

COVID-19 Vaccine Frequently Asked Questions July 21, 2021

New/Updated Information is highlighted in yellow.

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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.

What vaccines are authorized for use?

Currently there are emergency use authorizations (EUA) for three vaccines in the United States:

- Pfizer-BioNTech: two-dose series for those 12 and older
- Moderna: two-dose series for those 18 and older
- Janssen's Johnson & Johnson (hereon referred to as J&J): one-dose vaccine for those 18 and older.

When did Pfizer become available to those 12 through 15?

On May 12, 2021, CDC Director, Rochelle P. Walensky, adopted the CDC's Advisory Committee on Immunization Practices' (ACIP) recommendation of the Pfizer-BioNTech COVID-19 vaccine use in 12- through 15-year-old adolescents. CDC now recommends that this vaccine be used among this population, and providers may begin vaccinating them right away. Please view New Jersey Department of Health Commissioner Judith Persichilli's statement available at <u>https://www.nj.gov/health/news/2021/approved/20210512b.shtml</u>

Why should children receive the COVID-19 vaccine?

COVID-19 vaccination can help protect children from getting COVID-19. Although fewer children have been sick with COVID-19 compared to adults, <u>children can be infected with the virus that</u> <u>causes COVID-19</u>, can get sick from COVID-19, and can spread the virus that causes COVID-19 to others. Getting your child vaccinated helps to protect your child and your family. Vaccination is now recommended for everyone 12 years and older. Currently, the <u>Pfizer-BioNTech COVID-19</u> <u>Vaccine</u> is the only one available to children 12 years and older.

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

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.

Recent <u>studies</u> that have looked at how COVID-19 vaccines work in real-world conditions (vaccine effectiveness studies) have shown that these vaccines are working well. While COVID-19 vaccines are working well, some people who are fully vaccinated against COVID-19 will still get sick, because no vaccines are 100% effective. These are called <u>vaccine breakthrough cases</u>. However, there are some data to suggest that vaccination may make symptoms less severe in people who are vaccinated but still get COVID-19. For more information, visit <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.html</u>.

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.

Residents can get their second dose at any vaccine location and do not need to return to the site where they received their first dose. <u>Use the Vaccine Appointment Finder to make an appointment</u> for your second dose at any vaccination location. There is currently widespread vaccine availability across the United States.

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 (42days) 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 <u>exceptional situations</u> 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 <u>temporarily unavailable</u>, 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. A recent study showed under real-world conditions, mRNA vaccine effectiveness of full immunization (≥14 days after second dose) was 90% against SARS-CoV-2 infections regardless of symptom status; vaccine effectiveness of partial immunization (≥14 days after first dose but before second dose) was 80%. You must receive two doses in order to get the best protection against COVID-19. For more information, visit https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.html.

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 <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html</u>.

Are booster doses needed after you are fully vaccinated?

A person is considered fully vaccinated ≥2 weeks after a 2-dose mRNA COVID-19 vaccine series or ≥2 weeks after a single dose of Janssen's Johnson and Johnson COVID-19 Vaccine. The need for and timing of COVID-19 booster doses have not been established. No additional doses are recommended at this time.

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.

I received my COVID-19 vaccine outside the United States. Are these doses valid?

Whether you need to be revaccinated will depend on the type of vaccine you received and if it is FDA-authorized or listed as emergency use by the World Health Organization. Talk to your doctor about whether your vaccine doses are accepted or will require revaccination.

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.

The Pfizer vaccine can be administered to those 12 and older. Is a consent form required for vaccination of minors?

The EUA fact sheet for caregivers must be provided to the parents/guardians in advance. Informed consent must be obtained from a parent/guardian in order for the minor to be vaccinated. Informed consent can be obtained (a) by a parent/guardian signing an informed consent form or (b) if the parent/guardian is physically present and verbally consents to the child receiving the vaccine.

Points of Dispensing (PODs) should follow existing laws regarding consent for minors for medical procedures and each POD should consult with their own legal counsel regarding the facility's specific policies and procedures for consent.

I lost my COVID-19 vaccination card. How can I get a copy to show proof I received the vaccine?

If you lost your COVID-19 vaccination card, you may ask the vaccination site to provide you with another COVID-19 card, however, not all sites provide this service and some locations have closed. Another option is to ask your healthcare provider to print your official immunization record. Please ask your healthcare provider to include the COVID-19 vaccine lot number in case you will need that information in the future. The official record will list all vaccines that you have received and the date you received those vaccines.

Another option is for individuals to download the Docket mobile app (COVID-19 vaccines only), which is available in the <u>App store</u> or on <u>Google Play</u> in English or Spanish depending on Smartphone settings, or submit a request to NJIIS. For specific instructions, visit https://njiis.nj.gov/core/web/index.html#/requestImmunizationRecord.

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 someone chooses to receive the COVID-19 vaccine, their 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. Providers are required to enter all administered COVID- 19 doses into NJIIS.

Although Governor Murphy signed legislation on June 4, 2021, to end the COVID-19 Public Health Emergency, the Administration can retain the tools necessary to manage the ongoing threat posed by the pandemic. There are 14 executive orders including EO207, that will remain in place through January 1, 2022, though they can be modified or rescinded prior to that date by the Governor. For further information, please visit

https://www.nj.gov/governor/news/news/562021/approved/20210604b.shtml.

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 so that they fit more snugly. 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 <u>https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html</u>.

I heard there are variants (different strains/types) of COVID-19 now circulating. Do the vaccines protect against these variants?

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.

Current data suggest that COVID-19 vaccines authorized for use in the United States offer protection against most variants, including the Delta variant. However, some variants might cause illness in some people after they are fully vaccinated.

CDC will continue to monitor variants to see if they have any impact on how COVID-19 vaccines work in real-world conditions. For more information about variants, visit https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.html and https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.html and https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.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

Are more people now eligible for vaccination?

Everyone 12 or older who lives, works, or studies in New Jersey is now eligible for a COVID-19 vaccine.

PLEASE NOTE: 12 to 17-year-olds must have the consent of a parent or legal guardian to be vaccinated, and can only receive the Pfizer vaccine at this time under the FDA's Emergency Use Authorization. Persons less than 18 years of age should be sure to schedule appointments at a site that has Pfizer vaccine. Both Moderna and J&J are authorized for persons 18 years of age and older.

How can I schedule an appointment to get vaccinated?

There are multiple ways to get an appointment including:

1. Use the <u>NJ Vaccine Appointment Finder</u> to find vaccination locations near you with available appointments.

- 2. Attend a <u>pop-up or mobile vaccination event</u> in your community.
- 3. Register with the <u>NJ Vaccine Scheduling System</u> to be notified when an appointment is available to you at vaccine locations that use the State's Vaccine Scheduling System. **If** you need assistance registering with the NJVSS, please call 855-568-0545.
- 4. Seniors 65+ can call the senior-specific hotline at 856-249-7007 from 8am to 8pm to schedule dedicated vaccine appointments
- 5. Veterans, their spouses, and their caregivers may be eligible for vaccines through the VA. <u>Learn more here.</u>

Note: Please verify requirements with a vaccination site before visiting or making an appointment. Some require proof of residency within a specific county or municipality. In addition, 12 to 17-year-olds must have the consent of a parent or legal guardian to be vaccinated, and can only receive the Pfizer vaccine at this time under the FDA's Emergency Use Authorization.

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 <u>and</u> 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, <u>https://covid19.nj.gov/pages/vaccine</u> and <u>https://covidvaccine.nj.gov/</u>.

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.

Where can I find information on public transportation to vaccine locations?

Through the Department's VAXRIDE initiative, NJ TRANSIT supports New Jerseyans in their efforts to get vaccinated against COVID-19. Visit <u>https://www.njtransit.com/vaxride</u> to find vaccination sites that are conveniently served by NJ TRANSIT bus, train and light rail routes.

In addition, NJ 211 is offering free rides to and from vaccination sites in partnership with United Way Worldwide and Lyft. Rides are available wherever Lyft operates in New Jersey and is available to everyone including those with collapsible wheelchairs and walkers. To request a free ride, call 211 or text 898-211, or visit 211 to learn more.

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 <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety.html</u>.

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 <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety.html</u>.

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: <u>www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Appendix-D</u>.

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 <u>after</u> 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 <u>not recommended</u> you take these medicines <u>before</u> vaccination for the purpose of trying to prevent side effects.

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, <u>https://www.niaid.nih.gov/clinical-trials/covid-19-clinical-trials</u>.

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 <u>measles, mumps, rubella</u>, or <u>varicella</u>

(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 <u>https://www.chop.edu/centers-programs/vaccine-education-center/making-vaccines/prevent-covid</u>.

Do any of the COVID-19 vaccines cause you to shed the virus?

No. Vaccine shedding is the term used to describe the release or discharge of any of the vaccine components in or outside of the body. Vaccine shedding can only occur when a vaccine

contains a weakened version of the virus. None of the vaccines authorized for use in the United States contain a live virus.

The mRNA and viral vector vaccines are the two types of currently authorized COVID-19 vaccines available.

Learn more about <u>how mRNA COVID-19 vaccines work</u>. Learn more about <u>how viral vector vaccines work</u>.

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 nor interacts with our DNA in any way.

Can pregnant people get the COVID-19 vaccine?

Based on how these vaccines work in the body, experts believe they are unlikely to pose a specific risk for people who are pregnant. However, there are currently limited data on the safety of COVID-19 vaccines in pregnant people.

- Clinical trials that look at the safety and how well the COVID-19 vaccines work in pregnant people are underway or planned. Vaccine manufacturers are also monitoring data from people in the clinical trials who received vaccine and became pregnant.
- Studies in animals receiving a <u>Moderna</u>, <u>Pfizer-BioNTech</u>, or <u>Johnson & Johnson's</u> <u>Janssen (J&J/Janssen)</u> COVID-19 vaccine before or during pregnancy found no safety concerns.

A pregnant person 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.

Can people who are breastfeeding receive COVID-19 vaccines?

There are no data on the safety of COVID-19 vaccines in lactating people, but based on how these vaccines work in the body, experts believe there is no risk for lactating people or their infants. A lactating person may choose to be vaccinated.

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

Do the COVID-19 vaccines cause infertility (inability to get pregnant)?

If you are trying to become pregnant now or want to get pregnant in the future, you may receive a COVID-19 vaccine when one is available to you.

There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems. CDC does not recommend routine pregnancy testing before COVID-19 vaccination. If you are trying to become pregnant, you do not need to avoid pregnancy after receiving a COVID-19 vaccine. Like all vaccines, scientists are studying COVID-19 vaccines carefully for side effects now and will report findings as they become available. For more information, please see the following resources,

<u>https://www.state.nj.us/health/cd/documents/topics/NCOV/covid19_vaccines_fertility_flyer.p</u> <u>df and https://www.cdc.gov/coronavirus/2019-</u> ncov/vaccines/recommendations/pregnancy.html.

Can being around someone who received the COVID-19 vaccine affect my menstrual cycle? Your menstrual cycle cannot be affected by being near someone who received a COVID-19 vaccine. Individuals who have received a COVID-19 vaccine cannot shed or release any of the vaccine components. In addition, none of the vaccines authorized for use in the United States contain a live virus so it is not possible to shed it.

Many things can affect menstrual cycles, including stress, changes in monthly schedule, problems with sleep, and changes in diet or exercise. Infections may also affect menstrual cycles.

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 some experts, such as the Society of Breast Imaging, people should either schedule the breast screening before getting the shot or wait four-six 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, <u>https://www.sbi-online.org/</u> and <u>https://www.sbi-online.org/Portals/1/End-the-Confusion-Materials/recommendations-for-women-taking-covid-vaccine_landscape.pdf</u>

If you are due for a mammogram and have been recently vaccinated for COVID-19, ask your doctor how long you should wait after vaccination to get your mammogram.

I heard there have been reports of heart issues after receiving the vaccine. Is it safe to get vaccinated?

Since April 2021, there have been increased reports to the Vaccine Adverse Event Reporting System (VAERS) of cases of inflammation of the heart—called myocarditis and pericarditis—

happening after mRNA COVID-19 vaccination (Pfizer-BioNTech and Moderna) in the United States. There has not been a similar reporting pattern observed after receipt of the Janssen COVID-19 Vaccine (Johnson & Johnson).

In most cases, patients have responded well to medications and rest and had prompt improvement of symptoms. Reported cases have occurred predominantly in male adolescents and young adults 16 years of age and older.

CDC continues to recommend COVID-19 vaccination for everyone 12 years of age and older given the greater risk of other serious complications related to COVID-19, such as hospitalization, multisystem inflammatory syndrome in children (MIS-C), or death. For more information, please visit <u>https://www.cdc.gov/vaccines/covid-19/clinical-considerations/myocarditis.html</u>.

Have there been reports of Guillain-Barré syndrome (GBS) among recipients of the J&J vaccine?

The CDC and FDA are monitoring reports of GBS after J&J's COVID-19 vaccination.

GBS is a neurological disorder in which the body's immune system damages nerve cells, causing muscle weakness, or in the most severe cases, paralysis. Most patients make a full recovery within a few weeks, although sometimes nerve damage can be permanent. There are also rare reports of the condition after COVID-19 illness.

Per the CDC, there have been 100 reports of GBS following vaccination with the Janssen vaccine in the Vaccine Adverse Event Reporting System (VAERS) after 12.8 million doses of Janssen COVID-19 vaccine administered. Of these reports, 95 were serious and required hospitalization. The majority of cases have occurred in males aged 50 years and older about two weeks after vaccination, mostly within six weeks. The vast majority of patients have recovered, although one death has been reported.

The CDC continues to recommend that everyone 12 years of age and older receive a COVID-19 vaccine. The risk of severe adverse events after any COVID-19 vaccination remains rare, far lower than adverse health outcomes associated with contracting COVID-19.

For more information on vaccine safety, visit <u>https://www.cdc.gov/coronavirus/2019-</u> ncov/vaccines/safety.html and speak with your healthcare provider.

If I got the J&J vaccine, am I at risk of Guillain-Barré syndrome or a blood clotting disorder? If you received the Johnson & Johnson shot and within two weeks have not developed any of the side effects associated with Guillain-Barré syndrome – muscle weakness, tingling in hands and feet, difficulty catching your breath, or choking on saliva – the risk for an adverse reaction is very low. Contact your healthcare provider if you have symptoms or concerns.

Information regarding J&J vaccine pause

Why was production of J&J vaccine paused?

Out of an abundance of caution and following the guidance of the U.S. Centers for Disease Control and Prevention (CDC) and the U.S. Food and Drug Administration (FDA), the New Jersey Department of Health(NJDOH) paused the administration of the J&J vaccine across all vaccination sites in the state from April 13 to April 23, 2021.

The CDC and the FDA reviewed the data involving six reported cases—among nearly 7 million doses administered in the U.S.—in women between the ages of 18 and 48 who received the J&J vaccine. Symptoms occurred 6 to 13 days after vaccination. In these cases, a type of blood clot called cerebral venous sinus thrombosis was seen in combination with low levels of blood platelets. Both the CDC and FDA have said that these adverse events are extremely rare. According to the FDA and CDC, individuals who have received the vaccine and develop abdominal pain, leg pain, shortness of breath, severe headache, or other unusual symptoms within three weeks after vaccination should contact their health care provider.

On April 23, 2021, the NJDOH notified vaccine Points of Dispensing (PODS) that updated FDA fact sheets for patients and providers will be provided and that they may resume administration of the one-dose vaccine. The decision came after the ACIP met to review data involving the cases of individuals who received the J&J vaccine and had adverse reactions.

The extended pause was meant to give scientists time to collect more data before deciding whether to resume use of the J&J doses to combat COVID-19.

I received the J&J vaccine. What should I do?

If you received the vaccine within the last few weeks, contact your healthcare provider and seek medical treatment urgently if you develop any of the following symptoms:

- severe headache,
- backache,
- new neurologic symptoms,
- severe abdominal pain,
- shortness of breath,
- leg swelling,
- tiny red spots on the skin (petechiae), or
- new or easy bruising

If you experience any adverse events after vaccination, report them to <u>v-safe</u> and the <u>Vaccine Adverse Events Reporting System</u>.

Should I be concerned about the safety of this vaccine?

The identification of what is approximately a less than 2-in-a-million risk associated with the J&J vaccine is a sign that the nation's safety monitoring system for COVID-19 vaccines is working. After any vaccine is successful in clinical trials and approved for use, the FDA continues to monitor it for safety. The pause in the use of the J&J vaccine allowed scientists to evaluate each incidence of the clotting disorder. They determined that the level of risk was very low and that the benefits of continued use of the J&J vaccine greatly outweighed any risk associated with it.

Please remember this potential safety issue was caught early, and this pause reflects the federal government's commitment to transparency as CDC and FDA review these data. COVID-19 vaccines have undergone and will continue to undergo the most intensive safety monitoring in U.S. history.

Who is at risk for the blood clotting disorder associated with the J&J vaccine?

The likelihood of the blood clotting disorder resulting from the J&J vaccine is extremely rare. The risk varies by age and gender. There have been fewer than 1 case per million for men and for women who are 50 years or older. The risk is estimated to be about 7 cases per million for women age 18 to 49. If you have questions about the J&J vaccine, talk to your doctor.

If I got the J&J vaccine, am I at risk?

If you received the J&J shot and have not developed any of the side effects associated with the blood clotting disorder (severe headache or abdominal pain, shortness of breath, neurological symptoms, leg swelling) within three weeks of being vaccinated, the risk of an adverse reaction is unlikely. If you have questions or concerns, consult your doctor.

If I'm offered the J&J vaccine, should I wait until I can get either Pfizer or Moderna?

For most people, getting the first COVID vaccine is the best thing you can do to safeguard your health. Your odds of contracting a possibly life-threatening case of COVID-19 are much higher than your odds of serious side effects from the vaccine. The risk of blood clots from COVID *illness* is 165,000 per million cases.

More than 90% of the vaccine supply in the United States is either the Pfizer of Moderna vaccine. However, for some settings the J & J vaccine may be the one that is available. And some people prefer the option of a single-dose vaccine.

Has this issue been seen with the other COVID-19 vaccines?

No. As of April 13, 2021, no cases of this blood clot issue have been reported among the more than 180 million people who received the Pfizer-BioNTech or Moderna vaccines.

Recently, a large, non-peer-reviewed study led by Oxford University researchers found the risk of developing clots is much higher if you get sick from COVID-19 disease than from getting a COVID-19 vaccine. More information on the study is available at https://www.cidrap.umn.edu/news-perspective/2021/04/study-covid-much-more-likely-vaccines-cause-blood-clots and https://www.cidrap.umn.edu/news-perspective/likely-vaccines-cause-bl

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 <u>https://vaers.hhs.gov/index.html</u> and the smart phone app, v-safe. Your doctor will provide you with information to register for v-safe. Additional information is available at <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html</u>.

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. <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html</u>.

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 <u>criteria</u> to discontinue isolation.

Even if you have already recovered from COVID-19, it is possible—although rare—that you could be infected with the virus that causes COVID-19 again. Studies have shown that vaccination provides a strong boost in protection in people who have recovered from COVID-19. Learn more about why getting vaccinated is a safer way to build protection than getting infected.

If you were treated for COVID-19 with monoclonal antibodies or convalescent plasma, you should wait 90 days before getting a COVID-19 vaccine. Talk to your doctor if you are unsure what treatments you received or if you have more questions about getting a COVID-19 vaccine.

If you or your child has a history of multisystem inflammatory syndrome in adults or children (<u>MIS-A</u> or <u>MIS-C</u>), consider delaying vaccination until you or your child have recovered from being sick and for 90 days after the date of diagnosis of MIS-A or MIS-C. Learn more about the <u>clinical considerations</u> people with a history of multisystem MIS-C or MIS-A.

Experts are still learning more about how long vaccines protect against COVID-19. CDC will keep the public informed as new evidence becomes available.

After getting a COVID-19 vaccine, will I test positive for COVID-19 on a viral test?

No. None of the authorized and recommended COVID-19 vaccines cause you to test positive on *viral* tests, which are used to see if you have a current infection. Neither can any of the COVID-19 vaccines currently in clinical trials in the United States.

If your body develops an immune response to vaccination, which is the goal, you may test positive on some *antibody* tests. Antibody tests indicate you had a previous infection and that you may have some level of protection against the virus. Experts are currently looking at how COVID-19 vaccination may affect antibody testing results.

Antibody testing is **not** currently recommended to assess for immunity to SARS-CoV-2 following COVID-19 vaccination. For more information, please see <u>https://www.fda.gov/medical-devices/safety-communications/antibody-testing-not-currently-recommended-assess-immunity-after-covid-19-vaccination-fda-safety.</u>

If I get sick with COVID-19 after receiving the first dose, when should I get the second dose? You can receive the second shot at the recommended interval (i.e., 21 days for Pfizer: 28 days for Moderna) after COVID disease as long as your illness has resolved and after you have met the <u>criteria</u> to discontinue isolation.

If you received monoclonal antibodies as treatment for COVID-19 infection, then you should wait 90 days after the monoclonal antibodies to get the vaccine. Talk to your doctor if you are unsure what treatments you received or if you have more questions about getting a COVID-19 vaccine.

What are New Jersey's masking and physical distancing guidelines?

There are no numerical limits for indoor or outdoor gatherings. To save lives and stop the spread of COVID-19, you should <u>wear a mask</u> and social distance if you are not vaccinated, wash your hands, and stay home if you are sick.

For the complete guidance, visit <u>https://covid19.nj.gov/faqs/nj-information/reopening-guidance-and-restrictions/how-can-people-safely-get-together-what-are-the-limits-for-indoor-and-outdoor-gatherings</u>.

What are the travel recommendations in New Jersey?

New Jersey residents returning home and travelers visiting New Jersey do not need to quarantine, but should follow travel guidance from the CDC, the NJ Department of Health, and all local health and safety protocols of their travel destination.

International travelers need to pay close attention to the <u>situation at their international</u> <u>destinations</u> before traveling due to the spread of new variants and because the burden of COVID-19 varies globally.

CDC prevention measures continue to apply to all travelers, including those who are vaccinated. All travelers are <u>required to wear a mask</u> on all planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and in U.S. transportation hubs such as airports and stations. For more information, visit <u>https://covid19.nj.gov/faqs/nj-information/travel-and-transportation/are-there-travel-restrictions-to-or-from-new-jersey</u>.

Other Vaccines

Can you receive COVID-19 at the same time as other vaccines?

COVID-19 vaccines and other vaccines may now be administered on the same day. Currently it is unknown if there is a potential for increased reactions when COVID-19 is given with other vaccines. Speak with your healthcare provider to determine what works best for you.

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=EAIaIQobChMIzLTXveW37wIVTuDICh2k3g2kEAAYASAAEgI-jvD_BwE

Additional Information

- https://www.nj.gov/health/cd/topics/covid2019 vaccination.shtml
- <u>covid19.nj.gov/</u>
- <u>covid19.nj.gov/vaccine</u>
- <u>covid19.nj.gov/finder</u> (search for vaccine appointments)
- COVID-19 Hotline 1-800-962-1253 or 2-1-1 (*for information only. NOT for scheduling vaccine appointments*)
- Call <u>855-568-0545</u> for assistance with the NJ Vaccine Scheduling System (NJVSS) and vaccine appointment support.
- Call 856-249-7007 to get appointment assistance for seniors 65 and older.