**COVID-19 Vaccination Information**

This document is not legal advice. Talk to your attorney for guidance.

**Minnesota (MIIC)**

- [www.health.state.mn.us/people/immunize/miic/public.html](http://www.health.state.mn.us/people/immunize/miic/public.html)
- 1-800-657-3970

**COVID-19 Vaccination - Go To VaccinationSite.gov**

- [vaccines.gov](http://vaccines.gov)
- 1-800-232-0233

**Additional Resources**

- [CDC](https://www.cdc.gov)
- [FDA](https://www.fda.gov)
- [State Health Departments](https://www.who.int)

**Vaccination Site Information**

- For access to a COVID-19 vaccination site, please visit [Vaccines.gov](http://vaccines.gov) or call 1-800-232-0233.
COVID-19

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□  თა ავადმყოფის პროგრამა ახალ პროცედურა შექმნილი იყო თუ მიმდევრობა თუ არ იყო.

**ინფორმაცია**

მოთხოვნა თანამედროვე თეტის ან ნახევართეტის ვაქცინაციაზე.

- თასტაბილიათური პროდუქტი შექმნილი იყო თუ არ იყო.
- ავადმყოფის შესახებ (Emergency Use Authorization Fact Sheet) თეტის ან ნახევართეტის გამოყენებაში არ შეიძლება თუ არ შეიძლება.
- თეტის ან ნახევართეტის შესახებ (Emergency Use Authorization Fact Sheet) თეტის გამოყენებაში არ შეიძლება.
- თასტაბილიათური შესახებ (COV-19) თანამედროვე თეტის ან ნახევართეტის შესახებ.

- თასტაბილიათური შესახებ (COV-19) თანამედროვე თეტის ან ნახევართეტის შესახებ.

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**COVID-19 Vaccine Presentation** = lists specific product name (e.g., Pfizer-BioNTech, Moderna, Janssen, etc.)

2. **Route**: IM = Intramuscular

3. **Manufacturer**: MOD = Moderna, PFR = Pfizer, JSN = Janssen

4. **Site Vaccine Given**: LD = Left Deltoid, RD = Right Deltoid, LT = Left Thigh, RT = Right Thigh

5. **Signature or initials of person administering vaccine**: Can be used if more than one person is administering vaccines.

**Signature and title of person administering vaccine**: ____________________________________________

**Date administered**: ___/___/_______

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<tr>
<th>COVID-19 Vaccine Presentation</th>
<th>EUA Fact Sheet Date</th>
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1. **COVID-19 Vaccine Presentation**

2. **Route**

3. **Manufacturer**

4. **Site Vaccine Given**

5. **Signature or initials of person administering vaccine**
Information for health care professionals about the pre-vaccination form for COVID-19 vaccine

[For health care providers, not for the patient]

This information is derived from the CDC: Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States (www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html).

Age

Follow recommendations for vaccine administration to authorized age groups found under each vaccine product’s EUA.

Immediate allergic reaction

An immediate allergic reaction to a vaccine or medication is defined as any hypersensitivity-related signs or symptoms such as urticaria (hives), angioedema (painless swelling under the skin, often happens with hives), respiratory distress (e.g., wheezing, stridor), or anaphylaxis that occur within four hours following administration.

Have you had a(n):

- Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine?
- Immediate allergic reaction of any severity within 4 hours to a previous dose or known (diagnosed) allergy to a component of the vaccine or any of its ingredients (including polyethylene glycol [PEG] or polysorbate)?

Known polysorbate allergy is no longer a contraindication to mRNA vaccination; however, known polysorbate allergy is a contraindication to Johnson & Johnson’s Janssen COVID-19 vaccine and thus, a precaution to mRNA COVID-19 vaccination.

Polyethylene glycol (PEG) is an ingredient in both mRNA COVID-19 vaccines, and polysorbate 80 is an ingredient in Janssen COVID-19 vaccine. PEG and polysorbate are structurally related, and cross-reactive hypersensitivity between these compounds may occur.

People with a contraindication to one of the mRNA COVID-19 vaccines should not receive doses of either of the mRNA vaccines (Pfizer-BioNTech or Moderna). However, people with a contraindication to mRNA COVID-19 vaccines may be able to receive Janssen COVID-19 vaccine, and vice versa, provided certain measures are taken.

Immediate allergic reaction to any other vaccine or injectable therapy (intramuscular, intravenous, or subcutaneous)? Does not include allergy shots.

A history of any immediate allergic reaction to any other vaccine or injectable therapy (i.e., intramuscular, intravenous, or subcutaneous vaccines or therapies, excluding subcutaneous immunotherapy for allergies, i.e., “allergy shots”) as a precaution but not a contraindication to vaccination.

Allergic reactions (including severe allergic reactions) not related to vaccines (COVID-19 or other vaccines) or injectable therapies, such as allergic reactions related to food (including eggs and gelatin), pet, venom, or environmental allergies, latex, or allergies to oral medications (including the oral equivalents of injectable medications), are not a contraindication or precaution to COVID-19 vaccination.
People with a reaction to a vaccine or injectable therapy that contains multiple components, one of which is a vaccine component, but in whom it is unknown which component elicited the immediate allergic reaction, have a precaution to vaccination.

People with a contraindication to one type of the currently authorized COVID-19 vaccines (e.g., mRNA) have a precaution to the other (e.g., Janssen viral vector). However, because of potential cross-reactive hypersensitivity between ingredients in other vaccines and injectable products, consultation with an allergist-immunologist should be considered to help determine if the patient can safely receive vaccination. Vaccination of these people should only be undertaken in an appropriate setting under the supervision of a health care provider experienced in the management of severe allergic reactions.

- People with a contraindication to mRNA COVID-19 vaccines (including due to a known PEG allergy): Consideration may be given to vaccination with Janssen COVID-19 vaccine. People who have received one mRNA COVID-19 vaccine dose but for whom the second dose is contraindicated should wait at least 28 days after the mRNA vaccine dose to receive Janssen COVID-19 vaccine.

- People with a contraindication to Janssen COVID-19 vaccine (including due to a known polysorbate allergy): Consideration may be given to mRNA COVID-19 vaccination. Of note, polysorbate allergy is no longer a contraindication to mRNA COVID-19 vaccination, it is a precaution.

However, people who have had an immediate allergic reaction of any severity to a vaccine or injectable therapy or have a contraindication to a different type of COVID-19 vaccine or have a history of anaphylaxis due to any cause, should be observed for 30 minutes after vaccination. All other people should be observed for 15 minutes.

**Are you feeling sick today?**

There is no evidence that someone who is sick when vaccinated will decrease the vaccine’s effectiveness or increase vaccine adverse events. If a person has COVID-19 symptoms, they should isolate following current guidelines, get tested, and if necessary, seek medical care. As a precaution, when someone is moderately to severely ill, all vaccines should be delayed until the illness has improved. A person who is mildly ill (e.g., diarrhea, upper respiratory infection, etc.), can still receive a vaccine, including people who are taking an antibiotic.

People should be offered vaccination regardless of their history of symptomatic or asymptomatic COVID-19 infection, including people with prolonged post-COVID-19 symptoms. Vaccination of people with known current COVID-19 infection should be deferred until the person has recovered from the acute illness (if the person had symptoms) and they have met criteria to discontinue isolation. This recommendation applies to people who experience COVID-19 infection before receiving any vaccine dose and those who experience COVID-19 infection after the first dose of an mRNA vaccine but before receipt of the second dose.

**Have you received passive antibody therapy as treatment for COVID-19?**

Based on the estimated half-life of monoclonal antibodies or convalescent plasma as part of COVID-19 treatment, as well as evidence suggesting that reinfection is uncommon in the 90 days after initial infection, vaccination should be deferred for at least 90 days, as a precautionary measure until additional information becomes available, to avoid interference of the antibody treatment with vaccine-induced immune responses.

For people receiving antibody therapies not specific to COVID-19 treatment (e.g., intravenous immunoglobulin, RhoGAM), administering COVID-19 vaccines is unlikely to significantly interfere with the development of a protective antibody response (for vaccine administration either at the same time or any interval before or after receiving antibody therapies). Therefore, there is no recommended minimum interval between other antibody therapies and COVID-19 vaccination.
Exposed to another person with known COVID-19 disease?
Defer vaccination until the person’s quarantine period has ended. This recommendation also applies to people with a known COVID-19 exposure before receipt of the second mRNA vaccine dose. If the person is a resident in a congregate setting, refer to CDC: Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States (www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html).

Have you ever received a dose of COVID-19 vaccine?
If the person received mRNA COVID-19 vaccine (e.g., Pfizer BioNTech or Moderna) as a first dose, it is recommended to receive the same COVID-19 vaccine product as the second dose as they are not interchangeable. In exceptional situations where the same mRNA vaccine is no longer available or a person was vaccinated with a COVID-19 vaccine not authorized in the United States, refer to CDC: Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States (www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html).

Did you have a delayed allergic reaction at the injection site after a first dose of mRNA COVID-19 vaccine?
People with only a delayed-onset local reaction (e.g., erythema, induration, pruritus) around the injection site area after the first vaccine dose do not have a contraindication or precaution to the second dose. They should receive the second dose using the same vaccine product as the first dose at the recommended interval, preferably in the opposite arm.

Other considerations
- **Chronic health condition** – is not a contraindication or precaution for vaccination.
- **Immunocompromised conditions** (e.g., HIV infection, immunosuppressive medications or therapies, etc.) – should be counseled regarding the potential for reduced immune responses and that the vaccine may not fully protect them. People need to continue to follow current guidance to protect themselves.
  - **Moderately or severely immunocompromised** —ACIP recommends an additional dose (i.e., third dose) for people that received the mRNA vaccine series. Give the same mRNA vaccine product at least 28 days after completion of the initial two-dose series. Currently, there are insufficient data to support the use of an additional mRNA COVID-19 vaccine dose after a single-dose Janssen COVID-19 vaccination series in immunocompromised people. For more details on additional doses for immunocompromised people, refer to CDC: Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States (www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html).
- **Bleeding disorder or are taking a blood thinner** – recommended to use a fine-gauge needle (23 gauge or smaller) for the vaccination, followed by firm pressure on the site, without rubbing, for at least 2 minutes.
- **Dermal filler(s)** – advise to contact their health care provider for evaluation if they develop swelling at or near the site of dermal filler following vaccination.
- **Receipt of any other vaccines within the past 14 days** – COVID-19 vaccines and other vaccines may be administered without regard to timing. It is unknown whether reactogenicity of COVID-19 vaccine is increased with coadministration. When deciding whether to co-administer another vaccine(s) with COVID-19 vaccines, providers should consider whether the patient is behind or at risk of becoming behind on recommended vaccines, their risk of vaccine-preventable disease (e.g., during an outbreak or occupational exposures), and the reactogenicity profile of the vaccines.
• **Pregnant** – Both CDC and ACOG urge that pregnant people be vaccinated. Pregnant and recently pregnant people with COVID-19 are at increased risk for severe illness when compared with non-pregnant people. Early data supports that vaccination is well-tolerated and elicits a protective immune response. Pregnant, lactating, and post-partum people 18 through 49 years of age should be aware of the rare risk of TTS after receipt of the Janssen COVID-19 vaccine and the availability of other FDA-authorized COVID-19 vaccines (i.e., mRNA vaccines).

• **Janssen vaccine and TTS** – Thrombosis with thrombocytopenia syndrome (TTS) is a rare syndrome that involves acute venous or arterial thrombosis and new onset thrombocytopenia in patients with no recent known exposure to heparin. TTS has been reported in the U.S. after receipt of Janssen COVID-19 vaccine. The FDA’s EUA for Janssen COVID-19 vaccine now includes a warning that rare clotting events might occur after vaccination, primarily among women aged 18–49 years.

Women 18 through 49 years of age can receive any FDA-authorized COVID-19 vaccine. However, they should be informed of the rare risk of TTS after receipt of the Janssen COVID-19 vaccine in their age group and the availability of other FDA-authorized COVID-19 vaccines.


• **mRNA vaccines (Pfizer-BioNTech and Moderna) and myocarditis and pericarditis** – Ongoing safety monitoring of the mRNA COVID-19 vaccines has found increased risks of myocarditis and pericarditis, particularly following the second dose, predominantly in male adolescents and young adults 16 years of age and older.

Clinicians should consult the [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States: Considerations for vaccination of people with certain underlying medical conditions](www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#underlying-conditions) or the [CDC: Clinical Considerations: Myocarditis and Pericarditis after Receipt of mRNA COVID-19 Vaccines Among Adolescents and Young Adults](www.cdc.gov/vaccines/covid-19/clinical-considerations/myocarditis.html) when deciding whether to administer an mRNA COVID-19 vaccine to someone with a history of myocarditis or pericarditis or when a patient presents with symptoms of myocarditis or pericarditis.


8/25/2021