles, whooping cough, and flu. If your child gets a COVID-19 vaccine at a place that doesn't offer the other vaccines that they need, you can go to a different location to get them at any time. There is no need to wait between vaccines.

Can I get a routine medical procedure or screening test if I just had a COVID-19 vaccine?

Most routine medical procedures or screenings can be done before or after getting a COVID-19 vaccine.

Note: if you are due for a routine screening mammogram and have been recently vaccinated for COVID-19, ask your doctor how long you should wait before you get your mammogram. People who have received a COVID-19 vaccine may get swelling in the lymph nodes (called lymphadenopathy) in the underarm near where they got the shot. This swelling is a normal sign that the body is building protection against COVID-19. This temporary swelling could cause a false reading on a mammogram, so it is important to tell the staff about your vaccination. For more details, see the Society of Breast Imaging's Recommendations for Women Receiving the COVID-19 Vaccine.

The COVID-19 vaccine can also affect the results of some kinds of screening tests for tuberculosis (TB), see the CDC webpage COVID-19 Vaccination and Other Medical Procedures.

PROTECTING MYSELF AND OTHERS

What if I get symptoms of COVID-19 after I have been vaccinated?

Some of the side effects from getting a vaccine are similar to symptoms of COVID-19. You should get tested and stay home and away from others if you have:

- Cough, shortness of breath, runny nose, sore throat, or new loss of taste or smell these symptoms are NOT side effects of the vaccine
- Vaccine side effects (see above) that last more than 2 days after getting the vaccine

It is still important to watch out for symptoms of COVID-19 even if you have been vaccinated.

Why do we need a vaccine if we can do other things, like social distance and wear masks?

Getting the vaccine is the best tool to stop this pandemic. Vaccines boost your immune system so it will be ready to fight the virus if you are exposed. Other steps, like masks and physical distancing, help lower your chance of being exposed to or spreading the virus. Vaccines are especially important for preventing





COVID-19 VACCINES - FREQUENTLY ASKED QUESTIONS

spread within households, where it can be difficult to stay apart if one or more family member had COVID-19 or needs to quarantine. Vaccination is also the best way to stop new variants of the virus from developing and spreading.

