COVID-19 vaccines are available in North Carolina to everyone ages 5 and older.

- The vaccine is free everywhere in North Carolina.
- No government ID or insurance is required.
- Depending on where you get your vaccine, you may need to make an appointment.
- Everyone can be vaccinated, regardless of their immigration status. Getting vaccinated will not affect your immigration status.

To find a vaccine provider near you, visit MySpot.nc.gov.

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- Why You Should Get a COVID-19 Vaccine
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- Vaccine Safety
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GETTING YOUR VACCINE

What kind of identification will be required to be vaccinated?

North Carolina does not require that people have a government-issued identification card, like a driver’s license, to be vaccinated. Instead, vaccine providers are encouraged to use other ways to confirm that they are vaccinating the right person. Vaccine providers may ask people to pre-register, to fill out a form on-site with their name, address and date of birth, or ask for a bill or other document with your name and address on it. Vaccine providers may ask people for their insurance information, which may include asking for a photo ID, but vaccine providers should not withhold vaccinations or appointments for vaccinations because you cannot present identification.

Can you get a vaccine in a county you don't live in?

Yes. To protect the health of North Carolinians and promote equity in vaccine distribution, people who spend significant time in North Carolina and are able to spread the virus in North Carolina should be vaccinated when and where they have access to a vaccine. Vaccine providers should vaccinate North Carolinians no matter what county they live in.

Can non-US Citizens get the vaccine?

The COVID-19 vaccine will be available to everyone for free, whether or not they have health insurance and regardless of their immigration status. Information is kept confidential and won’t be shared with ICE for immigration enforcement. Getting the vaccine does not have a negative impact on people’s chances of adjusting their immigration status. The Department of Homeland Security released a statement on equal access to COVID-19 vaccines and vaccine distribution sites. Read more information.
**How much do the vaccines cost?**

The vaccines are free to everyone, even if you don’t have health insurance. The federal government is covering the cost of the vaccine. Administration fees should be covered by all health insurance companies and will also be covered for those who are uninsured. No vaccine provider should be charging anyone to receive the vaccine. Patients who get the vaccine while having an appointment for another reason, such as a medical check-up, may be charged for the check-up depending on their insurance.

Providers administering the vaccine to people without health insurance, or whose insurance does not provide coverage of the vaccine, can request reimbursement for the administration of the COVID-19 vaccine through the Provider Relief Fund. See [www.hrsa.gov/CovidUninsuredClaim](http://www.hrsa.gov/CovidUninsuredClaim) for more information.

Video: [https://www.youtube.com/watch?v=Uy0QvDNQnd0](https://www.youtube.com/watch?v=Uy0QvDNQnd0)

**Are children able to get the vaccine?**

Yes. Everyone ages 5 and older can receive a free Pfizer COVID-19 vaccine, even if they don’t have insurance and regardless of their immigration status. Children 12 and up can receive the Pfizer-BioNTech COVID-19 vaccine, and children 5 through 11 can receive a lower dose Pfizer-BioNTech COVID-19 vaccine. Data on COVID-19 vaccine in children has shown very high levels of effectiveness and no safety concerns. On May 10, 2021, the Pfizer vaccine was authorized by the FDA for children 12 to 15 years old based on results from a clinical trial that included 2,260 children aged 12 to 15. On October 29, 2021, a lower dose Pfizer-BioNTech COVID-19 vaccine was authorized by the FDA and recommended by the CDC on November 2, 2021, for children 5 to 11 years of age based on clinical trials with more than 3,000 children ages 5-11 with volunteers from different races and ethnicities. Pfizer is now conducting a clinical trial in children down to age 6 months. Additional clinical trials are underway for the Moderna and Johnson & Johnson vaccines for children. Updates on each of those clinical trials:

- **Moderna**, whose vaccine is currently only approved for people 18 and older, began clinical trials in adolescents in December 2020. In June, Moderna requested authorization from the Food and Drug Administration to include individuals ages 12 to 17. Moderna reported that none of the adolescents in the trial got sick with COVID-19 after being vaccinated, and there were no significant safety concerns. On March 17th, 2021, they also began clinical trials in children from ages 6 months to 11 years old.

- **Johnson & Johnson**, whose vaccine is also only approved for people 18 and older, is currently conducting a clinical trial in adolescents ages 12 to 17.

The Centers for Disease Control and Prevention recommends the Pfizer and Moderna COVID-19 vaccines as the preferred COVID-19 vaccination for both the initial series and booster dose. However, receiving any vaccine, including the Johnson & Johnson vaccine, is better than being unvaccinated.

**Why should I get my teenager vaccinated?**

There is good news for helping our children get back to the fuller lives they had before the pandemic. The tested, safe and effective Pfizer COVID-19 vaccine is available for ages 12 and up, with a smaller dose available for ages 5 to 11. This helps us ensure our kids are safely back in school this year. But that will only be possible if the large majority of North Carolinians are vaccinated.

Young people are vulnerable to the virus, just like everyone else. Getting them vaccinated is the best way to protect them, prevent the spread of COVID-19, and protect others. In North Carolina, more than 423,000 children 0 to 17 years old have tested positive for COVID-19 and the percent of COVID-19 cases in children 17 and under is increased.

Everyone ages 5 and older, including teenagers, can receive a free Pfizer COVID-19 vaccine, even if they don’t have insurance and regardless of their immigration status. CDC is also recommending that moderately or severely immunocompromised 5–11-year-olds receive an additional primary dose of vaccine 28 days after their
second shot. And now 12 to 17 year olds should receive a Pfizer booster if it has been 5 months since they completed their initial Pfizer vaccine series. Millions of people have already received this vaccine. It is safe and effective in preventing serious illness, hospitalization and death.

Video: https://www.youtube.com/watch?v=o_5ld6bEqpo

Is the vaccine safe for children and teenagers?

Yes, the Pfizer COVID-19 vaccine is safe and effective in children and adolescents. Millions of children and adolescents and tens of millions of adults in the United States have received COVID-19 vaccines under the most intense safety monitoring in U.S. history.

Children and adolescents, like adults, may have some temporary reactions, such as a sore arm, feeling tired or achy for a day or two, headache or fever. These are normal and good signs that their body is building protection, and they should go away in a few days.

Parents/caregivers can enroll their child or adolescent in v-safe, a free, smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins. Through v-safe, you can report any side effects your child or teenager may have after vaccination.

There have been no safety data to suggest that the COVID-19 vaccines impact development or the ability to get pregnant in the future.

Children and teens can get other vaccines at the same time, or around the same time, as the COVID-19 vaccine.

The NC Pediatric Society, along with The North Carolina Medical Society (NCMS) and the North Carolina Academy of Family Physicians, strongly encourage all families to ensure children 5 and older are vaccinated as soon as possible against COVID-19. Read more from these organizations here.

Why should I get my younger child vaccinated?

Like teenagers, there is now good news to help our children get back to fuller lives with healthier and happier experiences both in and outside of the classroom. Children are vulnerable to the virus like everyone else, and COVID-19 cases in children can result in hospitalization, deaths, MIS-C (inflammatory syndromes) and long-term complications, such as “long COVID” where symptoms can last for months. Now with the Omicron variant, COVID-19 cases among children in the U.S. have reached their highest ever reported since the start of the pandemic and the number of children being hospitalized across the county has increased. Fortunately, we now have a lower dose Pfizer COVID-19 vaccine available for children ages 5 to 11 that is safe and effective in protecting against COVID-19. CDC is also recommending that moderately or severely immunocompromised 5–11-year-olds receive an additional primary dose of vaccine 28 days after their second shot. It is also free even if they don’t have insurance and regardless of immigration status. Kids 5-11 can be vaccinated at any location that has the smaller dose of Pfizer available, so find a vaccination location for kids 5-11 near you.

Where can I find more guidance about back-to-school safety?

The updated StrongSchoolsNC: Public Health Toolkit reflects the expertise of the CDC, the American Academy of Pediatrics and our public health experts on how to keep our students in-person and safe in schools with layered prevention strategies. It is important to note that the need for additional statewide action and changes to the toolkit may be needed over time based on new data, our COVID trends, and as vaccinations become available for children under the age of 5.

Can people under the age of 18 get a COVID-19 vaccine without parental consent?

State law requires that a parent or legal guardian provide written consent for anyone under 18 to receive a vaccine that has emergency use authorization from the Food and Drug Administration (FDA). Once a vaccine is fully approved by the FDA written consent is no longer required. However, it is expected that for most teens, information about vaccination will be shared with parents and guardians, and parental/guardian consent will be obtained for
COVID-19 vaccination. North Carolina law also gives people under the age of 18 the ability to make certain health decisions, including the choice to get an FDA-approved COVID-19 vaccine, if they show the decisional capacity to do so. Decisional capacity is a person's ability to understand their health and health care needs and options, and to make decisions about them. As part of normal development most children are able to make these kinds of decisions like an adult at some point before the age of 18. There is no one age at which this always occurs; it varies from child to child. Parents and guardians can enroll children ages 5 years and older in v-safe and complete health check-ins on their behalf after they have been vaccinated for COVID-19. All family members who are eligible to be vaccinated can enroll at https://vsafe.cdc.gov/en.

On August 23, 2021, the FDA approved the Pfizer vaccine (now marketed as Comirnaty) for anyone 16 and older. Therefore, written consent from parent or a legal guardian is not required for the primary series (dose 1 and dose 2) for 16 and 17 years olds. Written consent is required for:

- children aged 5 through to 15 years for initial doses,
- children and teens 5-17 years old that are eligible for an additional dose due to being moderately or severely immunocompromised,
- 12 to 17 year olds to get a Pfizer booster dose.

I am a teenager, where can I find more information for me, my friends and family about the COVID-19 vaccine?

You can find helpful information, tools and resources needed to educate yourself, your friends and family about the benefits of COVID-19 vaccines at TeenVaxFacts.com.

How can I get my entire family vaccinated at once?

There are many ways to get your family vaccinated together.

Most vaccine providers allow you to sign up for vaccine appointments, and you can schedule appointments for all members of your family. More vaccine providers are also now offering walk-in vaccinations, so eligible people in a family can show up together for these walk-in clinics.

If you have children who are ages 12 to 17, they are currently only eligible to receive the Pfizer vaccine, so it is important to check that the vaccine provider has the Pfizer vaccine available for them. If you have children who are ages 5 to 11, it is important to check that the provider has the smaller dose (pediatric) Pfizer vaccine available.

Many locations in North Carolina offer COVID-19 vaccines specifically for children and their families. For more information about how vaccines work and where you can find a vaccination appointment nearby, visit MySpot.nc.gov. The North Carolina Vaccine Help Center at 888-675-4567 can also help you make an appointment. It is open 7 a.m.–7 p.m. on weekdays and 8 a.m.–4 p.m. on weekends.

How can I avoid missing work to get my vaccine?

Many places have vaccination appointments available on the weekends or in the evenings as well as allow walk-ins. Temporary reactions after getting vaccinated, like a sore arm, fatigue, fever, or feeling achy for a day or two, can be normal and show that the vaccine is working to give your body protection against COVID-19. NC DHHS is encouraging employers to provide paid time-off for employees to get a vaccine or for the temporary reactions after being vaccinated. For people without paid time-off or for whom it is difficult to miss work, we encourage getting vaccinated prior to a day off.

Can I get a ride to my vaccine visit?

Yes, there are multiple free transportation options to get vaccinated:

- Call your local transit authority for a free ride to your vaccine appointment. You may need to call in advance to schedule a ride.
• Ask your vaccine provider about transportation options. Some have partnered with public transportation or community-based organizations who can provide free rides to vaccine appointments.

What if I need to be vaccinated at home because of limited mobility?

People who have limited mobility can be vaccinated against COVID-19 in their home. To find a vaccine provider in your area who is providing vaccinations to individuals in their home, call the At-Home Vaccination Hotline at 1-866-303-0026, or fill out a registration form. For more information on at-home vaccination, visit www.ptrc.org/covid.

WHY YOU SHOULD GET A COVID-19 VACCINE

What can you do differently once you are up-to-date on your COVID vaccines?

Everyone should continue to wear a mask as North Carolina remains in the CDC red zone with high community transmission. However, once you are up-to-date on your COVID-19 vaccines you can participate in many of the activities that you did before the pandemic.

While vaccination provides the best protection against severe illness, hospitalization and death from COVID-19, people who are vaccinated may become infected and spread the virus to others. Everyone should make sure to stay up-to-date on their COVID-19 vaccines by getting an additional dose if immunocompromised or a booster dose if due as booster doses increase your ability to fight the new variant. More information here.

Even if you are vaccinated, get tested if you have any symptoms of COVID-19. People with COVID-19 should stay away from others (isolate) for at least five full days and wear a mask for an additional five days. People exposed to COVID-19 should stay from others (quarantine) for five days and wear a mask for an additional five days. However, people who are exposed to COVID-19 do not need to quarantine if they are vaccinated — including a booster for adults — against COVID-19.

Why do I need to get a vaccine if I can practice other things like social distancing to prevent the COVID-19 virus from spreading?

Vaccines work to prepare your body to fight the virus if you are exposed to it. Vaccines help protect you from serious illness, hospitalization and death from COVID-19 Other steps, like the 3Ws—wear a mask, wait 6 feet apart and wash your hands—help reduce your chance of being exposed to the virus or spreading it to others. Getting the COVID-19 vaccine and following the 3Ws is everyone’s best protection from getting and spreading COVID-19.

If everyone else is getting the vaccine, do I need to?

Yes. With the current Omicron surge, protecting yourself, your loved ones and your community is more important than ever. It is incredibly important that everyone in North Carolina do their part to help get as many people vaccinated as possible, including boosters. The more people who are vaccinated, the faster we will end the pandemic and the more confident each one of us can be that we and our loved ones are protected as we get back to the people and places we love. To protect those who cannot be vaccinated due to age or medical conditions, we need everyone who can safely get vaccinated to do so. Prevention is the best treatment to protect against COVID-19 so get vaccinated, get boosted.

Do people who have had COVID-19 still need to be vaccinated?

Yes, you should get vaccinated if you already had COVID-19. People who have been infected with COVID-19 and recovered have some protection against the virus, called natural immunity. Current evidence suggests that reinfection is uncommon in the 90 days after initial infection. However, experts do not know how long this protection lasts or how it is impacted by different variants. The risk of severe illness and death from COVID-19 far outweighs any benefits of natural immunity. In addition, an individual's protection is not based on antibody levels. A study showed that among individuals infected with COVID-19, unvaccinated individuals were more likely to get reinfected.
than those who had received two doses of Pfizer or Moderna or one dose of Johnson and Johnson. Vaccines provide strong protect from serious illness, hospitalization, and death from COVID-19. Vaccines may also better protect you against certain variants of the COVID-19 virus. Getting vaccinated against COVID-19 is the best way to protect yourself and those around you from getting COVID-19. If you were treated for COVID-19 symptoms 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. Additional information can be found here.

**Should I get vaccinated against COVID-19 if I am currently sick with COVID-19?**

No. People who are actively sick with COVID-19 should wait until they have recovered and can no longer spread the virus before getting their vaccine. If in between first and second doses, the second dose can be given up to 6 weeks after the first dose and still be very effective (see "What happens if you don't get your second dose on the right day"), so do not worry if you have to reschedule your appointment for a later date. Once you have recovered, it is safe to get vaccinated with any COVID-19 vaccine if you have been infected in the past.

**Should children get vaccinated if they have had COVID-19?**

Yes, your child should still get the vaccine even if they have had COVID-19 in the past. Multiple studies show that the currently available COVID-19 vaccines can be safely given to people with prior COVID-19. Evidence is emerging that people get better protection by being vaccinated, even if they've had COVID-19. It's possible that the immunity from natural infection decreases over time, especially for those with mild symptoms.

Anyone who is currently sick with COVID-19 should wait for their symptoms to improve and they are no longer on isolation before getting the vaccine. If symptoms are mild or the infection is asymptomatic (they never develop symptoms), wait 10 days after the first positive COVID-19 test. If they are treated with monoclonal antibodies or convalescent plasma, wait 90 days before getting a COVID-19 vaccine.

**Can individuals who are pregnant, breastfeeding or want to become pregnant be vaccinated?**

COVID-19 vaccination is strongly recommended for all people 5 years of age and older, including people who are pregnant, breastfeeding, trying to get pregnant now, or might become pregnant in the future. On September 29, CDC issued an urgent health advisory to increase COVID-19 vaccination among those who are pregnant, recently pregnant (including those who are breastfeeding), who are trying to become pregnant, or who might become pregnant in the future in order to prevent serious illness, deaths, and adverse pregnancy outcomes. More than 190,000 pregnant women have chosen to receive at least one dose of a COVID-19 vaccine in the United States. There is no need to wait or avoid getting pregnant if you are planning to get vaccinated. Those seeking fertility treatment can also get vaccinated. There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men. Recent reports have shown that breastfeeding women who have received COVID-19 mRNA vaccines have antibodies in their breastmilk, which could help protect their babies.

Growing evidence shows that COVID-19 vaccination during pregnancy is safe and effective and the benefits of getting a vaccine far outweigh the risks. A recent study showed that COVID-19 vaccination during pregnancy did not increase risk of preterm birth or low birth weight. The risks of COVID-19 virus are greater for pregnant women compared to people who are not pregnant. Pregnant women with COVID-19 have a higher risk of being hospitalized and needing care in the ICU. Pregnant women with COVID-19 are at increased risk for preterm birth (delivering the baby earlier than 37 weeks) and might be at increased risk for other poor outcomes related to pregnancy compared to pregnant people without COVID-19 such as pregnancy loss.

Vaccination for those who are pregnant or wanting to become pregnant is recommended by the American College of Obstetricians and Gynecologists (ACOG), the Society for Maternal-Fetal Medicine (SMFM), the American Society for Reproductive Medicine (ASRM), and the Society for Male Reproduction and Urology.
Additionally, infants of vaccinated women may also get some protection from vaccination because the antibodies from the vaccines can be transferred from mother to child. This means that you and your baby may both be protected against COVID-19.

There are many options available to you to learn more about the vaccines and their safety for pregnant women and those who want to become pregnant. Along with your own physician, you can also consult MotherToBaby or call 1-866-626-6847.

If you are pregnant and have received a COVID-19 vaccine, we encourage you to enroll in v-safe. V-safe is the CDC’s smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after vaccination. A v-safe pregnancy registry has been established to gather information on the health of pregnant people who have received a COVID-19 vaccine.

Video: https://www.youtube.com/watch?v=cvU8fmfOvb0

Can I get the COVID-19 vaccine if I just got another vaccine for something else?

You can get the COVID-19 vaccine at the same time as other vaccines, including the flu vaccine, and regardless of the timing of those vaccines.

Who should NOT get a COVID-19 vaccine?

All North Carolinians who are able to receive the COVID-19 vaccine should get the vaccine to protect themselves and our communities. There are very few reasons why someone may NOT be able to get the vaccine. The medical reason to not get vaccinated is if you have had a severe allergic reaction (i.e., anaphylaxis) or an immediate allergic reaction after a first dose or to a component of the COVID-19 vaccine. In addition, individuals with a history of thrombosis with thrombocytopenia syndrome (TTS), a rare condition after the administration of the Johnson & Johnson COVID-19 vaccine, should NOT get the Johnson & Johnson COVID-19 vaccine or another adenovirus-vectored COVID-19 vaccine (i.e., AstraZeneca). Children under 5 years of age cannot get a COVID-19 vaccine, unless the child is enrolled as part of a clinical trial.

COVID-19 vaccines may be administered to most people with underlying medical conditions, including people who are immunocompromised (i.e., weakened immune systems), have food allergies, autoimmune conditions, and have previously had Guillain-Barre syndrome (GBS) or Bell’s palsy. Please talk with your health care provider if you think you might have a medical reason for not getting the COVID-19 vaccine. Your health care provider can discuss your options with you. If you are not able to receive the COVID-19 vaccine but are being asked to show proof of vaccination, check with the school or employer on what documentation is needed. Your provider can work with you to provide appropriate documentation if you are medically exempt from vaccination.

ONE-DOSE VERSUS TWO-DOSE VACCINES

Will I be able to choose which vaccine I get?

The Centers for Disease Control and Prevention now recommends the Moderna and Pfizer COVID-19 vaccines as the preferred COVID-19 vaccination for both the initial series and booster dose, as there is ample supply of both vaccines in North Carolina and across the country. However, receiving any vaccine, including the Johnson & Johnson vaccine, is better than being unvaccinated and people who prefer to receive the J&J COVID-19 vaccine or cannot receive an mRNA vaccine will continue to have access to it. All three vaccines have prevented severe illness and hospitalization among millions of Americans. The Pfizer vaccine is authorized for people ages 5 and older, while the Moderna and Johnson & Johnson vaccines are authorized for adults 18 and older.

What are the differences between the one-dose and two-dose vaccines?

The two-dose vaccines use mRNA to give your body temporary instructions to make a protein that teaches your body to make germ-fighting antibodies against the COVID-19 virus. Instead of mRNA, the one-dose vaccine (made by Johnson & Johnson/Janssen) uses DNA to give your body the same type of temporary instructions. The DNA is carried into the body on a harmless version of the virus called adenovirus. Your body naturally breaks down
everything in the vaccine. There is no COVID-19 virus in the vaccine and none of the vaccines can change your DNA.

People 12 years and older who got either the two-dose Pfizer vaccine or the two-dose Moderna vaccine should get a booster at least 5 months after the second dose. People who received the one-dose Johnson & Johnson vaccine should get a booster dose two months after the initial dose. Children and teens ages 12 to 17 can only receive the Pfizer booster, but adults 18 or older can get any brand. The Centers for Disease Control and Prevention now recommends the Moderna and Pfizer COVID-19 vaccines as the preferred COVID-19 vaccine for both the initial series and booster dose. All of the vaccines are very effective in preventing severe illness, hospitalization and death.

The temporary reactions are similar among all vaccines, although people receiving the one-dose vaccine may only experience temporary reactions once. Temporary reactions may include a sore arm, headache, fever, or feeling tired and achy for a day or two after receiving the vaccine. None of the vaccines can give you COVID-19.

**What happens if you don’t get your second dose on the right day?**

You should get the second vaccine dose as close to the recommended time as possible—3 weeks apart for Pfizer-BioNTech or 4 weeks apart for Moderna. Both Pfizer-BioNTech and Moderna COVID-19 vaccines may be scheduled up to 6 weeks (42 days) after the first dose. If you do not get your second dose within 6 weeks, you do not need to start again at the first dose. The second dose can be given up to 4 days early and still count for the series. If you do not get your second dose at the recommended time, you should get it as soon as possible, but you do not need to start again at the first dose. You should then get a booster dose at the recommended time after your second dose.

**Do I need to go back to the same provider for my second dose of Pfizer or Moderna?**

With increased vaccine supply across North Carolina, you no longer have to receive the second dose at the same site that you received the first dose. If you go to a different provider for the second dose, make sure you go to a provider with the same brand of vaccine (e.g., Pfizer or Moderna) that you received for your first dose and bring your vaccination card with you so the provider can confirm which vaccine you received and when. Eligible individuals can go to any available provider for their booster shot.

**If two shots are necessary for some vaccines, how will people know when to get their second shot?**

North Carolina uses a secure data system called the COVID-19 Vaccine Management System (CVMS) to make sure you get your second shot or booster at the right time. When a person gets the first shot, they are asked to make a second appointment. An individual does not have to go back to the same provider for other doses. People will also be given a vaccination card with information about which vaccine they got for their first dose and the date of that shot. Keep the card in a safe spot and take a picture of it just in case it gets misplaced. People may receive an email notification or text with a reminder for the second shot.

Individuals who choose to use v-safe, a CDC tool to provide personalized health check-ins after their shot, will also receive text reminders for their second dose. The provider who gave the first vaccine may also help with reminders for the second shot. State and federal privacy laws make sure none of your private information will be shared. The shot you take and when you need the second is confidential health information that is carefully managed to protect your privacy.

**Do I need an additional dose?**

An additional dose is different from a booster dose. The CDC recommends that individuals 5 years and older who are moderately to severely immunocompromised and received the Moderna or Pfizer vaccines receive an additional dose of the age appropriate product to better protect themselves from COVID-19.
A full list of conditions can be found on the [CDC's website](https://www.cdc.gov). According to the CDC, emerging data suggest some people with moderately to severely compromised immune systems do not always build the same level of protection after vaccination compared to people who are not immunocompromised. In addition, in small studies, immunocompromised people who received two doses of Moderna or Pfizer or one dose of Johnson & Johnson have accounted for a large proportion of hospitalized post-vaccination cases. An additional dose of the same brand of vaccine is recommended for moderately to severely immunocompromised people at least 28 days after they’ve completed their initial two-dose series to help increase the body’s immune response. The same vaccine brand should be used unless unavailable, in which case either Pfizer or Moderna vaccine can be used. The Moderna vaccine is available to those 18 and older, while the Pfizer vaccine is available to those 5 and older for the additional dose. At this time, an additional dose is authorized only for people with a weakened immune system because the immune response to the primary series is likely to be decreased in these individuals.

**Do I need a booster dose?**

To strengthen and extend protections against COVID-19, [booster are recommended for all North Carolinians](https://www.cdc.gov) 12 years and older. You should get a booster if you are 12 years of age and older AND:

- You received your second/final dose of the Pfizer or Moderna vaccine at least FIVE months ago, or
- You received your Johnson & Johnson vaccine at least TWO months ago.

Those 12-17 years old can only receive the Pfizer booster. Adults 18 and older can get any brand. However, the CDC now recommends the Moderna and Pfizer COVID-19 vaccines as the best choice for most people for preventing infection from COVID-19. North Carolinians can find booster shots at their healthcare provider, pharmacies and other locations where COVID-19 vaccines are available. There is no need for people to go back to the location where they received their original vaccines—the site does not need to have the same vaccine that you first received. Speak with a doctor, nurse or pharmacist if you have questions about what booster is right for you. Visit [MySpot.nc.gov](https://www.myspot.nc.gov) for booster availability.

A **booster dose** is an additional dose of vaccine when the initial immune response was sufficient after the first vaccine series but is likely to have waned over time. (This is different from the additional dose recommended for moderately to severely immunocompromised people after they’ve completed their initial two-dose series to help increase the body’s immune response).

**Which booster should I get if I got the J&J vaccine?**

While adults are able to receive any brand of COVID-19 vaccine for their booster shot, the CDC has recommended Moderna and Pfizer COVID-19 vaccines as the preferred choice for both initial series and boosters. Speak with a health care provider if you have questions about which booster is right for you.

**If an immunocompromised person already got an additional dose, will they need to get a booster dose as well?**

Moderately and severely immunocompromised individuals 12 years of age and older who received an additional dose of Pfizer or Moderna are eligible to receive a booster dose at least 5 months after the third additional dose. Booster doses are not yet available for children 5 – 11 years old who received an additional dose of Pfizer if immunocompromised. Those 18 years of age and older can receive any brand of vaccine for the booster dose (Pfizer, Moderna, or Johnson & Johnson), and those 12 to 17 years of age can only receive Pfizer. However, the CDC recommends Moderna or Pfizer over Johnson & Johnson.

**If I received a vaccine brand in another country that is not authorized in the United States, am I eligible for a booster of one of the three available brands?**

In some circumstances people who received a COVID-19 vaccine not currently approved or authorized in the United States may be offered revaccination with an FDA-approved or authorized vaccine. Speak with a health care
provider if you have questions. In addition, people who received their first COVID-19 vaccines outside of the U.S. or in clinical trials with a brand not currently authorized can now receive a Pfizer booster shot when they are eligible.

VACCINE SAFETY

Are there vaccines that are safe and work in preventing COVID-19?

Yes. The currently recommended vaccines have proven to provide significant protection against COVID-19 and protect against virus-related hospitalization and death, with no serious safety concerns in the clinical trials.

Who makes sure the vaccines are safe and can prevent COVID-19?

The U.S. Food and Drug Administration (FDA) makes sure all food and drugs are safe. The COVID-19 vaccines must pass clinical trials like other drugs and vaccines. The FDA checks the data and authorizes vaccines only if they are safe and effective. Because vaccines are given to millions of healthy people to prevent serious diseases, they’re held to very high safety standards.

The FDA can get vaccines to people faster through an Emergency Use Authorization (EUA). After the FDA has authorized a vaccine, the Centers for Disease Control and Prevention’s (CDC) independent advisory committee reviews the data before advising the CDC on recommending a vaccine for use among the general public. Like all vaccines, the FDA keeps checking safety through the Vaccine Adverse Events Reporting System (VAERS). Health care providers are required to report serious side effects, or if someone gets seriously ill with COVID-19. There is also a smartphone app called v-safe that uses text messaging and web surveys to do health check-ins after people receive a COVID-19 vaccination. People can report any problems they may have with a vaccine through v-safe. The CDC and FDA are continuously engaged in safety monitoring of COVID-19 vaccines with numerous vaccine safety monitoring systems.

Which vaccines have received FDA approval?

The U.S. Food and Drug Administration (FDA) approved the Pfizer-BioNTech COVID-19 vaccine, which Pfizer is calling Comirnaty, for the prevention of COVID-19 disease in individuals 16 years of age and older. The Pfizer vaccine will continue to be available under emergency use authorization for children and teens ages 5 to 15, boosters for 12 to 17 year olds, and for the administration of a third dose in certain immunocompromised individuals 5 years of age and older. FDA approval for these populations will require additional time as the vaccine was not authorized for such use until more recently. All available COVID-19 vaccines in the United States have been under an EUA. Rigorous clinical trials among thousands of people have proven that vaccines are safe and effective. Over 210 million people in the United States have been safely vaccinated against COVID-19.

Are the vaccines a new technology?

Scientists had a head start in developing all of the vaccines. They are built on decades of research. Both mRNA and viral-vector vaccines technology benefit from over 30 years of scientific work and development. With more recent developments in vaccine technology over the last decade and immense investment, these two technologies were able to be used to help us fight COVID-19 without skipping any steps in development, testing, or clinical trials.

Can the vaccine give me COVID-19?

No, the vaccine does not contain any virus that is living that could make you sick with COVID-19. Instead, vaccines imitate COVID-19 without giving it to you. After you get the vaccine, the vaccine gives your body instructions to make a protein that safely teaches your body to make germ-fighting antibodies to fight the real COVID-19. Your body naturally breaks down or destroys the instructions from the vaccine.

What are the side effects from the vaccines?
No serious side effects were reported in clinical trials. Temporary reactions after receiving the vaccine may include a sore arm, headache, feeling tired and achy for a day or two or, in some cases, fever. These temporary reactions were more common after the second dose in a two-dose vaccine. Younger people are more likely to have reactions than older people.

In most cases, these temporary reactions are good signs that your body is building protection. You can take medicines like Tylenol or ibuprofen after receiving your shot to help with these temporary reactions. While extremely rare, there have been a few cases of severe allergic reaction to the Pfizer vaccine outside of the clinical trials, and vaccine providers are prepared with medicines if they need to treat these rare allergic reactions.

While it is extremely rare, there have been 54 cases (out of about 17 million doses) of thrombosis with thrombocytopenia (TTS), associated with the Johnson and Johnson vaccine, which is a condition defined by blood clots with low platelets. The Centers for Disease Control and Prevention recommends that the Pfizer or Moderna COVID-19 vaccine is the best choice for most people for preventing severe illness and hospitalization from COVID-19. However, receiving any vaccine, including the Johnson & Johnson vaccine, is better than being unvaccinated. If you develop shortness of breath, chest pain, leg swelling, persistent abdominal pain, severe or persistent headaches or blurred vision, easy bruising or tiny blood spots under the skin beyond the site of injection within 3 weeks of vaccination with the Johnson & Johnson vaccine, seek medical attention right away. There are no safety concerns for people who were previously vaccinated and did not experience TTS.

The FDA reported that there have been very rare cases of Guillain-Barre Syndrome after receiving the Johnson & Johnson COVID-19 vaccine with 100 preliminary cases out of more than 12.8 million (mostly in males, many aged 50 years and older). GBS is a neurological disorder usually triggered by a respiratory or gastrointestinal infection that most people fully recover from. The body’s immune system damages nerve cells, causing muscle weakness and sometimes paralysis in severe cases. With nearly all COVID-19 hospitalizations and deaths occurring in unvaccinated people, the risk of COVID-19 infection is greater than the extremely low risk of a severe adverse events after COVID-19 vaccination and everyone eligible should get vaccinated and receive a booster when it is time.

**What is the risk of an allergic reaction from the vaccine?**

Severe allergic reactions to the vaccines have been very rare and mostly occurred in people who have had previous severe allergic reactions. People who have had severe allergic reactions, also called anaphylaxis, to any ingredient in the Pfizer, Moderna or Johnson & Johnson vaccines should not receive that vaccine. People who have had this type of severe allergic reaction to any vaccine or treatment that is injected should talk with their health care provider about the risks and benefits of vaccination. People with allergies to foods, animals, environmental triggers (such as pollen), latex or medications taken by mouth or who have family members with past severe allergic reactions, can be vaccinated with any of the COVID-19 vaccines. You will be screened prior to receiving the vaccine to determine if you are at an increased risk for an allergic reaction. If you are, your health care provider may decide that you should not receive the vaccine. As most reactions occur within a few minutes to one hour after vaccination, you will be asked to stay at the place where you received your vaccine for a short time (15-30 minutes) for monitoring to ensure your safety. Additional information can be found here for the Pfizer, Moderna, and Johnson & Johnson vaccines.

If you had a severe or immediate allergic reaction after getting the first dose of the mRNA COVID-19 vaccine (Moderna or Pfizer), you should NOT get a second dose of either of the mRNA COVID-19 vaccines. Talk to your provider about getting a different type of vaccine after an allergic reaction. More information for people with COVID-19 vaccine allergies can be found here.

**How do I report an adverse reaction caused by the COVID-19 vaccine?**

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 a top priority.
The CDC also implemented 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 telling you how to enroll in v-safe. If you enroll, 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.

**What temporary reactions from the vaccine should be reported to a doctor?**

In most cases, temporary reactions are normal and good signs that your body is building protection. Taking over-the-counter medicine, such as ibuprofen or Tylenol, drinking lots of fluids, or placing a cool washcloth on your forehead can help with these temporary reactions.

If you have a history of allergic reactions to any vaccine or treatment that is injected, you should talk with your healthcare provider about the risks and benefits of vaccination before getting the shot. Although very rare, if you experience a severe allergic reaction to the vaccine seek immediate medical care by calling 911. Signs of a severe allergic reaction can include difficulty breathing, swelling of your face and throat, a fast heartbeat, a bad rash all over your body and dizziness and weakness.

Contact your doctor if any redness or tenderness where you got the shot increases after 24 hours, if your temporary reactions are worrying you, or if they do not seem to be going away after a few days. While it is extremely rare that you would have a serious adverse reaction, if you develop severe headache, backache, severe abdominal pain, new neurologic symptoms (like changes in vision, changed mental status or numbness), leg pain or swelling, shortness of breath, tiny red spots on your skin (called petechiae), or new or easy bruising within three weeks after vaccination, contact your health care provider or seek medical care.

**What do we know about the vaccine’s long-term safety?**

Since most of the vaccine trials began in the summer of 2020, we have months, not years, of follow-up data. Fortunately, we have decades of vaccine safety data from other vaccines, and we know that long-term side effects are quite rare. The CDC is actively collecting safety data via the Vaccine Adverse Event Reporting System, which has been tracking safety on all vaccines since 1990. Learn more about all the ways that vaccine safety is being monitored here.

**Why is the CDC recommending the Moderna and Pfizer COVID-19 vaccines as the preferred vaccine?**

There is ample supply of both vaccines in North Carolina and across the country and there continues to be robust safety monitoring which showed additional cases of thrombosis with thrombocytopenia (TTS), a rare condition with blood clotting and low platelets, associated with the Johnson & Johnson COVID-19 vaccine. There have been 54 cases of TTS after getting the J&J vaccine reported in the U.S. with nine deaths and another two deaths suspected to be linked. The CDC emphasized that receiving any vaccine, including the Johnson & Johnson vaccine, is better than being unvaccinated. People who prefer to receive the Johnson & Johnson COVID-19 vaccine will continue to have access to it, as will people who cannot receive an mRNA vaccine. However, people with a history of thrombosis with thrombocytopenia, a condition defined as blood clotting with low platelets, should not receive the Johnson & Johnson vaccine. Read more information.

**Is myocarditis, or heart inflammation, a side effect of COVID-19 vaccines?**

There have been rare reports of myocarditis occurring after COVID-19 vaccination with Moderna or Pfizer vaccines in the United States and Europe. Myocarditis is the inflammation of the heart muscle and pericarditis is the inflammation of the lining outside the heart. In both cases, the body’s immune system is causing inflammation because of an infection or some other trigger. While myocarditis can be serious, these cases are frequently mild and get better without any treatment and seen more often in adolescents and young adults after the second dose of either Pfizer or Moderna and within a week of vaccination. Symptoms can include abnormal heart rhythms, difficulty breathing, or chest pain. The risk for both myocarditis and pericarditis are much higher from becoming infected with COVID-19 than from the vaccines.
The Center for Disease Control (CDC) has been closely monitoring these reports in the systems set up to detect safety concerns with vaccines and will continue to evaluate reports of myocarditis and pericarditis that happen after COVID-19 vaccination. The CDC Advisory Committee on Immunization Practices has also reviewed the data. The CDC, American Academy of Pediatrics, and multiple medical and public health groups released a statement recommending COVID-19 vaccination, stating that this is an extremely rare side effect with mostly mild cases with individuals recovering often on their own or with minimal treatment compared to more risks with COVID-19 infection.

**What should I do if I received a vaccine in another country that is not currently authorized in the United States?**

The following are the recommendations for you. It is important to note that currently, we do not have data on the safety or effectiveness of getting more than one type of COVID-19 vaccine.

- I received a COVID-19 vaccine not authorized by FDA, but the vaccine is authorized for emergency use by World Health Organization.
  - If you received the recommended number of doses (including additional primary and booster doses if recommended) of a COVID-19 vaccine that is listed for emergency use by the World Health Organization (WHO), you are considered up-to-date with your vaccination. If you received a combination of the recommended doses of WHO-listed vaccine and a FDA authorized or approved COVID-19 vaccine, you are also considered up-to-date on your vaccination. People who are partially vaccinated with a COVID-19 vaccine that has been listed for emergency use by WHO may choose to receive an FDA-authorized COVID-19 vaccine and do not need to restart the initial series.
  - People 12 years of age or older who are moderately or severely immunocompromised should receive a third dose of Pfizer vaccine at least 28 days after receiving the 2nd vaccine dose.
  - People 12 years of age or older are eligible to receive a single booster dose of Pfizer-BioNTech COVID-19 vaccine at least 5 months after completing their primary series.

- I received a COVID-19 vaccine that is not authorized by FDA and not authorized for emergency use by World Health Organization.
  - People who have been vaccinated with a COVID-19 vaccine that is not authorized by FDA and not listed for emergency use by WHO may choose to receive an FDA-authorized COVID-19 vaccine series.

You must wait a **minimum of 28 days** between administration of the two different COVID-19 vaccines. Additional information about these recommendations can be found [here](#) and a list of vaccines and their authorizations can be found [here](#).

**What other COVID-19 vaccines are being developed and considered?**

It is difficult to say when other vaccines will be available. As of March 2021, Phase 3 clinical trials (the last phase) are in progress, being planned or completed in the United States for the following COVID-19 vaccines:

- AstraZeneca’s COVID-19 vaccine
- Novavax’s COVID-19 vaccine

You cannot get COVID-19 from any of these vaccines in development. All of the above vaccines teach your body to make germ-fighting antibodies against the COVID-19 virus. These germ-fighting antibodies are then ready to fight off the real COVID-19 if it ever tries to attack you.

**How can someone enroll in a clinical trial for a vaccine?**
Over 100 vaccines for COVID-19 are under development and many are in clinical trials that are recruiting participants. People interested in enrolling in a COVID-19 vaccine trial may visit the following website: https://www.coronaviruspreventionnetwork.org/understanding-clinical-studies/.

**AFTER YOUR VACCINATION**

**Will people be provided with documentation that they have had the vaccine?**

Yes. You should receive a vaccination card that tells you what COVID-19 vaccine you received, the date you received it and where you received it. Keep the card in a safe spot and take a picture of it just in case it gets misplaced. Some people with access to email will also receive an email with proof of vaccination. Many North Carolinians can also access their COVID-19 vaccine information in the North Carolina COVID-19 Vaccine Portal if they received the COVID-19 vaccine from a North Carolina doctor’s office, hospital, pharmacy, grocery store, health department, or community event. Please see more information on how to access the NC COVID-19 Vaccine Portal.

If you were vaccinated outside of North Carolina, or in a military setting or at a tribal or urban Indian health facility, your information will not be available in the COVID-19 Vaccine Portal. Contact your provider directly for vaccine information.

If people lose their vaccine card or have questions about accessing their vaccine records, they should contact their vaccine provider.

**How to Find Your Vaccine Record**

**Can I stop wearing a mask after I'm vaccinated?**

NCDHHS recommends that everyone wear a mask when in indoor public spaces. This is consistent with CDC guidance for people living in counties with high levels of transmission, which currently includes all counties in North Carolina. In general, you do not need to wear a mask outdoors but consider doing so in crowded outdoor settings and for activities with close contact with others who are not up to date on COVID-19 vaccination. In addition, you should get tested if you have any symptoms of COVID-19. People with COVID-19 should stay away from others (Isolate) for at least five full days and wear a mask for an additional five days. People exposed to COVID-19 should get tested at least 5 days after last contact with someone with COVID-19 and stay away from others (quarantine) for five days then wear a mask for an additional five days. However, people who are exposed to COVID-19 do not need to quarantine if they are vaccinated — including a booster for adults — against COVID-19.

Receiving the COVID-19 shot and following the 3 Ws is everyone’s best protection from getting and spreading COVID-19. For more information about what to do after being vaccinated, see NC DHHS’s guidance.

**When am I considered fully vaccinated against COVID-19?**

The CDC uses the term fully vaccinated for people who have received two doses of the Pfizer or Moderna vaccine or one dose of the Johnson & Johnson vaccine and received their final dose at least two weeks ago. This includes people who received vaccines that are authorized and approved by the FDA (i.e., Pfizer/Comirnaty, Moderna, Johnson and Johnson). This also includes people who completed COVID-19 series listed for emergency use by the World Health Organization or participated in a clinical trial in the United States and received the full series of an active COVID-19 vaccine that is listed for emergency use by WHO (e.g., AstraZeneca) or has been independently confirmed by a data and safety monitoring board (e.g., Novavax).

However, the CDC and NCDHHS recommend that everyone be up-to-date on COVID-19 vaccinations, which includes getting a booster when eligible and/or an additional dose if immunocompromised. More information here.

**How long will the vaccine protect me against COVID-19?**

NC Department of Health and Human Services
Even with the spread of variants and more recent studies, the vaccine continues to be effective against serious illness, hospitalization and death but with declines in protection against infection. Even as the Omicron variant became more common, a recent study showed that protection against hospitalization and death from COVID-19 vaccination remained high. To strengthen and extend protections against COVID-19, boosters are recommended for all North Carolinians 12 years and older. Many vaccines require multiple doses for immunity and booster doses for vaccines are common. For example, it is recommended that everyone 6 months and older get a flu shot each year and adults should get a tetanus booster every 10 years. Everyone should get their COVID-19 booster as soon as they are eligible, especially with the current surge of infections caused by the highly contagious Omicron variant. You should get a booster if you are 12 years of age and older AND:

- You received your second/final dose of the Pfizer or Moderna vaccine at least FIVE months ago, or
- You received your Johnson & Johnson vaccine at least TWO months ago.

Some people may prefer the vaccine type that they originally received, and others may prefer to get a different booster. Those who are 12 to 17 years of age can only receive a Pfizer vaccine booster.

Do I need a booster if I received an antibody test after getting the vaccine and antibodies were not detected?

CDC does not recommend antibody testing before or after getting the COVID-19 vaccine to check if a person is protected. According to the FDA, currently authorized SARS-CoV-2 antibody tests are helpful in identifying individuals with previous infection with the virus, but these tests have not been used to decide if the vaccine worked.

For more information, see the FDA’s statement on antibody testing.

Will the vaccine affect testing for possible COVID-19 infection?

Getting a COVID-19 vaccine will not affect the most common tests used to test for the COVID-19 virus, which are called PCR or antigen tests. The vaccines do not affect these test results because there is no virus in the vaccines. However, vaccines can affect the results of some COVID-19 antibody tests because of the immune response to the vaccine. More details can be found from the CDC here.

What should I do if I am worried that I have COVID-19 after I am vaccinated?

If you develop symptoms of COVID-19 after being vaccinated, you should get tested and stay away from other people. Your healthcare provider and local health department will report the test results to NC DHHS, including notification of a COVID infection after being vaccinated. Getting COVID-19 is more likely if you are not vaccinated, and vaccination provides strong protection from serious illness, hospitalization and death.

If I do not get the COVID-19 vaccine, how long will I have to wear a mask?

People who are not vaccinated should continue to wear a mask in all indoor public settings and in outdoor settings when they can’t maintain six feet of distance. Masks will still be required for everyone in childcare centers, schools and camps, as most children are not yet vaccinated or are not eligible to be vaccinated. Everyone, including people who are up-to-date on COVID-19 vaccination, should wear a mask when in indoor public spaces, in crowded outdoor settings, and for activities with close contact with others who are not up-to-date on COVID-19 vaccination. This is consistent with CDC guidance for people living in counties with high levels of transmission, which currently includes all counties in North Carolina.

NC DHHS recommends we continue to protect one another with masks to prevent spreading COVID-19.
Will I need to sign a consent form to get vaccinated?

Individuals 18 and older can provide verbal consent. Written consent is not generally required, but some providers may require or request written consent. For minor’s consent, see "Can people under the age of 18 get a COVID-19 vaccine without parental consent?"

Does the state require or mandate vaccination?

No. North Carolina has no plan to require people to be vaccinated against COVID-19. It is possible that some employers or schools will require vaccines for their employees or students. Employers may ask if you have been vaccinated but cannot require that you share any other personal medical information.

How will the state know who has been vaccinated?

North Carolina uses the COVID-19 Vaccine Management System (CVMS) and the NC Immunization Registry (NCIR). These systems help vaccine providers know who has been vaccinated and with which vaccine to make sure people get the second dose of the same vaccine at the right time or a booster dose at the right time. It also allows the state to manage vaccine supply. Many pharmacies, such as CVS, Walgreens, Walmart and other grocery pharmacies do not use CVMS to give and manage vaccines. These pharmacies use their own systems, but this information is shared with CVMS so that providers and those who receive the vaccine can make sure everyone gets the right dose at the right time.

What data is the state collecting and how will it be shared?

Information about your COVID-19 vaccination is carefully managed to protect your privacy. Your immunization information will not be shared except in accordance with state and federal law. NC CVMS is a system that enables the collection of immunization information for health and safety reasons. The immunization information collected for NC CVMS is similar to the information that is required when you go to the doctor’s office or a pharmacy for a vaccination, including your name, address, date of birth, location where vaccine was given, when the vaccine was given, person who administered the vaccine, information about the specific vaccine vial (expiration date, vaccine identifier number, etc.) and how the vaccine was given (e.g., in the muscle of the right arm). NC CVMS also collects information about race and ethnicity, which is necessary to support efforts for equitable vaccine distribution in NC. To meet federal requirements established by the U.S. Centers for Disease Control and Prevention (CDC) and in accordance with NC state law, NC does not submit any identifiable information to CDC. Instead, NC submits the following information to the CDC: the vaccine recipient’s year of birth (not date of birth), the first 3 digits of the vaccine recipient’s zip code of residence (if the underlying population in that zip code includes more than 20,000 people) and the date of submission of the vaccination record. More information about federal CDC data requirements is available at: https://www.cdc.gov/vaccines/covid-19/reporting/requirements/index.html.

What data about vaccinations will be available to the public?

North Carolina has an online public dashboard to share data on vaccinations. The data in the dashboard is updated Monday through Friday.

THE SCIENCE BEHIND THE VACCINES

How do the vaccines work?

You cannot get COVID-19 from the vaccines. All the currently authorized vaccines give your body temporary instructions to make a protein. The two-dose vaccines use mRNA technology, while the one-dose vaccine uses DNA technology to provide these instructions. This protein safely teaches your body to make germ-fighting antibodies against the COVID-19 virus. These germ-fighting antibodies are then ready to fight off the real COVID-19 virus if it ever tries to attack you. Your body naturally breaks down everything in the vaccine. There is no COVID-19 virus in the vaccine, and none of the vaccines can change your DNA.
What are the ingredients in the COVID-19 vaccines?

The COVID-19 vaccines give the cells in your body the instructions to make a protein that safely teaches your body how to make antibodies (germ-fighting cells) to fight the real COVID-19. Your body naturally destroys the instructions and gets rid of them. None of the vaccine ingredients remain in your system, nor do they alter any DNA in your body. The three COVID-19 vaccines currently available in the United States do not contain eggs, preservatives, fetal tissue, stem cells, mercury or latex. For a full list of ingredients, please see each vaccine’s Fact Sheet for Recipients and Caregivers:

- Pfizer-BioNTech COVID-19 vaccine
- Moderna COVID-19 vaccine
- Johnson & Johnson COVID-19 vaccine

Will the vaccines work against new variants of the COVID-19 virus?

All viruses change over time, and these changes (or variants) are expected. Scientists are working to learn more about new COVID-19 variants and their effects on vaccines. There continues to be good evidence that the authorized COVID-19 vaccines provide protection against the variants circulating in the United States. Not only does vaccination prevent severe illness, hospitalization, and death, but also reduces the spread of the virus and helps prevent new variants from emerging. A new variant, named Omicron, has been identified as a variant of concern, and is highly contagious and contributing to the current surge of COVID-19 cases. With other variants, like Delta, vaccines have remained effective at preventing severe illness, hospitalizations, and death. A recent study showed that protection against hospitalization and death from COVID-19 vaccination remained high even with the Omicron surge. However, breakthrough infections in people who are fully vaccinated are likely to occur. Booster doses increase how effective the vaccine is against Omicron, making it all the more important that people be up to date with all recommended doses of COVID-19 vaccine.

Early evidence suggests that Omicron is two to three times as contagious as the Delta variant, making it four to six times as contagious as the original COVID-19 virus. Data collected so far show more rapid waning of protection after the primary vaccination series than was seen with Delta or other variants, although vaccines are still effective at preventing severe disease. Protection against Omicron increases greatly after a booster dose. Vaccines and boosters are essential in protecting people from severe illness with this current Omicron surge. The elderly, people living in long-term care facilities and people with underlying medical conditions or who are immunosuppressed are at the greatest risk and should get vaccinated as soon as possible and get a COVID-19 booster as soon as they are eligible. More information can be found on the CDC website.

Why are two vaccine shots necessary for some vaccines at first?

The Pfizer and Moderna vaccines require two shots for the primary series—the Pfizer doses are given 3 weeks apart and the Moderna doses are given is 4 weeks apart. You need two doses to build up strong immunity against COVID-19. The goal of the first vaccine dose is to “prime” the immune response, which means that it gets your body ready to have the best protection. The second dose “boosts” the immune response to be fully protected. It is important to get two doses of the same vaccine.

While other countries may take a different approach to vaccinations, the FDA and CDC continue to recommend that everyone get two shots for the Moderna and Pfizer vaccines, with an additional third dose for individuals who are moderately to severely immunocompromised. Currently there are not enough data to suggest that one shot of the Moderna and Pfizer vaccines offers enough protection against COVID-19.

Many people who received any of the three available COVID-19 vaccines in the U.S. are now eligible to receive a booster shot (any brand) and will benefit from additional protection. Everyone should make sure to stay up-to-date on their COVID-19 vaccines by getting an additional dose if immunocompromised and a booster dose as booster doses increase a person’s ability to fight the new variant.

Learn more about the different COVID-19 vaccines.
Are there fetal cells or fetal tissues in the vaccine?

None of the vaccines contain fetal cells or fetal tissues. Fetal cells were used in research to develop all three vaccines. Vaccines commonly use fetal cells in development. The Pfizer and Moderna vaccines do not require the use of any fetal cells to produce the vaccines. In order to produce the vaccine, the Johnson and Johnson vaccine uses fetal cells that were isolated over 30 years ago.

Couldn’t find the answer you were looking for?

Call the COVID-19 vaccine help line at 888-675-4567 Monday through Friday from 7 a.m. until 7 p.m., and on Saturday and Sunday from 8 a.m. until 4 p.m.