COVID-19 Vaccine Frequently Asked Questions  
March 18, 2021

New/Updated Information is highlighted in yellow.

General Vaccine Information

Who is the CDC and what is their role with the COVID-19 vaccine?
The Centers for Disease Control and Prevention (CDC) is the national public health institute in the United States under the Department of Health and Human Services. The CDC’s overall responsibility is to address health, and safety.

The CDC is focused on vaccine planning and working closely with health departments and partners to plan and operationalize a vaccination response to COVID-19. The CDC does not have a role in developing COVID-19 vaccines. Learn more about the vaccine planning process by visiting https://www.cdc.gov/coronavirus/2019-ncov/vaccines/8-things.html.

What is New Jersey doing to plan for the COVID-19 vaccine?
The New Jersey Department of Health collaborated with health care partners and immunization stakeholders to develop the New Jersey Interim COVID-19 Vaccination Plan. This plan encompasses suggested priority groups for vaccination, logistics of vaccine storage and handling, health care provider recruitment, tracking and reporting of immunizations, etc. The plan is available at https://www.state.nj.us/health/cd/topics/covid2019_vaccination.shtml. The Department will continue to update the plan as we receive new information and federal guidance.

Is a COVID-19 vaccine necessary?
COVID-19 can be a minor illness in some or lead to severe disease or even death in previously healthy people. This means, everyone should take the virus seriously! It is believed that the more people who get vaccinated, the less sickness will be in our communities. Many treatments and medications are being studied, but there is no cure. Prevention is key. Vaccination is an important step in helping to prevent this illness and its potentially devastating consequences.
Was a vaccine approved?
On December 11, 2020, the U.S. Food and Drug Administration issued the first emergency use authorization (EUA) for a vaccine for the prevention of COVID-19 in individuals 16 years of age and older. The EUA allows the Pfizer-BioNTech COVID-19 Vaccine to be distributed in the U.S. On December 18, 2020, Moderna vaccine was approved as an EUA for individuals 18 and older in the United States.


What is an Emergency Use Authorization (EUA)?
An EUA is used to help make medical products available as quickly as possible by allowing unapproved medical products to reach patients in need when there are no adequate, food and drug administration (FDA) approved and available alternatives. The known and potential benefits of the product, must outweigh the known and potential risks of the product to grant an EUA. Learn more about the EUA process by watching the following video, https://www.youtube.com/watch?v=iGkwaESsGBQ.

How much will a vaccine reduce the risk of COVID-19 and its complications?
According to the FDA, the Moderna vaccine has 94.1% efficacy at preventing symptomatic cases. The Pfizer vaccine has 95% efficacy. J&J’s one-dose vaccine has a 72% efficacy rate in the U.S. clinical trial sites. Additionally, the J&J vaccine was approximately 77% effective in preventing severe/critical COVID-19 occurring at least 14 days after vaccination and 85% effective in preventing severe/critical COVID-19 occurring at least 28 days after vaccination.

At this time, data are not available to determine how long the vaccines will provide protection, nor is there evidence that the vaccine prevents transmission of SARS-CoV-2 from person to person. For these reasons, preventive actions like social distancing and masking will still be necessary as vaccination will be just one of the many tools needed to help fight COVID-19.

How many shots of COVID vaccine will be needed?
Both Pfizer and Moderna require two shots. These vaccines are not interchangeable meaning you need to receive two doses of the same vaccine.

The J&J vaccine is only one dose.

When and where should I get the second dose?
There are specific spacing requirements between dose 1 and 2, depending on vaccine brand:
  - Pfizer-BioNTech COVID-19 vaccine administered 21 days after the first dose.
- Moderna COVID-19 vaccine administered 28 days after the first dose.

The vaccination site where you received your initial dose should schedule your second dose appointment. Contact the vaccination site if you have not been scheduled for a second appointment. It is recommended to return to the same site for your second dose.

**What if my appointment for the second dose is longer than the recommended time between doses (i.e., 21 days for Pfizer; 28 days for Moderna)?**

As always, it is recommended to follow the guidance by vaccine manufacturers and the CDC; however, this guidance should not be so rigid that it creates barriers to vaccination. Therefore, COVID-19 vaccines may be scheduled for administration up to 6 weeks (42 days) after the first dose.

**Are the COVID-19 vaccines interchangeable?**

- Any COVID-19 vaccine can be used when indicated; no product preference

- COVID-19 vaccines are not interchangeable – Safety and efficacy of a mixed series has not been evaluated

**What do I do if my mRNA (Pfizer or Moderna) vaccine is no longer available when it is time to get my second dose?**

In exceptional situations in which the vaccine product given for the first dose cannot be determined or is no longer available, any available mRNA COVID-19 vaccine may be administered at a minimum interval of 28 days between doses to complete the mRNA COVID-19 vaccination series.

In situations where the same mRNA vaccine product is temporarily unavailable, it is preferable to delay the 2nd dose (up to 6 weeks) to receive the same product than to receive a mixed series using a different product.

If two doses of different mRNA COVID-19 vaccine products are administered in these situations (or inadvertently), no additional doses of either product are recommended at this time.

**I had a severe allergic reaction to my first mRNA vaccine (i.e., Pfizer or Moderna); can I take the J&J vaccine as my second dose?**

In exceptional situations where the first dose of an mRNA Covid-19 vaccine was received, but the patient is unable to complete the series with either the same or a different mRNA Covid-19 vaccine, (e.g., due to a severe allergic reaction), a single dose of J&J Covid-19 vaccine may be administered at a minimum interval of 28 days from the mRNA COVID-19 vaccine dose.

The safety and efficacy of taking one shot of the Pfizer or Moderna vaccine and one of the J&J vaccine has not been tested. People who receive the J&J vaccine as the second dose should do so under the supervision of a healthcare provider.
**Can I be protected by just receiving one dose of the COVID-19 vaccine?**
J&J’s one-dose vaccine has a 72% efficacy rate in the U.S. clinical trial sites. Additionally, the vaccine was approximately 77% effective in preventing severe/critical COVID-19 occurring at least 14 days after vaccination and 85% effective in preventing severe/critical COVID-19 occurring at least 28 days after vaccination. For more information, visit https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/janssen-covid-19-vaccine-frequently-asked-questions

Both Pfizer and Moderna require two shots. It is not known how effective just one dose of the vaccine would be long-term or how long you would be protected against COVID-19 with just one dose of the vaccine. You must receive two doses in order to get the best protection against COVID-19.

Ask your healthcare provider about tools (like V-safe) that can send you automated reminders about getting your first and second shots at the appropriate time. For more information about V-safe visit https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html.

**Is one COVID-19 vaccine preferred over the other?**
The CDC does not state a product preference. All the vaccines that are currently available were studied in different trials, among different people and different timelines. They were not studied in head-to-head comparisons or trials; therefore, they should not be compared to each other.

Persons who are eligible to get vaccinated, **you should not wait for a specific vaccine to become available.** Vaccine supply is still limited.

**What if I want to change my appointment so I can get a different vaccine?**
It is not advisable to change your appointment in order to wait for a specific vaccine to come in stock. All of the COVID-19 vaccines available are highly effective – especially at preventing death and severe illness. It is strongly recommended to receive the first vaccine available.

**Is there a cost for the COVID-19 vaccine?**
There are no out-of-pocket costs for the COVID-19 vaccine. COVID-19 vaccines will be made available to individuals regardless of insurance coverage status. Individuals won't pay coinsurance, deductibles, or copayments. Providers that administer vaccinations to patients without health insurance or whose insurance does not provide coverage of vaccination administration fees may not charge enrollees directly for any vaccine administration costs.

**If I get vaccinated do I still need to wear a mask/face covering?**
Yes, you will still need to wear a mask and follow other precautions. The vaccine keeps you from getting sick. It is believed that the more people who get vaccinated, the less sickness will be in our communities. We don’t know yet if the vaccine prevents a person from spreading the virus.
Stopping a pandemic requires using all the tools available. 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 reduce your chance of being exposed to, or spreading, the virus. Together, COVID-19 vaccination and following CDC’s recommendations for how to protect yourself and others will offer the best protection from COVID-19.

Will wearing two masks provide more protection from COVID-19?
The CDC released new research that found wearing a cloth mask over a surgical mask offers more protection against the coronavirus, as does tying knots on the ear loops of surgical masks. For the best protection, the CDC says to make sure the mask fits snugly against your face and to choose a mask with at least two layers. For more details, please visit https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html.

I heard there are variants (different strains/types) of the COVID-19 now circulating. What should I do to protect myself?
Viruses constantly change or mutate and new variants of a virus are expected to occur over time. Sometimes new variants emerge and disappear. Other times, new variants emerge and persist. Public health officials are studying these variants quickly to learn more to control their spread.

You should continue practicing healthy actions like getting your COVID-19 vaccine, washing your hands frequently, practicing physical distancing, and staying home when you feel sick. For more information about variants, visit https://www.cdc.gov/coronavirus/2019-ncov/transmission/variant.html.

Were the COVID-19 vaccines tested against the variants?
The J&J vaccine was tested against the South Africa and Brazil variants. All of the current vaccines are testing the effectiveness against the variants and the possible benefits of additional vaccine doses.

Vaccine Availability

Will the vaccine be available to everyone in New Jersey? Are more people now eligible for vaccination?
Yes, eventually the COVID-19 vaccine will be available to everyone who wants it in New Jersey. Currently, vaccines are available to the following groups:

- Paid and unpaid healthcare workers
- Residents and workers of long-term care and high-risk congregate care facilities
- First responders including sworn law enforcement and fire professionals
- Individuals aged over 65
- Individuals aged 16-64 that have certain medical conditions that increase the risk of severe illness from the virus
• Pre-K to 12 educators and staff
• Childcare workers in licensed and registered settings

On March 15th, the following groups became eligible to book vaccine appointments:

• Transportation workers
• Additional public safety workers
• Additional high-risk individuals

Beginning March 29th, additional frontline essential workers will be eligible to book vaccine appointments.

Now that a third vaccine is authorized for use, there will be additional doses available to increase vaccination among NJ residents.


How can I schedule an appointment to get vaccinated?
If you are eligible to receive a vaccine, there are generally three ways to get vaccinated:

1. You can make an appointment directly with one of the many designated vaccination sites across the state. Click here to view a full list of these designated vaccination sites.
2. You can pre-register for the vaccine on the NJ Vaccine Scheduling System, and you will be notified when an appointment is available to you. Click here to visit the NJ Vaccine Scheduling System. You can call 855-568-0545 to receive assistance with registering on the NJ Vaccine Scheduling System (NJVSS), this site can also provide information on Frequently Asked Questions, vaccine eligibility and identifying local vaccination sites.
3. Select healthcare facilities, including many hospitals, are offering vaccines directly to their workers. If you work at one of the facilities, you can contact your employer to learn if the vaccine is available to you from your employer.
4. Veterans who receive care from VA health facilities or live in VA long-term care facilities may be eligible for vaccines through the VA. Learn more here.

Note: Whenever New Jersey expands eligibility, it may take several weeks for appointments to be available to all eligible. Vaccine availability remains very limited in New Jersey.

Can you tell me more about the NJVSS? Is my information private?
The NJ Vaccine Scheduling System (NJVSS) is a secure online website developed by the NJ Dept. of Health for public health purposes. The NJVSS is a system that allows you to sign-up to make a COVID-19 vaccine appointment.

You will be asked to provide personal information (name, address, gender, race, and email), medical screening and occupation information. This helps to determine your eligibility for the
vaccine or more importantly, which phase best fits you! NJVSS will send you e-mail reminders about your appointment and reminders about getting the second dose. The NJVSS also lets you make an appointment at a vaccination location most convenient for you. The information collected on the NJVSS is used for public health purposes only AND to ensure that same person returns for the second dose of the same vaccine. For more information visit, https://covid19.nj.gov/pages/vaccine and https://covidvaccine.nj.gov/.

How do consumers prove that they are eligible for vaccination?
A person is eligible if they live, work, or are being educated in New Jersey and can self-identify as meeting the criteria for the current sub-phase. No professional or medical documentation is required.

How do I schedule my second appointment?
You should schedule your second dose appointment at the same place where you got your first dose.

- If you made your first dose appointment through the New Jersey Vaccine Scheduling System, you will receive an automatically scheduled second dose appointment and an email confirmation with the details of the second dose appointment.
- If you received your first dose by booking directly with a vaccine clinic and did not use the New Jersey Vaccine Scheduling System, you likely scheduled a second dose appointment when you had your first appointment. If you did not receive a second dose appointment at the time of receiving your first dose, you need to contact the site where you received your first vaccine for assistance scheduling the second dose.
- If you received a first dose at the Gloucester County Megasite before the state scheduling system was available you will be contacted directly by this site.

What if I am not eligible to get the vaccine?
If you don’t qualify for a vaccine at this time, register on the NJ Vaccine Scheduling System and we will notify you when the vaccine is available for you. You can call 855-568-0545 for help with the NJ Vaccine Scheduling System.

What should I do to protect myself since I am not eligible to receive the COVID vaccine?
You should continue to cover your mouth and nose with a mask when around others, avoid close contact with people who are sick, practice social distancing, and wash your hands often. Get more information to learn how to protect yourself and others.

I am eligible to receive the vaccine, but cannot get an appointment. Why is this happening?
Due to supply limitations, vaccination appointment availability is extremely limited at this time. Please be patient. Eventually everyone who wants it will receive the vaccine!

Can I give my COVID vaccine appointment in N.J. to someone who needs it more?
At this time, there is no way to transfer appointments to another person through the NJ Vaccine Scheduling System.
Safety Concerns

What are clinical trials? I am concerned that this vaccine was made too quickly and did not undergo enough testing as other vaccines.
Clinical trials are research studies performed in people that are aimed at evaluating a medical, surgical, or behavioral intervention. They are the primary way that researchers find out if a new treatment, like a new drug, vaccine, or medical device is safe and effective in people.

Currently, clinical trials are evaluating investigational COVID-19 vaccines in many thousands of study participants to generate scientific data and other information for the FDA to determine their safety and effectiveness. These clinical trials are being conducted according to rigorous safety standards. For detailed information, visit https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety.html.

What are some of the vaccine side effects?
The most common side effects are injection site pain, fatigue, headache, muscle pain, and joint pain. Some people in the clinical trials have reported fever. Side effects are more common after the second dose; younger adults, who have more robust immune systems, reported more side effects than older adults.

As people get vaccinated, CDC, FDA, and other federal partners will use the following existing, robust systems and data sources to conduct ongoing safety monitoring. For more information, visit https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety.html.

What are the contraindications for (reasons for not receiving) COVID-19 vaccination?
A severe allergic reaction (e.g., anaphylaxis) to a previous dose or component of the vaccine is a contraindication for receiving any of the COVID-19 vaccines.

People with an immediate allergic reaction to the first dose of an mRNA COVID-19 vaccine should not receive additional doses of either of the mRNA COVID-19 vaccines. CDC has provided a chart to assist in the evaluation of immediate reactions to vaccination: www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Appendix-D.

I carry an Epinephrine Auto Injector (EpiPen®, EpiPen Jr®) for my current allergies. Will I be monitored after getting the vaccine to make sure I don’t have anaphylaxis (a severe allergic reaction)?
Yes, the CDC currently recommends that providers should consider observing vaccine recipients for 15 minutes after receipt of a vaccine. Persons with a history of anaphylaxis (due to any cause) should be observed for 30 minutes.

The CDC recommends that people with a history of anaphylaxis not related to vaccines or injectable medications—such as food, pet, venom, environmental, or latex allergies—get vaccinated. People with a history of allergies to oral medications or a family history of severe allergic reactions may also get vaccinated. Although vaccination sites should have all
the necessary emergency medical equipment available on site, consider bringing your EpiPen as an extra precaution.

**Can I take acetaminophen and/or antihistamines before receiving mRNA COVID-19 vaccination to reduce pain and allergic reactions?**

Talk to your doctor about taking over-the-counter medicine, such as ibuprofen, acetaminophen, aspirin, or antihistamines, for any pain and discomfort you may experience after getting vaccinated. You can take these medications to relieve post-vaccination side effects if you have no other medical reasons that prevent you from taking these medications normally.

It is **not recommended** you take these medicines before vaccination for the purpose of trying to prevent side effects.

**How can I sign up for a clinical trial?**


**Is this a “live” virus vaccine?**

None of the early vaccines (those by Moderna, Pfizer, AstraZeneca, or J&J) are live weakened versions (similar, for example, to the measles, mumps, rubella, or varicella (chickenpox) vaccines). Moderna’s and Pfizer’s are mRNA vaccines, and AstraZeneca’s and J& J’s are non-replicating vectored vaccines. You can learn more about the different types of vaccines being tested in the response to “What types of COVID-19 vaccines are being tested?”, visit [https://www.chop.edu/centers-programs/vaccine-education-center/making-vaccines/prevent-covid](https://www.chop.edu/centers-programs/vaccine-education-center/making-vaccines/prevent-covid).

**Can COVID-19 vaccines change the DNA of a person?**

COVID-19 mRNA vaccines (Pfizer and Moderna) teach our cells how to make a protein that triggers an immune response. The COVID-19 viral vector vaccine (J&J) uses a modified version of a different virus (the vector) to deliver important instructions to our cells. Neither affects or interacts with our DNA in any way.

**Can pregnant people or those who are breastfeeding get the COVID-19 vaccine?**

There are currently few data on the safety of COVID-19 vaccines in pregnant people. Based on current knowledge, experts believe that COVID-19 vaccines are unlikely to pose a risk to the pregnant person or the fetus because these are not live vaccines. However, the potential risks to the pregnant person and the fetus are unknown because these vaccines have not been studied in pregnant people.

If pregnant people are part of a **group recommended** to receive a COVID-19 vaccine (e.g., healthcare personnel), they may choose to be vaccinated. A conversation between the patient and their clinical team may assist with decisions regarding the use of a COVID-19 vaccine, though a conversation with a healthcare provider is not required prior to vaccination.
When making a decision, pregnant people and their healthcare providers should consider the level of COVID-19 community transmission, the patient’s personal risk of contracting COVID-19, the risks of COVID-19 to the patient and potential risks to the fetus, the efficacy of the vaccine, the side effects of the vaccine, and the lack of data about the vaccine during pregnancy. Until findings are available from clinical trials and additional studies, only limited data are available on the safety of COVID-19 vaccines administered during pregnancy.

There are no data on the safety of COVID-19 vaccines in lactating people. A lactating person who is part of a group recommended to receive a COVID-19 vaccine (e.g., healthcare personnel) may choose to be vaccinated.

For more information, please visit https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html.

Do the COVID-19 vaccines cause infertility (inability to get pregnant)?
There is no evidence suggesting that fertility problems are a side effect of ANY vaccine. People who are trying to become pregnant now or who plan to try in the future may receive the COVID-19 vaccine when it becomes available to them. For more information, please see the following flyer, https://www.state.nj.us/health/cd/documents/topics/NCOV/covid19_vaccines_fertility_flyer.pdf.

Can the COVID-19 vaccine affect mammography (breast) screenings?
Vaccines can lead to temporary swelling in the lymph nodes and this could make results of the mammogram difficult to interpret. Such findings would lead to follow-up exams to rule out possible cancer. This can cause undo anxiety for people who may just be experiencing a temporary side effect from the vaccine.

According to the Society of Breast Imaging, people should either schedule the breast screening before getting the shot or wait at least four weeks after getting the second dose of vaccine to get your mammogram. However, they don’t want anyone to delay care if there is any kind of concern. For more information visit, https://www.sbi-online.org/ and https://www.sbi-online.org/Portals/1/End-the-Confusion-Materials/recommendations-for-women-taking-covid-vaccine_landscape.pdf

As always, if you have questions or concerns, talk with your healthcare provider about what is best for you.

Can children receive the COVID-19 vaccines?
The Pfizer vaccine is authorized for use in those 16 and older. The Moderna and J&J vaccines are authorized for use in those 18 and older. For information specific to the vaccines, please review the EUA fact sheets available at https://www.state.nj.us/health/cd/topics/covid2019_vaccination.shtml
Where can I learn more about vaccine safety and how to report a side effect?
There are different systems in place to monitor vaccine safety, including the Vaccine Adverse Events Reporting System https://vaers.hhs.gov/index.html and the smart phone app, v-safe. Your doctor will provide you with information to register for v-safe. Additional information is available at https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html.

Protection from Vaccine/Efficacy

How soon do antibodies form after getting the vaccine (i.e., how soon after getting vaccine am I protected)?
It typically takes a few weeks for the body to build immunity after vaccination. So, it is important to continue to protect yourself and keep wearing a mask and keep physical distance from others. https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html.

If I had COVID-19 and recovered do I need to get the vaccine?
COVID-19 vaccination should be offered to you regardless of whether you already had COVID-19 infection. You should not be required to have an antibody test before you are vaccinated. However, anyone currently infected with COVID-19 should wait to get vaccinated until after their illness has resolved and after they have met the criteria to discontinue isolation.

While there is no recommended time frame between infection and vaccination, current evidence suggests that the risk of reinfection is low in the months after initial infection. Therefore, people with a recent infection may choose to temporarily delay vaccination while vaccine supplies are limited.

What are the guidelines for visiting others if I am fully vaccinated?
For people to be considered fully vaccinated for COVID-19, they must meet one of the following conditions:

- Two or more (≥2) weeks after they have received the second dose in a 2-dose series (Pfizer-BioNTech or Moderna),
- Two or more (≥2) weeks after they have received a single-dose vaccine (Johnson and Johnson [J&J]/Janssen).

Fully vaccinated people (in non-healthcare settings) can:

- Visit with other fully vaccinated people indoors without wearing masks or physical distancing
- Visit with unvaccinated people from a single household who are at low risk for severe COVID-19 disease indoors without wearing masks or physical distancing
- Refrain from (do not need to) quarantine and testing following a known exposure if asymptomatic (no symptoms)

For now, fully vaccinated people should continue to:
• Take precautions in public like wearing a well-fitted mask and physical distancing.
• Wear masks, practice physical distancing, and adhere to other prevention measures when visiting with unvaccinated people who are at increased risk for severe COVID-19 disease or who have an unvaccinated household member who is at increased risk for severe COVID-19 disease.
• Wear masks, maintain physical distance, and practice other prevention measures when visiting with unvaccinated people from multiple households.
• Avoid medium- and large-sized in-person gatherings.
• Get tested if experiencing COVID-19 symptoms.
• Follow guidance issued by individual employers.
• Follow CDC and health department travel requirements and recommendations.


**What is the difference between quarantine and isolation?**
Quarantine is used to keep someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus without feeling symptoms. People in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health department.

Isolation is used to separate people infected with COVID-19 from those who are not infected. People who are in isolation should stay home until it’s safe for them to be around others. At home, anyone sick or infected should separate from others, stay in a specific “sick room” or area, and use a separate bathroom (if available).

**What are the recommendations for quarantine, isolation, and testing for those in non-healthcare settings?**

**Fully vaccinated people who have symptoms similar to COVID-19:**
- Should isolate themselves from others, be clinically evaluated for COVID-19, and get tested, if indicated.
- Should tell their healthcare provider of their vaccination status at the time of presentation to care.

**Fully vaccinated people with no COVID-like symptoms following an exposure (being around someone who is sick with COVID-19):**
- Do not need to quarantine or be tested following an exposure to someone with suspected or confirmed COVID-19.
- Should still monitor for symptoms of COVID-19 for 14 days following an exposure. If they experience symptoms, they should isolate themselves from others, be clinically
evaluated for COVID-19, including COVID-19 testing, if indicated, and inform their health care provider of their vaccination status at the time of presentation to care.

**Fully vaccinated residents of non-healthcare congregate settings (e.g., correctional and detention facilities, group homes)**

- Should continue to quarantine for 14 days and be tested for COVID-19 following an exposure to someone with suspected or confirmed COVID-19. This is because residential congregate settings may face high turnover of residents, a higher risk of transmission, and challenges in maintaining recommended physical distancing.

**Fully vaccinated employees of non-healthcare congregate settings and other high-density workplaces (e.g., meat and poultry processing and manufacturing plants)**

- If no COVID-like symptoms, do not need to quarantine following an exposure; however, testing following an exposure and through routine workplace screening programs (if present) is still recommended.


**Other Vaccines**

**Can I get the flu shot and the new COVID-19 vaccine on the same day?**

Wait at least 14 days before getting any other vaccine, including a flu or shingles vaccine, after you get your COVID-19 vaccine. Or if you get any other vaccine first, wait at least 14 days before getting your COVID-19 vaccine.

If you get a COVID-19 vaccine within 14 days of another vaccine, you do not need to be revaccinated with either vaccine. You should still complete both vaccine series on schedule. When we have more data on the safety and effectiveness of COVID-19 vaccines given at the same time as other vaccines, CDC may update this recommendation.

**Will getting the flu vaccine protect me against coronavirus?**

No. Influenza viruses and coronaviruses are different. Getting a flu vaccine will not protect against COVID-19; however, the vaccine can reduce flu illnesses, hospitalizations, and can help to conserve potentially scarce healthcare resources during the pandemic. It’s likely that flu viruses and the virus that causes COVID-19 will both be spreading this fall and winter, making it more important than ever to get a flu vaccine! It is the best way to protect yourself and others – especially those who are particularly vulnerable to both COVID-19 and influenza such as older adults and those with chronic health conditions.

**Treatment Options**

**What are monoclonal antibodies?**
Antibodies are proteins that people's bodies make to fight viruses, such as the virus that causes COVID-19. Antibodies made in a laboratory act a lot like natural antibodies to limit the amount of virus in your body. They are called monoclonal antibodies. Antibody treatment can be used by people with mild to moderate COVID-19 who:

- Test positive for SARS-CoV-2.
- Are within 10 days of the start of their symptoms.
- Are age 12 or older and weigh at least 88 pounds.
- Are at high risk of getting very sick from COVID-19 or of needing to be admitted to a hospital because of COVID-19.

For questions about whether you can and should get antibody treatment, call your doctor or health care provider.

More information about monoclonal antibody treatment can be found at the following websites:
https://www.state.nj.us/health/cd/topics/covid2019_community.shtml#3 and https://combatcovid.hhs.gov/
https://combatcovid.hhs.gov/i-have-covid-19-now/monoclonal-antibodies-high-risk-covid-19-positive-patients?gclid=EAIaIQobChMIzLTXveW37wIvTuDICh2k3g2kEAAYASAAEgl-jvD_BwE

Additional Information

- https://covid19.nj.gov/
- COVID-19 Hotline 1-800-962-1253 or 2-1-1 (for information only. NOT for scheduling vaccine appointments)
- Call 855-568-0545 for assistance with the NJ Vaccine Scheduling System (NJVSS) and vaccine appointment support.