

Common questions related to the **COVID-19 VACCINE**

What if I've already had COVID-19 - will the vaccine still be effective?

Yes! The vaccines help your immune system make a strong response to the virus, and are the best way to protect you against another infection.

Is one vaccine more effective than another?

All available vaccines are very effective at preventing severe cases of COVID-19 and death.

Can I contract COVID-19 from the vaccine?

No. These vaccines don't contain the virus itself, so you can't get COVID-19 from them. Some people may get some side effects from the vaccines, but these are from the immune system doing its job to react to the vaccine and make protective antibodies.

What are the common short-term side effects from receiving the COVID-19 vaccine?

Side effects that have been reported are similar to those identified after other vaccines, including: arm soreness, muscle and joint aches, headache, fatigue, chills and low-grade fever. These mild to moderate reactions appear to be relatively common, especially after the second dose.

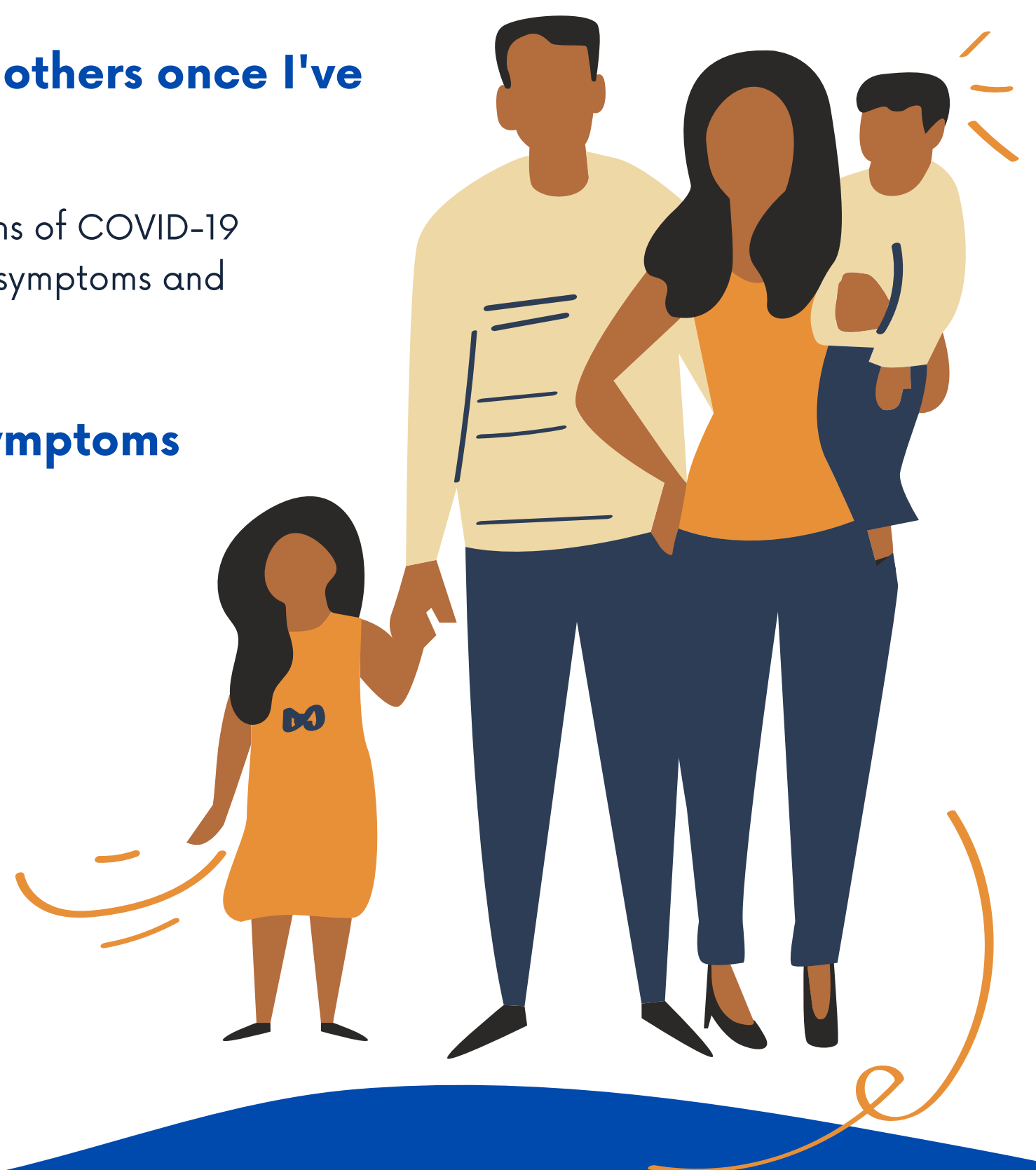
Is there still a chance I could spread COVID-19 to others once I've received the vaccine?

Since the vaccine studies only looked at whether people got symptoms of COVID-19 after getting the vaccine, we don't know yet if you can get it without symptoms and spread it to other people.

What if I am exposed to COVID-19 and develop symptoms suggestive of infection after vaccination?

You should isolate and get tested for COVID-19 as the vaccine is not 100% effective and it is unclear how long people will maintain immunity after vaccination.

SOURCE: UF HEALTH and CDC
LEARN MORE AT SCCAHS.ORG/COVID-19-VACCINE



COVID-19 vaccine and individuals who have **ALLERGIES**

Is it safe to receive the COVID-19 vaccine if I receive immunotherapy for my allergy?

While there is no evidence from the clinical trials on this specific condition, you should receive COVID-19 vaccination if you have no other issues that prevent you from getting a vaccine. If you have a history of severe allergy to prior vaccinations, discuss your particular situation with your doctor so that a plan can be made for vaccination under the safest possible conditions.

What should I consider regarding my history of allergies? What steps should I take?

People with history of immediate or severe reactions to medications or vaccines should consult with their doctor about receiving the vaccine. It is important to let the vaccination team know about this because you will be monitored for 30 minutes for a potential reaction. All vaccination teams have trained personnel and are equipped with medications and protocols to handle a severe reaction.

Are patients with history of immediate allergic reactions to vaccines or injectable therapies able to get vaccinated?

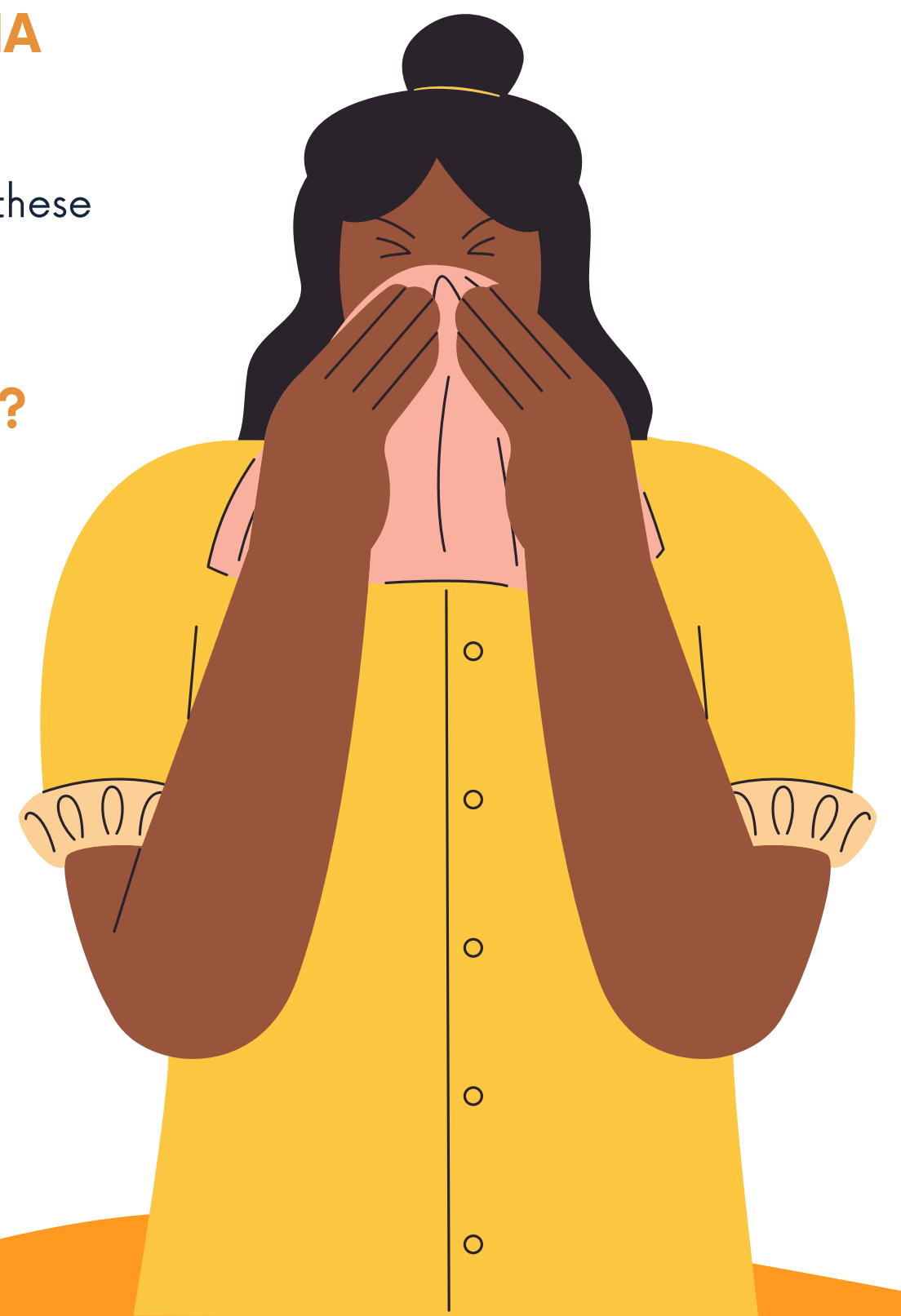
It is reasonable to discuss benefits and risks with your provider. If you do not have a contraindication for the vaccine and if vaccination is decided, you should be observed for 30 minutes.

Are patients with egg or gelatin allergy candidates for mRNA COVID-19 vaccination?

COVID-19 vaccines do NOT contain eggs or gelatin; thus, persons with allergies to these substances do not have a contraindication.

What would make the mRNA COVID-19 vaccine inadvisable?

If you develop a severe allergic reaction or immediate allergic reaction (hives, swelling, wheezing) within 4 hours after getting the first mRNA COVID-19 vaccine, you should not get the second dose of vaccine. Similarly, if you have a prior immediate allergic reaction to polyethylene glycol or polysorbate, should not receive vaccination.



SOURCE: UF HEALTH and CDC
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COVID-19 vaccine and individuals who are **PREGNANT OR NURSING**

Are the vaccines safe for women who are pregnant?

The vaccines are considered low-risk for people who are pregnant. The American College of Obstetricians and Gynecologists (ACOG) recommends pregnant women who meet criteria for vaccination based on priority groups should have access to the vaccine and not be prevented from getting it.

Are the vaccines safe for women who are nursing?

COVID-19 vaccines are considered low-risk for breastfeeding individuals or their children. Lactating women will be offered COVID-19 vaccination based on the same prioritization as others.

Do I need a letter from my doctor to get a COVID-19 vaccine while I'm pregnant?

Talking with your doctor or nurse may be helpful, but you don't need a letter or other permission to get the vaccine.

Are the vaccines safe for women who want to become pregnant?

Yes, the vaccines are safe for women who are planning to become pregnant, and it is recommended that they get the vaccine. Women do not need a pregnancy test before getting the vaccine. If you find out that you're pregnant after the first dose, it is still recommended to take the second dose.

What are some of the things for me to consider regarding the vaccine and pregnancy?

You should consider how much exposure you get to people who are or may be infected, and how many cases of COVID-19 there are in your community. Pregnant women may become more ill with COVID-19 than women of the same age who are not pregnant.

SOURCE: UF HEALTH and CDC
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COVID-19 vaccine and individuals who are **IMMUNOCOMPROMISED**

Is it safe for me to receive the COVID-19 vaccine if I have underlying health conditions?

The vaccines couldn't be studied on people with every type of health condition, but based on guidance from the Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA) and medical groups, it is thought that the benefit of receiving the vaccine outweighs the potential risk.

Is it safe to receive the COVID-19 vaccine if I have an autoimmune condition, such as Lupus or rheumatoid arthritis?

Persons with autoimmune conditions who have no other issues that prevent them getting a vaccine can get a COVID-19 vaccine. Talk to your doctor or nurse about whether you should decrease the dose of or hold your medications during the vaccine time frame.

Is it safe for me to receive the COVID-19 vaccine if I have history of Guillain-Barré syndrome?

To date, no cases of Guillain-Barré syndrome (GBS) have been reported following vaccination among participants in the COVID-19 vaccines clinical trials. Persons who have had GBS can get a COVID-19 vaccine unless they have other issues that prevent them from getting vaccines.

Is it safe for me to receive the COVID-19 vaccine if I have history of Bell's palsy?

Cases of Bell's palsy were reported following vaccination in participants in the Pfizer, Moderna, and Johnson & Johnson COVID-19 vaccines clinical trials. The FDA looked into this but considered the number of cases to be what you would expect to normally happen in the general population and has not concluded that these cases were caused by vaccination. Safety data will continue to be collected on the vaccines and will be important to further assess any possible causal association. In the absence of such evidence, persons with a history of Bell's palsy may receive an mRNA COVID-19 vaccine unless they have other issues that prevent them from getting vaccines.

Is it safe to receive the COVID-19 vaccine if I receive immunotherapy for my allergy?

While there is no evidence from the clinical trials on this specific condition, you should receive COVID-19 vaccination if you have no other issues that prevent you from getting a vaccine. If you have a history of severe allergy to prior vaccinations, discuss your particular situation with your doctor so that a plan can be made for vaccination under the safest possible conditions.



COVID-19 vaccine and individuals who are **IMMUNOCOMPROMISED**

Is it safe to receive the COVID-19 vaccine if I have an immunocompromising condition, such as HIV, a transplant, cancer or chemotherapy?

Persons with HIV infection or other immunocompromising conditions, or who take immunosuppressive medications or therapies, might be at increased risk for severe COVID-19. Data are not currently available to establish vaccine safety and efficacy in these groups. Immunocompromised individuals may receive COVID-19 vaccination if they have no contraindications to vaccination. At this time, re-vaccination is not recommended after immune competence is regained.

Persons living with HIV: Persons with stable HIV infection were included in mRNA COVID-19 vaccine clinical trials, though data remain limited. At this time, you should receive COVID-19 vaccination if you have no other issues that prevent you from getting vaccines, whether you have controlled or uncontrolled HIV disease.

Solid organ transplant recipient: The immunogenicity and efficacy of COVID-19 vaccines are unknown in transplant recipients. However, based on previous vaccination guidelines for solid organ transplant recipients, it is recommended that all transplant candidates and their household members receive the COVID-19 vaccination when it becomes available. In general, vaccines are recommended more than 2 weeks prior to transplantation, or starting at 1- 6 months after transplantation. The consensus and practice in many health centers is to hold off on vaccination during the 1-month period post-transplantation but generally advising vaccination after that period. Please discuss with your transplant team if you should hold off vaccination during any acute event such as an infection or rejection episode.

Bone Marrow transplant recipient: While your specific situation should be discussed with your physician, most experts recommend vaccination as long as the vaccine is safe for use, even if the expected protection rate is lower than the general population. In brief, COVID-19 vaccine is recommended when the transplant patient is beyond 3-6 months from transplant and off immunosuppressive medications.

Persons living with Cancer: The initial studies testing the COVID-19 vaccines did include patients with cancer. However, the trials excluded people receiving active treatment with drugs that suppress the immune system, like chemotherapy, immuno-oncology drugs, or radiation therapy. Thus, it is recommended that cancer patients receiving active treatment (e.g., radiation therapy, chemotherapy, immune therapies, maintenance therapy) discuss the COVID-19 with their oncologist. Patients on hormone therapy alone should be eligible to receive a COVID-19 vaccine.

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