



COVID-19 Vaccine Healthcare Provider Frequently Asked Questions January 13, 2020

General Vaccine Information

What is Operation Warp Speed?

Operation Warp Speed is a partnership among components of the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Defense to help develop, make, and distribute millions of vaccine doses for COVID-19 as quickly as possible while ensuring that the vaccines are safe and that they work. Learn more about Operation Warp Speed by visiting <https://www.hhs.gov/coronavirus/explaining-operation-warp-speed/index.html>.

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, working closely with health departments and partners as vaccines become available. 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, healthcare 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 — if not for themselves, then for those around them.

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 emergency use authorization 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. For more information, visit <https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines>. Learn more about these specific vaccines by visiting https://www.state.nj.us/health/cd/topics/covid2019_vaccination.shtml.

How much will a vaccine reduce the risk of COVID-19 and its complications?

Emergency Use Authorizations have been granted for Pfizer and Moderna vaccines. According to the FDA, the Moderna vaccine has 94.1% efficacy at preventing symptomatic cases. The Pfizer vaccine has 95% efficacy.

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.

Since a vaccine is now available, does this mean preventative actions such as social distancing, wearing masks, are no longer necessary? Will there no longer be a need for quarantine and isolation if a person is exposed/sick yet vaccinated?

Given the currently limited information on how much the vaccine may reduce transmission in the general population and how long protection lasts, vaccinated persons should continue to follow all current guidance to protect themselves and others. This includes wearing a mask, staying at least 6 feet away from others, avoiding crowds, washing hands often, following CDC travel guidance, following quarantine guidance after an exposure to someone with COVID-19, and following any applicable workplace or school guidance, including guidance related to personal protective equipment use or SARS-CoV-2 testing.

How many COVID-19 vaccines are under development?

Multiple COVID-19 vaccines are under development. There are currently more than 50 COVID-19 vaccine candidates in trials. For additional information, please see the WHO website at https://www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines?gclid=EAIaIQobChMIroXC2uvD7AIVNgiICR3pCg1tEAAYAiAAEgJi7_D_BwE.

When did NJ receive the COVID-19 vaccine(s)?

COVID-19 vaccinations began in New Jersey on December 15, 2020. This is after the Food and Drug Administration (FDA) issued an emergency use authorization (EUA) for a COVID-19 vaccine and after the Centers for Disease Control and Prevention (CDC) adopted recommendations of the Advisory Committee for Immunization Practices (ACIP).

At first, there may be limited supply of COVID-19 vaccine(s). The Centers for Disease Control and Prevention (CDC) and Operation Warp Speed (OWS) will work together to continue sending shipments to New Jersey as more doses are produced and become available.

Who can get vaccinated during Phase 1A?

Phase 1A Group includes health care workers, who are paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials. Phase 1A also includes long-term care residents and staff.

During Phase 1A, New Jersey will build step by step to serve all eligible populations. New Jersey started in December 2020 by fortifying our hospitals, including prioritizing those at highest risk of exposure to COVID-19. New Jersey's plan continues into our vulnerable long-term care facilities, using the CDC-supported Pharmacy Partnership for Long-term Care—both residents and staff are being vaccinated through this effort. Non-hospital-based healthcare personnel are also eligible under 1A. For more information about the phases of vaccine availability, please visit

<https://www.state.nj.us/health/cd/documents/topics/NCOV/VaccinePhasesFactSheet.pdf>.

Why are healthcare workers the first to receive the vaccine?

When healthcare personnel get sick with COVID-19, they are not able to work and provide key services for patients or clients. Given the evidence of ongoing COVID-19 infections among healthcare personnel and the critical role they play in caring for others, continued protection of them at work, at home, and in the community remains a national priority.

Will the vaccine be available to everyone in New Jersey? What phases are eligible?

Yes, eventually the COVID-19 vaccine will be available to everyone who wants it in New Jersey. Currently, vaccines are available to paid and unpaid healthcare workers, residents and staff of long-term and congregate care facilities, first responders including sworn law enforcement and fire professionals.

Beginning January 14, individuals over 65 and individuals 16-54 with certain medical conditions as [defined](#) by the CDC will be eligible. Plans will be reviewed and adjusted accordingly as more vaccines arrive in New Jersey. For more information about the phases of vaccine availability, please visit

<https://www.state.nj.us/health/cd/documents/topics/NCOV/VaccinePhasesFactSheet.pdf>.

When will the mega-vaccine sites open?

Two of the six mega sites have opened (Morris Co: Rockaway Townsquare Mall and Gloucester Co: Rowan College of South Jersey, Sewell). The remaining sites will open in January. These sites throughout New Jersey will serve as vaccination hubs for phased priority groups, part of a critical network of over 200 sites tasked with carrying out the state's COVID-19 vaccination plan fairly and equitably.

As sites open they will be in position to vaccinate eligible populations and then continue in a phased approach depending on the supply of vaccine to New Jersey. After these phases are complete, then the general public will be eligible for vaccination. The timing of the progression among the groups depends on the supply of vaccine to the state.

These sites will vaccinate health care workers not vaccinated by hospitals. Locations include:

- o Bergen Co: Racetrack at Meadowlands, East Rutherford
- o Morris Co: Rockaway Townsquare Mall
- o Middlesex Co: NJ Convention & Expo Center, Edison
- o Burlington Co: Moorestown Mall
- o Gloucester Co: Rowan College of South Jersey, Sewell
- o Atlantic Co: Atlantic City Convention Center

How can a healthcare worker and other eligible populations schedule an appointment to be vaccinated?

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.](#)**
3. Select healthcare facilities, including many hospitals, are offering vaccines to 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.

Can you tell me more about the NJVSS? Is my information private?

The 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 2nd 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 2nd dose of the same vaccine. For more information visit, <https://covid19.nj.gov/pages/vaccine> and <https://covidvaccine.nj.gov/>.

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.

Is this a “live” virus vaccine?

None of the early vaccines (those by Moderna, Pfizer, AstraZeneca, or Johnson & Johnson) 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 Johnson & Johnson’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>.

Can mRNA vaccines change the DNA of a person?

An mRNA vaccine causes cells to make viral proteins, in this case it is making proteins found in the SARS-CoV-2 virus which is the virus that causes COVID-19. When the proteins are made, they are released from the cell and cells from the immune system recognize them as foreign and attack them, creating an immune response. Since mRNA is active only in a cell’s cytoplasm and DNA is located in the nucleus, mRNA vaccines do not operate in the same part of the cell where DNA is located. The mRNA would not change a person’s DNA.

Vaccine Approval/Safety Concerns

What is an Emergency Use Authorization (EUA)?

Emergency Use Authorization is the legal authority of the FDA to authorize emergency use of an investigational medical product (e.g., vaccines prior to licensure, drugs prior to approval) or an unapproved use of an approved medical product to diagnose, treat, or prevent a serious or life-threatening disease. According to the FDA, 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, FDA-approved and available alternatives. The known and potential benefits of the product, when used to diagnose, prevent, or treat the identified disease or condition, must outweigh the known and potential risks of the product to grant an EUA.

The term 'EUA' can refer to either the legal authority itself or to the regulatory status of a medical product, such as COVID-19 vaccine - for example, one could say 'FDA issued an EUA' or 'an EUA is in place'. Learn more about the EUA process by visiting <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization> and watching the following video, <https://www.youtube.com/watch?v=iGkwaESsGBQ>.

Will there be a package insert or Vaccine Information Statement (VIS) along with an EUA?

When FDA authorizes emergency use of a medical product such as an anticipated COVID-19 vaccine, an EUA Fact Sheet for Healthcare Providers (in place of a package insert typical of a licensed vaccine) and an EUA Fact Sheet for Recipients (akin to product information for patients or a CDC-provided VIS for a licensed vaccine) must be provided to the healthcare providers prescribing and/or administering the authorized medical product. The healthcare providers, in turn, provide the EUA Fact Sheet for Recipients to vaccine recipients or their guardians. These fact sheets are available at https://www.state.nj.us/health/cd/topics/covid2019_vaccination.shtml

What is the difference between the EUA Fact Sheet for Recipients and the Vaccine Information Statement (VIS)?

When FDA authorizes a vaccine for use under an EUA, providers and public health entities involved in vaccine administration are legally required to provide the FDA-authorized EUA Fact Sheet for Recipients to individuals receiving vaccine or their guardians, similar to VIS’s

that are also required by law for certain licensed vaccines. The EUA Fact Sheet for Recipients, like the VIS, explains the benefits and risks associated with the vaccine. But unlike a VIS, the EUA fact sheet also provides vaccine product-specific information, including the vaccine's authorized use, dose/dose-series, and known information or experience with the vaccine from clinical trials that support issuance of the EUA by FDA.

Providers can provide the EUA Fact Sheet for Recipients (or VIS if/when the COVID-19 vaccine is licensed) in a variety of ways, including hard copy, online, video, or other electronic means of dissemination.

What safety monitoring is in place for these vaccines?

For COVID-19 vaccines, CDC and federal partners will use a toolbox of existing and new monitoring systems for COVID-19 vaccine safety.

- CDC will rely on existing systems that monitor the safety of vaccines every day, the Vaccine Adverse Event Reporting System (VAERS), the Vaccine Safety Datalink (VSD), and the Clinical Immunization Safety Assessment (CISA) Project.
- CDC has also developed a new, voluntary smartphone-based tool, v-safe, that uses text messaging and web surveys to provide personalized health check-ins after patients receive a COVID-19 vaccination.
- CDC has also expanded its collaboration with the Advisory Committee on Immunization Practices (ACIP) to include a special ACIP COVID-19 Vaccine Safety Technical Sub-Group to review available vaccine safety data.

For more information, please visit <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety.html>.

What is the difference between VAERS and V-safe?

VAERS is the reporting mechanism for any adverse events. Specifically related to COVID-19 vaccination, providers will be required to report:

- Vaccine administration errors (whether associated with an adverse event or not)
- Serious adverse events
- Multisystem inflammatory syndrome
- Cases of COVID-19 that result in hospitalization or death after the recipient has received COVID-19 vaccine

Anyone can submit a report to VAERS, including patients, family members, healthcare providers, vaccine manufacturers and the general public. VAERS cannot determine if a vaccine caused an adverse event, but can determine if further investigation is needed. Additional information is available at the VAERS website, <https://vaers.hhs.gov/index.html>.

V-safe is an optional smartphone-based tool that anyone who has received a vaccination can register for. At the time of vaccination, everyone receiving a vaccine will be given information about signing up for v-safe. Anyone reporting a clinically important event during any v-safe health check will receive a phone call from the VAERS (Vaccine Adverse Event Reporting System) hotline, and if applicable, a VAERS report will be taken during that call. V-safe also will collect information on pregnancy status and enables follow-up on pregnant women.

For more information, please visit <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/faq.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>.

How can we distinguish side effects of the vaccine from COVID-19 illness?

Since systemic post-vaccination signs and symptoms might be challenging to distinguish from signs and symptoms of COVID-19 or other infectious diseases, healthcare personnel (HCP) with postvaccination signs and symptoms could be mistakenly considered infectious and restricted from work unnecessarily. This might have negative consequences for HCP, patients, and long-term care facility residents. Therefore, to minimize the confusion and avoid unnecessary work restrictions, the CDC developed the following guidelines,

https://www.cdc.gov/coronavirus/2019-ncov/hcp/post-vaccine-considerations-healthcare-personnel.html?ACSTrackingID=USCDC_425-DM45420&ACSTrackingLabel=Weekly%20Summary%3A%20COVID-19%20Healthcare%20Quality%20and%20Worker%20Safety%20Information%20E2%80%93%20December%2028%2C%202020&deliveryName=USCDC_425-DM45420.

How can I sign up for a clinical trial?

Information on how to volunteer for a COVID-19 vaccine clinical trial is available on the National Institute of Health website, <https://www.niaid.nih.gov/clinical-trials/covid-19-clinical-trials>.

Can pregnant women get the COVID-19 vaccine?

Until findings are available from clinical trials and additional studies, only limited data are available on the safety of COVID-19 vaccines, including mRNA vaccines, administered during pregnancy.

People who are pregnant and part of a [group recommended](#) to receive the COVID-19 vaccine may choose to be vaccinated. If they have questions about getting vaccinated, a discussion with a healthcare provider might help them make an informed decision.

Can children receive the COVID-19 vaccines?

The Pfizer vaccine is authorized for use in those 16 and older. The Moderna Vaccine is 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/documents/topics/NCOV/EUA_Pfizer_FactSheet_for_Recipients.pdf and

https://www.state.nj.us/health/cd/documents/topics/NCOV/eua_moderna_factsheet_for_recipients.pdf.

COVID-19 Vaccine Enrollment

I heard vaccines have to be entered into NJIIS? What is NJIIS?

The New Jersey Immunization Information System (NJIIS), operating since 1997, is the statewide immunization information system (IIS) serving as the official repository of immunizations administered to individuals in the state of New Jersey. NJIIS is a free, confidential, population-based online system that collects and consolidates immunization information to provide an accurate immunization assessment for individuals in the state of New Jersey, as well as assists communities in assessing their immunization coverage and identifying pockets of need. For more information on NJIIS, please visit <https://njiis.nj.gov/core/web/index.html#/home>.

I am a healthcare provider who wishes to administer COVID-19 vaccine(s) once they become available. How do I sign up?

If you are NOT an NJIIS user or facility, you will be required to register with NJIIS by completing the COVID-19 Facility Enrollment Form <https://njiis.nj.gov/covid/web/index.html#/newFacilityEnrollment>.

What if I am already an NJIIS provider?

The COVID-19 Vaccine Enrollment is available for sites currently registered in NJIIS. Providers interested in participating in the COVID-19 vaccination program should complete the CDC COVID-19 Provider Agreement that is available electronically through NJIIS. When you log into NJIIS, the COVID-19 Vaccine Enrollment will be on the landing page.

To assist sites with completing the enrollment and to have technical assistance questions answered, the Vaccine Preventable Disease Program will hold weekly office hours. You can register for office hours on the NJIIS COVID-19 enrollment page, <https://njiis.nj.gov/core/web/index.html#/newFacilityEnrollment>.

Will a COVID-19 provider agreement be required?

Yes, the CDC's provider agreement form will need to be completed in order for a provider to order the COVID-19 vaccine. For more information on the provider agreement, please visit <https://www.cdc.gov/vaccines/covid-19/vaccination-provider-support.html>.

In addition, all providers interested in administering COVID-19 vaccine will be required to take the COVID-19 On-Demand Training/Tutorial. This tutorial will give an overview of how to utilize NJIIS, review inventory, add patients, run reports, order COVID-19 vaccine and a summary of requirements for providers administering COVID-19 vaccine.

I am a registered nurse and would like to volunteer to vaccinate others. Can you provide information on where one can volunteer?

At the current time, the NJDOH is accepting COVID-19 Enrollment Information Applications from NJIIS providers or facilities to administer COVID-19 vaccines. Applicants will be required

to complete a 1-hour tutorial prior to application. Additionally, any resident can sign-up to volunteer to help with New Jersey's COVID-19 response effort in their communities at <https://helpnjnow.communityos.org/>.

Who will pay for COVID-19 vaccine? Can it be ordered privately?

COVID-19 vaccine will be distributed by the federal government at no cost to enrolled COVID-19 vaccination providers. The COVID-19 vaccine cannot be ordered privately at this time.

Will providers be able to charge patients for the COVID-19 vaccine or administration fee?

There are no out-of-pocket costs for patients associated with receiving the COVID-19 vaccine. Organizations must administer COVID-19 vaccine regardless of the vaccine recipient's insurance status or ability to pay. Organizations may not seek any reimbursement, including through balance billing, from the vaccine recipient.

As providers receive the COVID-19 vaccine at no cost, they will not be able to charge for the vaccine.

Providers may bill insurance or other programs for a COVID-19 vaccine administration fee of \$16.90 for the first dose and \$28.40 for the second dose. For insured patients, providers may bill private insurance, Medicaid or Medicare. For uninsured patients, providers may receive reimbursement through the federal uninsured fund managed by the Health Resources and Services Administration (HRSA).

Can providers bill insurance plans or other programs for an office visit when administering COVID-19 vaccine?

Yes, providers can bill insurance plans or other programs for an office visit when administering COVID-19 vaccine if the visit meets the criteria for office visit coding under a recipient's plan.

Has there been a change with the NJIIS opt-in process?

Yes, Governor Murphy signed Executive Order (EO 207) to change NJIIS from an opt-in to an opt-out system. If you choose to receive the COVID-19 vaccine, your doses will be automatically entered into NJIIS. This does NOT require or mandate anyone to receive the COVID-19 vaccine. For more information, please visit https://www.state.nj.us/health/cd/documents/topics/NCOV/njiis_executive.pdf.

Do I have to manually enter data?

NJIIS has four ways to send data to NJIIS. Manual data entry, HL7 interface, Upload Excel file, and NJVSS.

Data may be entered manually. Once a staff member has completed the COVID-19 training, they will be able to log into NJIIS, with their username and password, to manually enter COVID-19 doses into NJIIS. If you have an Electronic Health Record (EHR) and wish to establish an interface with NJIIS, please complete the Interface Enrollment Request Form. NJIIS can receive immunization data directly from a provider's office EHR system via HL7 version 2.5.1 standard

messaging protocol. The time it takes to establish an interface will vary based on issues with data submissions, errors in formatting of the messages.

The Excel reporting format is available as an intermediate step while setting up an interface.

Can awardees use cooperative agreement funds to purchase PPE for staff conducting in-person VFC and IQIP site visits?

Yes. Funds from 317 and PPHF would be the easiest funds to use. Awardees may also reach out to Preparedness and/or Strategic National Stockpile to determine if funds/equipment are available through alternative channels.

Vaccine Storage and Handling

Will there be different storage and handling requirements for COVID-19 vaccine?

Yes, the Pfizer vaccine will require ultra-cold storage conditions. CDC will provide specific education and training materials to facilitate storage and handling of ultra-cold vaccine based on guidance from the vaccine's manufacturer. CDC has recently revised the COVID-19 Addendum to the Vaccine Storage and Handling Toolkit available at <https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/index.html>.

In addition, CDC is developing educational and training materials for health care providers related to COVID-19 vaccine storage, handling and administration based on ACIP recommendations, the ACIP General Best Practice Guidelines for Immunization, product information from vaccine manufacturers, and results of scientific studies. For a list of resources, visit <https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-Clinical-Training-and-Resources-for-HCPs.pdf>.

Should jurisdictions invest in ultra-cold storage units at this time?

Jurisdictions are not advised to purchase ultra-cold storage equipment at this time. Ultra-cold vaccine may be shipped from the manufacturer in coolers that are packed with dry ice. Storage and handling instructions for ultra-cold vaccine will address repacking these coolers for extended storage.

Will there be additional funding for jurisdictions to purchase ultra-cold storage units?

Because CDC does not recommend jurisdictions invest in ultra-cold storage units at this time, there will be no additional funding available.

Will CDC provide guidance on how to handle vaccines that require an ultra-cold chain?

Yes, CDC will provide specific education and training materials to facilitate storage and handling of ultra-cold vaccine based on guidance from the vaccine's manufacturer.

Vaccine Administration

Is a consent form required for vaccination?

No, informed consent is not a federal requirement. An Emergency Use Authorization (EUA) vaccine recipient fact sheet will be available online, and providers are required to provide

those to vaccine recipients prior to vaccine administration.

Does CDC recommend an observation period after vaccination?

ACIP 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. For more information, please visit <https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/anaphylaxis-management.pdf>.

What are the personal protective equipment (PPE) requirements when administering vaccines during the COVID-19 pandemic?

CDC has issued “Interim Guidance for Immunization Services During the COVID-19 Pandemic” to help immunization providers in a variety of clinical settings plan for safe vaccine administration during the COVID-19 pandemic (see <https://www.cdc.gov/vaccines/pandemic-guidance/index.html>). For information on PPE for healthcare workers, see <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>.

Is one COVID-19 vaccine preferred over the other? Can you interchange these vaccines?

Either of the currently authorized mRNA COVID-19 vaccines can be used when indicated; ACIP does not state a product preference. However, these mRNA COVID-19 vaccines are **not** interchangeable with each other or with other COVID-19 vaccine products. The safety and efficacy of a mixed-product series have not been evaluated. Both doses of the series should be completed with the same product. However, if two doses of different mRNA COVID-19 vaccine products are inadvertently administered, no additional doses of either product are recommended at this time. Recommendations may be updated as further information becomes available or other vaccine types (e.g., viral vector, protein subunit vaccines) are authorized.

Some vials of the Pfizer-BioNTech COVID-19 vaccine have contained extra product after five doses is obtained. Can the extra be used?

The Food and Drug Administration (FDA) is aware of the issue and is working with Pfizer to determine the best path forward and will share additional updates as we have them. At this time, given the public health emergency, FDA is advising that it is acceptable to use every full dose obtainable (the sixth, or possibly even a seventh) from each vial, pending resolution of the issue. However, since the vials are preservative free, it is critical to note that any further remaining product that does not constitute a full dose should not be pooled from multiple vials to create one.

Protection from Vaccine/Efficacy

How soon do antibodies form after getting the vaccine (i.e., how soon after getting vaccine am I protected)?

It usually takes about one to two weeks for immunity to develop following vaccination, but the specific timeline for any coronavirus vaccine will depend to some extent on which type of vaccine it is.

If you had COVID do you need the vaccine? 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.

Additionally, current evidence suggests that reinfection with the virus that causes COVID-19 is uncommon in the 90 days after initial infection. Therefore, people with a recent infection may delay vaccination until the end of that 90-day period if desired.

Other Vaccines

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

Given the lack of data on the safety and efficacy of mRNA COVID-19 vaccines administered simultaneously with other vaccines, the vaccine series should be administered alone, with a minimum interval of 14 days before or after administration with any other vaccines. If mRNA COVID-19 vaccines are inadvertently administered within 14 days of another vaccine, doses do not need to be repeated for either vaccine.

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.

Additional Information

- https://www.nj.gov/health/cd/topics/covid2019_vaccination.shtml
- <https://covid19.nj.gov/>
- <https://covid19.nj.gov/pages/vaccine>
- COVID-19 Hotline 1-800-962-1253 or 2-1-1 (*NOTE: These numbers are not for vaccine scheduling*).