



COVID-19 Vaccine Frequently Asked Questions

1. Is Southwestern Medical Center requiring me to get the COVID-19 vaccine?

No. At this time, the vaccine is not required. However, as healthcare providers and employees of our hospital or affiliated practices, you are strongly encouraged to get the two-dose vaccine. After all, healthcare providers are among the most influential to individuals in our communities who may be hesitant about receiving the COVID-19 vaccine. Americans overwhelmingly expect doctors, nurses and other healthcare providers to serve as a critical and trusted source of information, especially when it comes to vaccinations.

By getting vaccinated, we can not only protect our patients and ourselves, but we also have an important opportunity to lead by example in the communities we serve and help speed up the end of the COVID-19 pandemic.

2. I'm concerned that the vaccine was produced too quickly. How do I know it is safe?

The U.S. vaccine safety system ensures that all vaccines are as safe as possible. Safety is the top priority while federal partners work to make the COVID-19 vaccines. "Operation Warp Speed" does not mean that manufacturers were able to skip steps in the vaccine development process. Instead, after development of the vaccine, manufacturers took a secured risk and overlapped the study, manufacturing and distribution phases. The FDA has committed to giving these vaccinations priority (not rushed) review at all phases of the studies. Ongoing monitoring of vaccine effectiveness and side effect reports will continue to be evaluated by the FDA and the manufacturers.

You may find it reassuring that the four COVID-19 Phase III trials combined (Pfizer/Moderna/AstraZeneca/Janssen) have enrolled substantially more participants than with other vaccine trials. Collectively, COVID-19 vaccines have been tested on over 150,000 people, and trial enrollment continues every day. For non-COVID vaccine trials (Phase II & III combined), the overall mean was 33,000 and median was 27,000 enrolled participants.

COVID-19 vaccines have been shown to be very effective, but they WILL NOT be released until all aspects of safety are thoroughly reviewed.

3. How many doses of the vaccine will our hospital receive?

We do not know how many doses will be allocated to our facility at this time. We do know that Oklahoma will be responsible for overseeing distribution of the vaccine.

4. If I get the COVID-19 vaccine, do I still have to wear a mask?

Yes, for several reasons, a mask and other proven methods of preventing COVID-19 (hand hygiene and social distancing) are still necessary even after receiving the vaccine. It typically takes a few weeks for the body to build immunity after vaccination. That means it is possible that a person could



be infected with the virus that causes COVID-19 just before or just after vaccination. This is because the vaccine has not had enough time to provide protection.

5. How long does the vaccine protect a person from COVID-19?

We won't know how long immunity produced by this vaccination lasts until more data is available beyond the Phase 3 trials.

6. Will staff have to pay for the vaccine?

No. Just like the flu vaccine, the COVID-19 vaccine will be available at no cost to our team members.

7. If I have already had COVID-19 and recovered, do I still need to get the COVID-19 vaccine when it is available?

Yes, at this time the vaccine is recommended even if you previously tested positive for COVID-19. There is not enough information currently available to say if or for how long after infection someone is protected from getting COVID-19 again; this is called natural immunity. Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this. More information will be shared as it becomes available.

Due to the severe health risks associated with COVID-19 and the fact that re-infection with COVID-19 is possible, people who have had COVID-19 greater than 90 days ago should proceed with getting the vaccine. Due to limited vaccine supply, if you have had COVID-19 within the last 90 days, your likelihood of reinfection is low enough during this time period that you can wait to get the vaccine once you hit the 90-day mark.

8. Can you contract COVID-19 by getting the vaccine?

No. The vaccine is NOT a live vaccine, and it is NOT possible to contract COVID-19 from receiving the vaccine. Some people experience side effects from the vaccine, such as headache, muscle pain, or fever – but that does not mean you have COVID-19. It means your body is working to build the necessary immunity against the virus.

9. Are the COVID-19 vaccines preservative-free?

Yes, both Pfizer and Moderna vaccines are preservative-free.

10. Can the COVID-19 vaccine be administered to children?

The COVID-19 vaccine is not indicated for children at this time. The Pfizer and Moderna vaccines will likely be approved initially for adults ≥ 18 years of age.

11. What should staff do if they experience side effects after receiving the vaccine?

The CDC and FDA encourage the public to report possible side effects (called adverse events) to the [Vaccine Adverse Event Reporting System \(VAERS\)](#). This national system collects data to look for adverse events that are unexpected, appear to happen more often than expected, or have unusual



patterns of occurrence. Reports to VAERS help the CDC monitor the safety of vaccines. Safety is the top priority.

As with all vaccines, healthcare providers will be required to report certain adverse events following vaccination to VAERS. Healthcare providers also have to adhere to any revised safety reporting requirements according to FDA's conditions of authorized use throughout the duration of any Emergency Use Authorization; these requirements would be posted on [FDA's website](#).

The CDC is also implementing a new smartphone-based tool called V-SAFE to check-in on people's health after they receive a COVID-19 vaccine. When you receive your vaccine, you should also receive a V-SAFE information sheet with details for how to enroll. If you enroll in V-SAFE, you will receive regular text messages directing you to surveys where you can report any problems or adverse reactions you have after receiving a COVID-19 vaccine. More detailed information to follow.

12. How many doses are required? If multiple, when do I get another dose?

For both the Pfizer and Moderna vaccine, two doses are required. The second dose of the Pfizer vaccine should be administered 21 days after the first dose. The second dose of the Moderna vaccine should be administered 28 days after the first dose. At this time, we don't know which product our hospital/practices will receive, but it is very important to note that the second dose must be from the same manufacturer as the first dose.

Additional recommendations will be provided as they become available to help support the scheduling, administration and documentation of the vaccine, and we will provide reminders about getting the second vaccine dose.

13. What should I do if I am unable to get the second dose exactly 21 days (Pfizer) or 28 days (Moderna) after the first dose?

While it is recommended that you receive the second dose as soon as feasible after day 21 or day 28, we understand that it might not be possible to receive it on the desired date. This could be due to multiple reasons – lack of supply or lack of availability of the same manufacturer you received for the first dose – or as a result of vaccine administration scheduling at Southwestern Medical Center or personal/work schedules.

Please keep the following in mind if you cannot receive the second vaccine dose on the desired date:

1. Do not get the second dose early (e.g., before day 21 for Pfizer vaccine or day 28 for Moderna vaccine).
2. You must receive the second dose from the same manufacturer as the first dose.
3. Get the second dose as soon as possible after the desired date has passed, as it is better to get the second dose late than not at all. You will still experience the same efficacy in the long run, although you may not see the full effect of the immunity until a few weeks after the second dose.



14. How long after receiving both doses of the vaccine until it is considered effective?

Similar to the flu vaccine, it typically takes a few weeks for the body to build immunity after vaccination. That means it's possible a person could be infected with the virus that causes COVID-19 just before or just after vaccination and get sick. This is because the vaccine has not had enough time to provide protection. As a general rule, the vaccine is considered effective about two weeks after the second dose, according to the manufacturers. There is evidence that the first dose will begin providing some immunity, but it is still very important to receive the second dose for optimal results.

15. Can I choose which vaccine I get (Pfizer or Moderna)?

Since we don't know which vaccine will be distributed to Southwestern Medical Center (at least in the early months), we don't recommend waiting for a specific manufacturer. Both Pfizer and Moderna vaccines have similar efficacy, potential side effects and have shown a decreased disease severity in the small numbers of study participants who contracted COVID-19 after receiving the vaccine. Both manufacturers require two doses. It is important to remember that the second dose you receive must be from the same manufacturer. Early defense is better than no defense against COVID-19 and the complications many hospitals are seeing in COVID patients, even after recovery from the initial infection.

16. If I'm in the first group of staff members identified to receive the vaccine, do I have to get the vaccine right away or can I choose to wait?

At this time, the vaccine is not required. However, you are strongly encouraged to get the two-dose vaccine. Healthcare providers are among the most influential to individuals in our communities who may be hesitant about receiving the COVID-19 vaccine. Americans overwhelmingly expect doctors, nurses and hospitals to serve as a critical and trusted source of information, especially when it comes to vaccinations.

17. Why was I not included in the first group of our team members to be vaccinated?

This is due to the limited supply of vaccine we received at Southwestern Medical Center, which required us to sub-prioritize to appropriately distribute our initial allocation of the vaccine.

18. What recommendations are available for sub-prioritization when receiving limited vaccine supply?

The following are sub-prioritization considerations for Phase 1a from the Advisory Committee on Immunization Practices (ACIP):

- Individuals with **direct patient contact within 6 feet** and unable to telework:
 - Personnel who provide **services** to patients or patients' family members
 - Personnel who handle **infectious** materials
 - Can include inpatient or outpatient settings
- Personnel working in residential care or long-term care facilities
- Personnel without known COVID-19 infection in prior 90 days

ACIP suggests facilities and practices consider staggering vaccination of personnel from similar units or positions and consider a staffing plan if personnel require time away from clinical care if they



experience systemic symptoms post-vaccination. We will consider reviewing staffing schedules to coordinate vaccine administration to take place on the day prior to the staff member being scheduled off for greater than one day. This may help limit potential staffing shortages if staff members experience mild side effects from the vaccine.

19. When will the next round of employees be able to receive the vaccine?

The timing will be based on the amount of vaccine received at Southwestern Medical Center, and the number of employees choosing to receive the vaccine. At this time, we do not know how many vaccines Southwestern Medical Center will receive. Additional communication will be forthcoming as soon as we have more information.

**20. Will patient education information be available to give to those receiving the vaccine?
Where can I access this information?**

Yes. Once the Food and Drug Administration (FDA) issues emergency use authorization (EUA) for the vaccine, an EUA fact sheet with patient education information will be available.

21. Will the vaccine be available to inpatients during hospitalization or prior to discharge when the vaccine is more widely available?

We don't know the answer to this yet and anticipate we will have more details to share as we get closer to Phase 2 of vaccine distribution.

22. Are there consent/declination/attestation forms available for staff?

This is currently under development.

23. How will my hospital or clinic document the administration of the vaccine for staff and for the community?

For staff, the documentation of the administration will be in the Electronic Health Record (EHR) used at the facility or practice. COVID-19 vaccinations for employees should be treated as a "medical" treatment and not an "Occupational Health/Personnel" treatment.

The employee will be registered in the EHR (at the time of the vaccine administration) as an industrial/client account. The vaccine will need to be documented as a medication administration (not charge only), in order for the administration to be "flagged" for the immunization registry.

Documentation will be provided to staff and the community at the time of vaccine administration (e.g., manufacturer, date of administration, when and where to receive the second dose). More detailed information and tools will be provided when available.

24. Is it typical to have two or more different manufacturers producing the same type of vaccine?

It is not typical to have this many manufacturers producing a vaccine, but nothing is typical when it comes to a global pandemic. With most vaccines, the limited supply available when the FDA approves a vaccine is not nearly as time-sensitive as the COVID-19 vaccine.



That is why, early in the pandemic response, the [federal government began investing in select vaccine manufacturers](#) to help them increase their ability to quickly make and distribute a large amount of COVID-19 vaccines. This will allow the United States to start with as much vaccine as possible and continually increase the supply in the weeks and months to follow. The goal is for everyone to be able to easily get a COVID-19 vaccine as soon as large quantities are available. Once vaccine supply increases, several thousand vaccination providers will be available, including doctors' offices, retail pharmacies, hospitals and federally qualified health centers.

25. How do I know that the vaccine has been appropriately stored prior to being administered?

The vaccine manufacturers will be providing very detailed storage information prior to vaccine distribution, as well as with the shipments, as dry ice is involved and specific storage requirements must be met. The 2020 CDC Vaccine Storage and Handling Toolkit has been updated with a COVID-19 Vaccine Addendum with information on storage and handling best practices for COVID-19 vaccines. This addendum will be updated with specific storage and handling information for each COVID-19 product. This comprehensive guide reflects best practices for vaccine storage and handling from Advisory Committee on Immunization Practices (ACIP) recommendations, product information from vaccine manufacturers, and scientific studies.

As with all medications and vaccines, appropriate storage is the top priority for hospitals and pharmacies in order to ensure product stability and efficacy.

26. What training will be provided to staff responsible for the distribution, storage, administration and documentation of the vaccine?

General and product-specific training and additional clinical materials for healthcare professionals are forthcoming, including the following:

- Vaccine storage and handling, including video tutorials
- Vaccine preparation and administration, including video tutorials
- Vaccine manufacturers are also developing product-specific educational and guidance materials
- Guidance for vaccine administration scheduling to minimize wastage

27. Will traveling staff/providers who meet the above criteria for receiving the vaccine be considered for vaccination at Southwestern Medical Center?

Yes. Traveling staff and providers will be part of the targeted population to be vaccinated.