

COVID-19 Vaccine FAQs

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Vaccine Distribution and Administration

- **Which vaccines are available?**

The FDA issued Emergency Use Authorizations (EUAs) for the Pfizer and Moderna vaccines in December 2020. An EUA for the Janssen/Johnson & Johnson vaccine was issued in February 2021. Vaccines have been offered to all CommonSpirit staff; and thousands of employees, patients, and community members are receiving a vaccine every day.

- **How many doses will we get?**

The COVID-19 vaccine is being distributed in phases starting with a limited number of doses, but information has not been provided about how many doses might be included in each phase. We also expect to receive additional doses every week, so our ability to vaccinate employees will increase quickly. We are closely monitoring the progress of the vaccine and developing guidelines for distribution depending on the number of doses we receive.

- **Will vaccine allocation double each week to accommodate new recipients and those who need a second dose?**

CommonSpirit Health is required to track the number of doses provided and report to the CDC. We will do everything we can to secure enough doses to accommodate new recipients and those who need a second dose.

- **Do you have to get two doses of the vaccine? How far apart should the doses be?**

The Pfizer and Moderna vaccines require two doses per recipient. The time between doses is 21 days or 28 days, depending on which vaccine you receive. At the time of vaccination, recipients will receive information about which vaccine they received and when they need to return for a second dose. The Janssen/Johnson & Johnson vaccine requires only one dose.

Vaccine Safety

- **How do we know if the COVID-19 vaccine is safe?**

The care and safety of our employees and the patients we serve is always our top priority.

As with any vaccine, CommonSpirit Health will not administer a COVID-19 vaccine unless the FDA has determined it is safe and effective. CommonSpirit clinical leaders have reviewed clinical trial data and evidence for the vaccines, and concur with the FDA authorization.

- **Is the Johnson & Johnson vaccine safe?**

The FDA continues to recommend all three vaccines as safe and effective. The CDC and FDA paused use of the Janssen/Johnson & Johnson vaccine for a short period of time to study a small number of reports about the development of rare blood clots. Following this pause, the FDA and CDC both determined blood clots forming after Janssen/Johnson & Johnson vaccination is extremely rare and the vaccine remains safe and effective. People at risk for developing blood clots should talk with their doctor before COVID-19 vaccination.

- **How long after the 2nd dose are you theoretically immune?**

Early findings suggest that some antibodies are produced within a few weeks after the first dose, but it will take longer for full immunity to be achieved. The duration of protection is unknown.

- **What are the long-term effects of COVID-19?**

Experts have found that some patients experience long-term effects of COVID-19 that impact quality of life. Long-term symptoms can include ongoing respiratory, cardiac, neurologic and cognitive issues, in patients who had both mild and severe cases of COVID-19.

- **Did the vaccine clinical trials include participants from diverse racial/ethnic backgrounds?**

Yes. Among the total participants in the Pfizer-BioNTech COVID-19 Vaccine trial, 9.1 percent were Black or African American, 28.0 percent were Hispanic/Latino, 4.3 percent were Asian, and 0.5 percent were American Indian/Alaska native. For the Moderna clinical trials, 20.5% of participants identified themselves as Hispanic or Latino, 10.2% as African American or Black, 4.6% as Asian, 0.8% as American Indian or Alaska Native, 0.2% as Native Hawaiian or other Pacific Islander, 2.1% identified their race as other, and 2.1% as multiracial. In the Johnson & Johnson trial, 45.3% of participants identify as Hispanic/Latino, 19.4% Black or African American, 9.5% American Indian or Alaska Native, 3.3% Asian, 0.2% Native Hawaiian or other Pacific Islander, and 5.6% Multiracial. *Data provided by the FDA.*

- **Should I get the vaccine if I have an autoimmune disease?**

According to the CDC, people with autoimmune conditions may receive a COVID-19 vaccine. However, they should be aware that no data are currently available on the safety of mRNA COVID-19 vaccines for them. Individuals from this group were eligible for enrollment in clinical trials.

Ethical Concerns

- **Are there any moral or ethical concerns related to the way the vaccines were developed?**

As the various COVID-19 vaccines have been introduced into the vaccine supply, there have been moral and ethical questions related to their development and testing. Specifically, concerns have been raised about their connection to stem cell lines derived from abortion.

As a Catholic healthcare organization we, too, take these concerns very seriously. Though it is the case that each of the vaccines are morally compromised to some degree because of their various connections to these cell lines, given the scope and impact of the COVID-19 illness and given that current circumstances limit individual and organizational choice regarding which vaccine is available, it has been confirmed that:

- Catholic persons can accept any of the offered vaccines in good conscience, and
- Catholic organizations and Catholic healthcare workers can participate in the distribution of any of the COVID-19 vaccines in good conscience.
- The Congregation for the Doctrine of the Faith (CDF) in the Vatican, the U.S. Conference of Catholic Bishops (USCCB), the [Catholic Health Association](#), and other respected sources have found all COVID-19 vaccines to be morally acceptable options under the present circumstances. The Pfizer and Moderna COVID-19 vaccines did not use any cell lines derived from abortions in their production process but did use them in the testing process. The Janssen/Johnson & Johnson vaccine used cell lines in both the testing and production process. The distribution of the various vaccines is determined by availability currently, with each state receiving an allotment of whichever vaccine is being sent in a particular week. The Vatican and USCCB are clear that when there are no other alternatives, it is morally acceptable to use all effective, approved COVID-19 vaccines given the importance of protecting individuals and others, and given how far removed a person receiving or distributing the various vaccines is from the act of the abortion. Since the Janssen/Johnson & Johnson vaccine used cell lines derived from abortion in their production process, Catholics should choose an alternative vaccine if one is available to them. The current reality limits this choice at the present time for both individuals and healthcare organizations alike. Consistent with other Catholic healthcare systems, we adhere to the statements from the USCCB and CDF that “all vaccinations recognized as clinically safe and effective can be used in good conscience,” under the present circumstances so that we can contribute to the common good and prevent further harm from COVID-19. In addition, we will continue to work with our local and national mission and ethics partners to assure the COVID-19 vaccines we are able to give and receive are aligned with current Catholic teaching on the matter, and to advocate for the ethical development of future vaccines.

Pfizer, Moderna and Janssen/Johnson & Johnson Vaccine FAQ

FAQs Adopted from: [COVID-19 ACIP Vaccine Recommendations](#)

- **What are the possible side effects of the Pfizer-BioNTech COVID-19 Vaccine?***
 - injection site pain
 - tiredness
 - headache
 - muscle pain
 - chills
 - joint pain
 - fever
 - injection site swelling
 - injection site redness
 - nausea
 - feeling unwell
 - swollen lymph nodes (lymphadenopathy)

It is recommended that people with allergies to components of the vaccine not vaccinate. There is a remote chance that the Pfizer-BioNTech COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Pfizer-BioNTech COVID-19 Vaccine. 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
- Dizziness and weakness

Pfizer-BioNTech COVID-19 Vaccine is still being studied in clinical trials. For more information about side effects please see the FDA fact sheet for vaccine recipients.

**Adopted from [FDA fact sheet for vaccine recipients](#)*

- **What are the possible side effects of the Moderna COVID-19 vaccine?***

Side effects that have been reported with the Moderna COVID-19 Vaccine include:

- Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
- General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

There is a remote chance that the Moderna COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Moderna COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. 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
- Dizziness and weakness

The Moderna COVID-19 Vaccine is still being studied in clinical trials. For more information about side effects please see the fact sheet for vaccine recipients

**Adopted from [FDA fact sheet for vaccine recipients](#)*

- **What are the possible side effects of the Janssen/Johnson & Johnson COVID-19 vaccine?***

Side effects that have been reported with the Janssen/Johnson & Johnson COVID-19 Vaccine include:

- Injection site reactions: pain, redness of the skin and swelling.
- General side effects: headache, feeling very tired, muscle aches, nausea, and fever.

There is a remote chance that the Janssen/Johnson & Johnson COVID-19 vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Janssen/Johnson & Johnson COVID-19 vaccine. For this reason, your vaccination provider may ask you to stay at the place where

you received your vaccine for monitoring after vaccination. 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
- Dizziness and weakness.

Blood clots involving blood vessels in the brain, abdomen, and legs along with low levels of platelets (blood cells that help your body stop bleeding), have occurred in some people who have received the Janssen COVID-19 Vaccine. In people who developed these blood clots and low levels of platelets, symptoms began approximately one to two-weeks following vaccination. Most people who developed these blood clots and low levels of platelets were females ages 18 through 49 years. The chance of having this occur is remote. You should seek medical attention right away if you have any of the following symptoms after receiving Janssen COVID-19 Vaccine:

- 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 the injection.

The Janssen/Johnson & Johnson COVID-19 vaccine is still being studied in clinical trials. For more information about side effects please see the fact sheet for vaccine recipients.

[*Adopted from FDA fact sheet for vaccine recipients.](#)

- **What should I do if I experience side effects?**

If you experience a severe allergic reaction, call 9-1-1, or go to the nearest hospital. Call the vaccination provider or your healthcare provider if you have any side effects that bother you or do not go away. Report vaccine side effects to FDA/CDC Vaccine Adverse Event Reporting System (VAERS). The VAERS toll-free number is 1-800-822-7967 or report online to <https://vaers.hhs.gov/reportevent.html>.

- **Can children get the vaccine?**

Under the Emergency Use Authorizations, the following age groups are authorized to receive vaccination:

- Pfizer-BioNTech: ages ≥ 16 years
- Moderna: ages ≥ 18 years
- Janssen/Johnson & Johnson: ages ≥ 18 years

Children and adolescents outside of these authorized age groups should not receive the COVID-19 vaccine at this time.

- **How is the vaccine administered?**

The Pfizer COVID-19 vaccine series consists of two doses administered intramuscularly three weeks (21 days) apart. The Moderna vaccine series consists of two doses administered intramuscularly four weeks (28 days) apart. The Janssen/Johnson & Johnson vaccine only requires one dose.

- **Why is it important to get both doses of the Pfizer or Moderna vaccines?**
It is important to complete the 2-dose series in order to optimize protection. Protection from the vaccine is not immediate. It will take one to two weeks following the second dose to be considered fully vaccinated.
- **What if I miss my second dose of the vaccine?**
CDC guidelines allow for up to six weeks between doses to maintain vaccine efficacy. If you go beyond six weeks between doses, you do not need to re-start the series, but you should get the second dose as soon as you can.
- **Will I need a “booster” shot after I get the first two-dose series?**
The need for and timing of booster doses for COVID-19 vaccines has not been established. Vaccine manufacturers are reviewing the duration of efficacy for the vaccine but have not yet determined whether a booster shot is necessary. No additional doses beyond the two-dose primary series are recommended at this time.
- **How do I protect myself against the new variant strains of COVID-19? Is CommonSpirit Health changing infection protocols because of the new strains?**
While we are aware of new variants of the COVID-19 virus, our strategy to address the pandemic has not changed. It remains critically important to wear a mask, wash your hands, and follow social distancing protocols, as well as get the COVID-19 vaccine when it is available to you. Experts believe that the vaccine will protect against new strains of the virus, although more studies are being conducted to determine whether a booster shot will need to be administered to improve immune response, just as we do with other viruses such as the measles. The COVID-19 virus will likely be with us for a long time and we will need to remain vigilant in protecting against its spread through public safety measures, masking, and vaccinations.
- **Does the vaccine offer any benefit if I have a history of COVID-19 infection and have a high antibody count?**
Yes, the vaccine does offer additional benefit as it is currently unknown how long natural immunity from infection lasts. As antibodies from natural infection decrease over time the Centers for Disease Control and Prevention (CDC) recommends vaccination as it has shown to be highly effective with a good safety profile. Therefore, it is recommended to get the vaccine, even if you have had COVID-19 infection. However, if you have had allergic reactions to vaccines in the past or allergic reactions to any of the ingredients, then it is NOT recommended for you to have the vaccine. If you have concerning health issues, please discuss with your primary physician.
- **Should individuals with a history of COVID-19 infection be offered the vaccine?**
Yes, a COVID-19 vaccine should be offered to individuals with prior history of COVID-19 infection that have fully recovered (no longer in quarantine, no longer contagious, but may have lingering symptoms). If you have other health issues and concerns about the vaccine, contact your primary physician.
- **I do not have any symptoms. Should I get tested for COVID-19 infection before I take the vaccine?**
No, testing to assess for acute or prior infection solely for the purposes of vaccine decision-making is not recommended.
- **If I have an active COVID-19 infection, can I get the vaccine before I fully recover?**

No, vaccination of persons with known current infection will be deferred until the person has recovered from the acute illness (if the person had symptoms) and criteria have been met for them to discontinue quarantine.

- **Can I get the COVID-19 vaccine and another vaccine (e.g. Flu, Shingles, Tdap) at the same time?**

The COVID-19 vaccine should be administered alone with a minimum interval of 14 days before or after administration of any other vaccines.

- **Should I get the vaccine if I was exposed to someone with COVID-19?**

If you were exposed to someone with COVID-19, wait to get vaccinated until your quarantine period has ended to avoid potentially exposing those around you.

- **If I received monoclonal antibodies or convalescent plasma to treat COVID-19, should I get the vaccine?**

Currently there are no data on safety or efficacy of COVID-19 vaccination in persons who received monoclonal antibodies or convalescent plasma as part of COVID-19 treatment. Patients should wait 90 days before getting the vaccine to avoid interference of the treatment with the vaccine-induced immune response.

- **Should pregnant women get the vaccine?**

While the decision to vaccinate is a personal one, it is recommended that pregnant women consider receiving the COVID-19 vaccine. According to the CDC, pregnant women are at an increased risk for severe illness from COVID-19, including illness that results in ICU admission, mechanical ventilation, and death, compared to their like age non-pregnant peers. Additionally, pregnant women with COVID-19 might be at increased risk for other adverse outcomes, such as preterm birth (delivering the baby earlier than 37 weeks). While pregnant women were not part of the clinical trials for the COVID-19 vaccines, there is no evidence to suggest that these vaccines would be unsafe for pregnant women. The vaccines do not contain a live virus so it is not possible that the vaccine would cause COVID-19 either in the mother or her child. Additionally, it is well known that the antibodies formed in a woman during pregnancy do help to develop immune responses in her unborn child prior to birth.

If pregnant women are part of a group that is recommended to receive a COVID-19 vaccine (e.g., healthcare personnel), they may choose to be vaccinated. A conversation between the patient and their clinical team may assist with decisions regarding the use of a COVID-19 vaccine. Those who are trying to become pregnant do not need to avoid pregnancy after COVID-19 vaccination.

- **Should women who are breastfeeding or plan to breastfeed be vaccinated against COVID-19?**

There are no data to suggest that breastfeeding mothers should not receive the COVID-19 vaccines. Antibodies are passed through the mother's milk and help to develop immune responses in her child. While the vaccines are still not recommended for children as they were not part of the clinical trials, there is no evidence to suggest that breastfed infants/ children would be adversely impacted by the milk of a COVID-vaccinated mother.

- **Should I be tested for pregnancy before receiving the COVID-19 vaccine?**

No, there is no recommendation for routine pregnancy testing before receipt of a COVID-19 vaccine.

- **Can I still try to become pregnant after being vaccinated against COVID-19?**
Yes, there is no evidence to suggest that the COVID-19 vaccines have any impact on fertility or the fetus of a vaccinated mother.

- **Do I need to wear multiple masks to prevent against COVID-19 infection?**
The simple answer is yes if the mask you wear (e.g. cloth, disposable, ear-loop) does not have the multiple layers of protection found in other masks such as a KN95 or N95 mask. As a result of new information from the CDC which states that a well-fitted, multiple layer mask provides over 90% protection against airborne particles compared to a loose-fitting, single layer mask which only offers 42% protection, CommonSpirit Health has revised its masking guidelines for employees, patients, and visitors.

As a result, each division will be establishing its own practices to reflect CSH's guidelines and these include changes in the masks patients and visitors will be asked to wear when entering the facility. For example, members of the public who present to a facility in a cloth mask will be asked to wear a standard ear-loop mask underneath their cloth mask and this will be provided by the facility. Additionally, for those who come to our facility in a disposable mask, they will be provided with a replacement, hospital-approved mask to wear instead.

Please contact your supervisor to better understand the masking guidance and how it relates to you and your role in the facility. [For more information on the CDC's masking recommendations, click here.](#)

Additional Information

Additional information on COVID-19 vaccine development, safety and distribution is available here:

- **FDA:** <https://www.fda.gov/vaccines-blood-biologics/vaccines/emergency-use-authorization-vaccines-explained>
- **CDC:** <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html>
- **ACOG:** <https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/12/vaccinating-pregnant-and-lactating-patients-against-covid-19>
- **ACIP Recommendations:** [Pfizer](#) | [Moderna](#) | [Janssen/Johnson & Johnson](#)

Additional information about the Emergency Use Authorization (EUA) is available here:

- **EUA:** [Pfizer](#) | [Moderna](#) | [Janssen/Johnson & Johnson](#)
- **Fact sheet for Providers:** [Pfizer](#) | [Moderna](#) | [Janssen/Johnson & Johnson](#)
- **Fact sheet for Recipients:** [Pfizer](#) | [Moderna](#) | [Janssen/Johnson & Johnson](#)