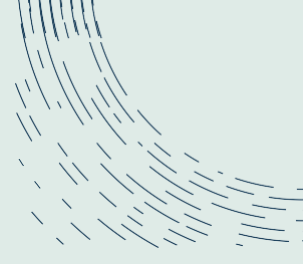


COVID-19 Vaccine

Frequently Asked Questions



General Vaccine Information

How do the COVID-19 vaccines work?

The two current vaccines, Pfizer and Moderna, use messenger RNA or mRNA, to trigger the immune system to produce protective antibodies against the coronavirus. These are the first vaccines to use mRNA. It is important to note that neither of these vaccines uses the coronavirus, itself, and neither can cause COVID-19.

How do vaccines protect our community?

If 75 to 95 percent of the population is vaccinated, vaccines will not only protect people who get the vaccine, they'll protect people who have not been vaccinated by reducing the rate of person-to-person transmission (community protection). Vaccination has led to community protection from other illnesses, including whooping cough (pertussis).

What ingredients are in the Pfizer vaccine?

The Pfizer/BioNTech vaccine contains:

- Messenger ribonucleic acid (mRNA) – the main, active ingredient that elicits an immune response and the production of antibodies
- Lipids (including ((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 2 [(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 1,2-Distearoyl-sn-glycero-3-phosphocholine, and cholesterol) – an outside coating or shell of fat that protects the mRNA from destruction as it is being stored, administered and delivered to cells
- Potassium chloride; monobasic potassium phosphate; sodium chloride (salt); dibasic sodium phosphate dehydrate – salts that are used to maintain proper levels of acidity (pH)
- Sucrose – a sugar that stabilizes the suspension

What ingredients are in the Moderna vaccine?

The Moderna COVID-19 vaccine contains:

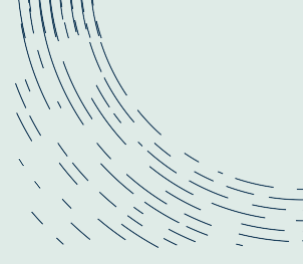
- Messenger ribonucleic acid (mRNA)- the main, active ingredient that elicits an immune response and the production of antibodies
- Lipids (SM-102, polyethylene glycol [PEG] 2000 dimyristoyl glycerol [DMG], cholesterol, and 1,2-distearoyl-sn-glycero-3-phosphocholine [DSPC])- an outside coating or shell of fat that protects the mRNA from destruction as it is being stored, administered and delivered to cells
- Tromethamine, tromethamine hydrochloride, acetic acid, sodium acetate- used to maintain proper pH
- Sucrose – a sugar that stabilizes the suspension

How are the Moderna and Pfizer/BioNTech vaccines different?

The Moderna and Pfizer vaccines use the same technology but contain slightly different mRNAs and different ingredients used to protect the mRNA, maintain the pH and stabilize the solution. They are essentially equally effective and have similar side effects.

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How much will the vaccine cost?

According to the CDC, the federal government purchased hundreds of millions of vaccine doses with taxpayer money, so the vaccine, itself, will be given to Americans at no cost. Vaccine providers will be able to charge a fee to administer the shot, but this fee should be covered by public or private insurance, or by a government relief fund for the uninsured.

How do vaccines protect our community?

If 75 to 95 percent of the population is vaccinated, vaccines will not only protect people who get the vaccine, they'll protect people who have not been vaccinated by reducing the rate of person-to-person transmission (community protection). Vaccination has led to community protection from other illnesses, including whooping cough (pertussis).

Receiving the Vaccine

When will a vaccine be available to the general public?

All individuals age 16 and older are now eligible to get the COVID-19 vaccine in Michigan. West Michigan health departments, hospitals, pharmacies, and other partners are working together to vaccinate people as quickly as possible as supplies of the vaccine arrive in our community.

How many shots am I going to need?

The Pfizer vaccine requires 2 doses, 21 days apart at a minimum. The Moderna vaccine requires 2 doses, 28 days apart at a minimum. Since it takes time for your body to build protection after any vaccination, the two COVID-19 vaccines may not protect you until 1-2 weeks after your second shot.

What is the longest amount of time you can wait for your second shot?

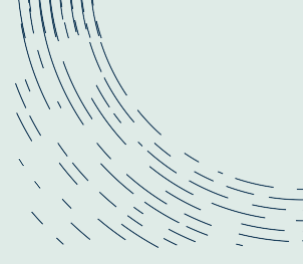
First, you should not receive the second dose earlier than recommended (21 days for Pfizer and 28 days for Moderna). The second dose should be given as close to the recommended timeframe as possible, but if that is not possible, then the second dose of Pfizer and Moderna COVID-19 vaccines may be scheduled up to 6 weeks (42 days) after the first dose. However, there is no clear data on the effectiveness if it is delayed beyond this timeframe. For more information, review the [CDC's guidance on vaccine administration](#).

If a vaccine needs two doses, can you switch to another vaccine/manufacturer for the second one?

No. Experts advise staying with the same vaccine for both. That's true even for the Moderna and Pfizer vaccines, which use the same general approach yet are different.

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Can the COVID-19 vaccine be administered with other vaccines?

No. Given the lack of data on the safety and effectiveness of the COVID-19 vaccines administered simultaneously with other vaccines, the vaccine series should be administered alone, with a minimum of 14 days before or after administration with any other vaccine. If the COVID-19 vaccines are inadvertently administered within 14 days of another vaccine, doses do not need to be repeated for either vaccine.

Should I take Tylenol or Motrin before my vaccination?

If you regularly take aspirin, acetaminophen (e.g., Tylenol) and ibuprofen (e.g., Motrin, Advil) for other medical conditions, continue to do so as directed by your physician or as needed.

Otherwise, do not take medication prior to your vaccination.

Can the COVID-19 vaccines be used in accordance with Catholic values?

Yes. On Dec. 21, 2020, the Vatican Congregation for the Doctrine of the Faith (CDF) [released a statement](#), approved by Pope Francis, that states all approved COVID-19 vaccines — including those that used tainted cells in their development — are morally acceptable for use during the pandemic due to the “grave danger” of the “uncontainable spread of a serious pathological agent.”

The Vatican confirmed that getting vaccinated and keeping the public safe is more important than the distant concerns about the use of tainted cell lines. The Catholic Health Association [supported this position](#).

It is important to know that many of the COVID-19 vaccines approved for emergency use authorization in the United States *did not* directly use tainted cell lines in development. For more information on the use of cell lines, read this [fact sheet from the Michigan Department of Health and Human Services](#).

Due to the limited supply of vaccine we receive from the State of Michigan, we are not able to offer a choice of vaccine at our clinics. We encourage you to take whichever vaccine your clinic is offering as vaccination will protect you and others from severe illness or death.

Does it matter which vaccine I receive?

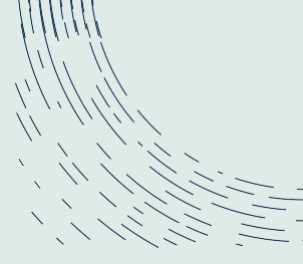
All the approved vaccines are safe and highly effective. The best vaccine is the vaccine you can get as soon as possible.

We cannot compare the vaccines to each other directly because each of the clinical trials used different measurements and data collection methods. With [V-safe](#), the CDC’s vaccination health checker program, researchers will be able to look at all the data and compare the results accurately in the coming months.

Due to supply limitations, you likely will not be able to choose which vaccine you receive, but you should feel confident accepting whichever vaccine your vaccination site is offering. Getting vaccinated is the key to ending this pandemic and getting all our lives back to normal and our local economy back on track.

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In the end, it doesn't matter which vaccine you get; it's just important that you get vaccinated.

Why was I told to wait a month after getting the vaccine before getting a mammogram?

Some people experience temporary swelling of lymph nodes under their arm after getting the Pfizer or Moderna vaccines. This is part of the immune system's expected response (lymph nodes are an important part of our immune system). Sometimes this has been mistaken for a sign of possible spread of breast cancer to the lymph nodes; therefore, delaying the mammogram can reduce the chance of being confused by this finding. If you are concerned about delaying one, contact your health care provider.

Effectiveness and Safety

Are the COVID-19 vaccines safe?

We are confident that the vaccines currently approved for use in the U.S. are highly safe and effective. Both were developed in the U.S. and have undergone U.S. Food and Drug Administration (FDA) scrutiny, the most rigorous vaccine approval process on the planet.

Like other medications, the COVID-19 vaccines can have some side effects, but all symptoms experienced by trial participants were mild or moderate and were attributable to a normal, healthy immune response. The most commonly reported side effects of the vaccine were fatigue, muscle or joint pain, and headache—all among less than 10 percent of trial participants. None were severe nor required hospitalization.

The COVID-19 vaccines DO NOT use the live virus that causes COVID-19, so you cannot get COVID-19 from the vaccine.

Are the COVID-19 vaccines effective?

Both the Pfizer and Moderna vaccines are over 94 percent effective, a calculation based on observed infection rates among unvaccinated (placebo) adult participants compared to vaccinated participants in each clinical trial. Efficacy was consistent across age (16+), gender, race and ethnicity demographics. The vaccines have not yet been widely tested in children and adolescents under 16.

Can children and pregnant women be vaccinated?

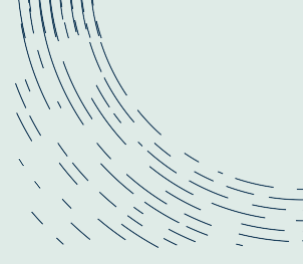
COVID-19 vaccine trials for children are just beginning. Pfizer expanded its vaccine testing to children ages 12 and older in late October; however, Moderna has not yet set a date when it will begin testing its product in children. It remains unclear when a vaccine will be approved for children under 16 but the goal is to have one ready before the 2021 school year. Pregnant women, on the other hand, were not included in any of the early clinical trials. Clinical trials continue to expand, and we will update this website as information becomes available.

Do the COVID-19 vaccines protect against the COVID-19 variants?

Early research suggests that the Pfizer and Moderna vaccines can provide protection against the

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COVID-19 variants identified in the U.K. and South Africa. Vaccine manufacturers are also looking into creating booster shots to improve protection against variants.

Can I get the vaccine if I've had COVID-19?

Getting COVID-19 might offer some natural protection or immunity from reinfection with the COVID-19 virus but it's unclear how long this protection lasts. Therefore, it's recommended you go ahead and get the vaccine when it's your turn, even if you've already had COVID-19. Current evidence suggests that people who have had COVID-19 may be protected for up to 90 days after their initial infection, so you may decide to wait until after this period, if desired.

Can I get the vaccine if I've had convalescent plasma or monoclonal antibody treatment for COVID-19?

If you have had COVID-19 and received either convalescent plasma or monoclonal antibodies, you should not receive the vaccine for 90 days as these drugs may interfere with the vaccine's effectiveness.

After Vaccination

Will I need to get a COVID-19 vaccine every year?

At this time, we do not know. Studies on the long-term effectiveness of the vaccines will continue and more information will be released as it becomes available.

Will I need to continue to wear a mask and distance after I receive 2 doses of the vaccine?

Yes. According to the CDC, while experts learn more about the protection that COVID-19 vaccines provide under real-life conditions, it will be important for everyone to continue using all the tools available to us to help stop this pandemic, like covering your mouth and nose with a mask, washing hands often, and staying at least 6 feet away from others. This will offer the best protection from getting and spreading COVID-19 until experts understand more about the protection that COVID-19 vaccines provide.

If I've been vaccinated and was exposed to someone who has COVID-19, do I need to quarantine?

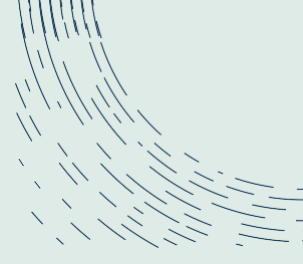
On February 10, the Centers for Disease Control and Prevention released new recommendations for individuals who have received the COVID-19 vaccine and have been exposed – or suspect they may have been exposed – to someone with the virus.

People who have been vaccinated are not required to quarantine **IF they meet ALL the following criteria:**

- They are fully vaccinated. That means:
- It has been at least 2 weeks since they received the second dose in a 2-dose vaccine series, OR
- It has been at least 2 weeks since they received one dose of a single-dose vaccine, AND
- The most recent exposure to COVID-19 was within 3 months of receiving the last dose of the vaccine
- They have remained asymptomatic after the most recent COVID-19 exposure

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People who do not meet all the above criteria should continue to follow current quarantine guidance after exposure to someone with suspected or confirmed COVID-19.

EXCEPTION: If the vaccinated individual who has been exposed to COVID-19 is an inpatient or resident in a healthcare setting, that person should quarantine following standard COVID-19 quarantine guidelines. The CDC has made this recommendation due to the unknown vaccine effectiveness in this population, the higher risk of severe disease and death, and challenges with social distancing in healthcare settings.

If I've been vaccinated and was exposed to someone who has the COVID-19 B.1.1.7 – or U.K. – variant, do I need to quarantine?

According to the CDC, a vaccinated person who has had close contact with an individual diagnosed with the B.1.1.7 variant will not need to quarantine **IF they meet ALL the following criteria:**

- They are fully vaccinated. That means:
 - It has been at least 2 weeks since they received the second dose in a 2-dose vaccine series, OR
 - It has been at least 2 weeks since they received one dose of a single-dose vaccine, AND
 - The most recent exposure to COVID-19 was within 3 months of receiving the last dose of the vaccine
- They have remained asymptomatic after the most recent COVID-19 exposure

People who do not meet all the above criteria should continue to follow current quarantine guidance after exposure to someone with the B117 COVID-19 variant.

At this time, it is still recommended that vaccinated individuals who are exposed to either the B.1.351 (South African) or P.1 (Brazilian) variant should quarantine for 14 days due to the potential that the vaccine is less effective in preventing infection from these variants.

How long does it take to be fully protected after receiving the vaccine?

Immunity builds over time, and recipients are considered to be fully protected two weeks after their final dose.