



for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States

#### **COVID-19 vaccine products currently approved or authorized in the United States**

	ne products carr								
Pfizer-BioNTech									
Age indication	Vaccine	Vaccine vial cap color	Label border color	Dilution required			ary series	Booster doses	
Age indication	composition					Dose	Injection volume	Dose	Injection volume
6 months-4 years	Monovalent	Maroon	Maroon	Yes		3 µg	0.2 mL	NA	NA
5–11 years	Monovalent	Orange	Orange	Yes		10 μg	0.2 mL	10 μg	0.2 mL
12 years and older	Monovalent	Gray	Gray	No		30 μg	0.3 mL	NA	NA
12 years and older	Bivalent	Gray	Gray	No		NA	NA	30 μg	0.3 mL
Moderna									
	Vaccine	Vaccine vial	Label border	Dilution		Primary series		Booster doses	
Age indication	composition	cap color	color	required		Dose	Injection volume	Dose	Injection volume
6 months-5 years	Monovalent	Dark blue	Magenta	No		25 μg	0.25 mL	NA	NA
6-11 years	Monovalent	Dark blue	Purple	No		50 μg	0.5 mL	NA	NA
12–17 years	Monovalent	Red	Light blue	No		100 μg	0.5 mL	NA	NA
18 years and older	Monovalent	Red	Light blue	No		100 μg	0.5 mL	NA	NA
18 years and older	Bivalent	Dark blue	Gray	No		NA	NA	50 μg	0.5 mL
	Janssen COVID-19 Vaccine								
Janssen	review, scheduling and accovid-19/clinical-consider					ns for Use of COV	ID-19 Vaccines: Appendi	ix A ( <u>https://wv</u>	ww.cdc.gov/vaccines/
	Vaccine	Vaccine vial	Label border			Prin	nary series	Booster doses	
Age indication	composition	cap color	color	Dilution required	Dose	Injection volume	Dose	Injection volume	
18 years and older	Monovalent	Blue	No Color	No		5×10 <sup>10</sup> viral particles	0.5 mL	5×10 <sup>10</sup> viral particles	0.5 mL
Novavax									
Ago indication	Vaccine composition	Vaccine vial cap color	Label border color	Dilution required		Primary series		Booster doses	
Age indication						Dose	Injection volume	Dose	Injection volume
12 years and older	Monovalent	Royal blue	No Color	No		5 μg rS and g of Matrix-M™ adjuvant	0.5 mL	N/A	N/A





for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States

All currently authorized or approved COVID-19 vaccines				
COVID-19 vaccination schedule	See the Interim COVID-19 Immunization Schedule for Ages 6 Months or Older at <a href="https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf">https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf</a>			
Pre-vaccination counseling	Prior to vaccination:  Provide the vaccine-specific Fact Sheet for Recipients and Caregivers Pfizer-BioNTech (https://www.fda.gov/media/144413/download), Moderna (https://www.fda.gov/media/144637/download), Janssen (https://www.fda.gov/media/146304/download), Novavax (www.novavaxcovidvaccine.com)  Screen for contraindications and precautions. CDC's Prevaccination Screening Form and Guidance document can be found at <a href="https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html">www.cdc.gov/vaccines/covid-19/info-by-product/index.html</a> .  Inform vaccine recipients mRNA or Novavax COVID-19 vaccines are recommended over Janssen COVID-19 Vaccine.  Counsel vaccine recipients, parents, or guardians about expected reactions post-vaccination (e.g., pain and swelling at the injection site, fever, fatigue, headaches).  Inform mRNA and Novavax vaccine recipients especially males ages 12-39 years, of the rare risk of myocarditis and pericarditis following receipt of these COVID-19 vaccines and the benefit of COVID-19 vaccination in reducing the risk of severe outcomes from COVID-19.* Counseling should also include the need to seek care if symptoms of myocarditis or pericarditis occur after vaccination, particularly in the week following vaccination. For more information see: <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#myocarditis-pericarditis.">https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-a.</a>			
Interchangeability of vaccines	<ul> <li>In general, the same COVID-19 monovalent vaccine product (Pfizer-BioNTech, Moderna, Novavax) should be used for all doses in the primary series. In exceptional situations when the previous product cannot be determined/not available or if a person is unable to complete a series with the same COVID-19 vaccine due to a contraindication any age-appropriate mRNA COVID-19 vaccine may be used (administer at a minimum interval of 28 days).</li> <li>For booster vaccination, any homologous or heterologous age-appropriate mRNA vaccine can be used. Recommendations vary based on age and primary series product. (https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us. html#timing-spacing-interchangeability).<sup>†</sup></li> </ul>			
Coadministration with other vaccines	<ul> <li>COVID-19 vaccines may be administered on the same day as other vaccines.</li> <li>Persons, particularly adolescent or young adult males, might consider waiting 4 weeks after orthopoxvirus (monkeypox) vaccination (either JYNNEOS or ACAM2000) before receiving a Moderna, Novavax, or Pfizer-BioNtech COVID-19 vaccine because of the observed risk for myocarditis and/or pericarditis after JYNNEOS.</li> <li>Administer each injection in a different injection site.</li> </ul>			
Contraindications	History of:  Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine  A known diagnosed allergy to a component of the COVID-19 vaccine  For the Janssen COVID-19 Vaccine, TTS following receipt of a previous Janssen COVID-19 Vaccine (or other COVID-19 vaccines not currently authorized or approved in the United States that are based on adenovirus vectors, e.g., AstraZeneca) <sup>†</sup>			

<sup>\*</sup> See Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States at: <a href="www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#recommendations">www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#recommendations</a> for detailed guidance.

<sup>†</sup> For booster vaccination, homologous or heterologous mRNA booster is recommended.

<sup>‡</sup> Additionally, people with a history of an episode of immune-mediated syndrome characterized by thrombosis and thrombocytopenia, such as spontaneous or classic HIT, should not receive Janssen COVID-19 Vaccine. These people should receive an mRNA or Novavax COVID-19 vaccine booster dose.





for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States

All currently authorized or approved COVID-19 vaccines						
	<ul> <li>History of anaphylaxis after any other vaccine or injectable therapy (i.e., intramuscular, intravenous, or subcutaneous vaccines or therapies [excluding subcutaneous immunotherapy for allergies, i.e., "allergy shots"])</li> </ul>					
	History of multisystem inflammatory syndrome in children (MIS-C) or multisystem inflammatory syndrome in adults (MIS-A)					
Precautions	<ul> <li>History of an immediate (within 4 hours of exposure) non-severe allergic reaction after a dose of one type of COVID-19 vaccine have a precaution to the same type of COVID-19 vaccine</li> </ul>					
	■ Allergy-related contraindication to one type of COVID-19 vaccine have a precaution to the other types of COVID-19 vaccines.§					
	■ Moderate or severe acute illness, with or without fever					
	■ History of myocarditis or pericarditis after a dose of an mRNA or Novavax COVID-19 vaccine					
	■ For Janssen COVID-19 Vaccine, a history of Guillain-Barré syndrome¹					
Considerations for all FDA-authoriz	zed or -approved COVID-19 vaccines					
Persons receiving HCT and CAR-T-cell therapy	If received doses of COVID-19 vaccine prior to or during HCT or CAR-T cell therapy, should be revaccinated for any monovalent primary series and bivalent booster doses received before or during treatment at least 3 months (12 weeks) after transplant or CAR-T-cell therapy. There is no revaccination for monovalent booster doses.					
Persons who are moderately or severely immunocompromised	See the Interim COVID-19 Immunization Schedule for Ages 6 Months or Older at <a href="https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf">https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf</a>					
Persons receiving immunosuppressive therapies	■ Whenever possible, COVID-19 vaccines should be administered at least 2 weeks before initiation or resumption of immunosuppressive therapies					
	COVID-19 vaccination is recommended for everyone ages 6 months and older, regardless of a history of symptomatic or asymptomatic SARS-CoV-2 infection.					
SARS-CoV-2 infection	Defer vaccination until person has recovered from acute illness and criteria have been met for them to discontinue isolation.					
<ul><li>Current infection</li><li>History of previous infection</li></ul>	People who recently had SARS-CoV-2 infection may consider delaying their next COVID-19 dose by 3 months from symptom onset or positive test (if infection was asymptomatic).					
Exposed to an infected person	<ul> <li>Viral testing to assess for acute SARS-CoV-2 infection or serologic testing to assess for prior infection is not recommended for the purpose of vaccine decision-making.</li> </ul>					
	Additional information at: <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#infection">https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#infection</a>					
	COVID-19 vaccination is not recommended for post-exposure prophylaxis.					
	■ COVID-19 vaccines can be given; wait until clinical recovery and at least 90 days after an MIS-C or MIS-A diagnosis.					
Persons with history of multisystem inflammatory syndrome (MIS-C and MIS-A) from SARS COV-2 infaction	■ For persons who have had MIS-C or MIS-A from SARS-CoV-2 infection who have not yet received COVID-19 vaccine or who developed MIS-C or MIS-A after COVID-19 vaccination, a conversation between the vaccine recipient, guardian, and clinical team or specialist to discuss benefits and risks of receiving a COVID-19 vaccine is encouraged.					
MIS-A) from SARS-CoV-2 infection	Clinical recovery, including return to normal cardiac function, is an important factor when considering COVID-19 vaccination. Additional information at: <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#covid19-vaccination-misc-misa">https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#covid19-vaccination-misc-misa</a>					

<sup>§</sup> People with a known allergy to polysorbate have a contraindication to both Novavax ad Janssen COVID-19 vaccines.

<sup>¶</sup> People who develop GBS within 6 weeks after receipt of Janssen COVID-19 Vaccine should not receive another dose of Janssen COVID-19 Vaccine. These people should receive a booster dose of an mRNA COVID-19 vaccine for subsequent doses.



Considerations for all FDA-authorized or -approved COVID-19 vaccines



for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States

Persons who received passive antibody therapy (convalescent plasma/ monoclonal antibodies)	<ul> <li>COVID-19 vaccination can be given at any interval following receipt of passive antibody therapy.</li> <li>Persons should wait 2 weeks after COVID-19 vaccination before receiving tixagevimab/cilgavimab (EVUSHELD) for pre-exposure prophylaxis.</li> </ul>					
Persons who are pregnant, breastfeeding, trying to get pregnant, or might become pregnant in the future	Are recommended to be vaccinated according to the recommended schedule.					
Considerations for mRNA vaccines	and Novavax					
Persons with a history of myocarditis or pericarditis	<ul> <li>Development of myocarditis or pericarditis after a dose of an mRNA or Novavax COVID-19 vaccine is a precaution to a subsequent dose of any COVID-19 vaccine.</li> <li>If after a risk assessment the decision is made to receive a subsequent COVID-19 vaccine dose, the person should wait until after their episode has resolved.</li> <li>For information on potential use of Janssen COVID-19 Vaccine in this situation, see Appendix A at <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix">www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-consideration may receive any age-appropriate COVID-19 vaccine after the episode of myocarditis or pericarditis has resolved.</a></li> <li>For more information see: <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#myocarditis-pericarditis">www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#myocarditis-pericarditis</a></li> </ul>					
Considerations for Janssen COVID-	19 Vaccine					
	or adults ages 18 years and older in certain limited situations due to safety considerations. For more information, see <a href="https://www.cdc.gov/vaccines/considerations-us-appendix.html#appendix-a">https://www.cdc.gov/vaccines/considerations-us-appendix.html#appendix-a</a>					
Persons with a history of Guillain- Barré syndrome (GBS)	<ul> <li>A history of GBS is a precaution for receipt of Janssen COVID-19 Vaccine. An mRNA or Novavax vaccine is recommended</li> <li>Persons who develop GBS within 6 weeks of Janssen COVID-19 vaccination should only receive an mRNA COVID-19 vaccine for subsequent doses. These people should receive a booster dose of an mRNA COVID-19 vaccine for subsequent doses.</li> </ul>					
Persons with a history of thrombosis with thrombocytopenia syndrome (TTS)	<ul> <li>It is contraindicated to administer Janssen COVID-19 Vaccine to persons with a history of TTS following receipt of the Janssen COVID-19 Vaccine or any other adenovirus vector-based COVID-19 vaccines (e.g., AstraZeneca's COVID-19 Vaccine).</li> <li>These persons should receive a dose of an mRNA COVID-19 vaccine as a booster dose at least 2 months (8 weeks) following their dose of the Janssen COVID-19 Vaccine and after their clinical condition has stabilized.</li> </ul>					
Persons with a history of heparin- induced thrombocytopenia (HIT)	<ul> <li>Persons with a history of an episode of an immune-mediated syndrome characterized by TTS, such as a spontaneous or classic HIT, should not receive Janssen COVID-19 Vaccine.</li> <li>These persons should receive an mRNA or Novavax COVID-19 vaccine.</li> </ul>					





for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States

General COVID-19 Vaccination Information			
Persons vaccinated outside the United States	■ The recommendations for people vaccinated outside the United States depend on the number and type of vaccine(s) received for the primary series and booster doses, whether the primary series was completed, and whether a booster dose was received. Current guidance can be found at: <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-b">https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-b</a>		
Post-vaccination observation periods	<ul> <li>15 minutes: Vaccination providers, particularly when vaccinating adolescents, should consider observing vaccine recipients for 15 minutes after vaccination because of the risk of syncope.</li> <li>30 minutes: Vaccination providers should consider observing persons with the following medical histories for 30 minutes after vaccination to monitor for allergic reactions:         <ul> <li>An allergy-related contraindication to a different type of COVID-19 vaccine</li> <li>Non-severe, immediate (onset within 4 hours) allergic reaction after a previous dose of COVID-19 vaccine</li> <li>Anaphylaxis after non-COVID-19 vaccines or injectable therapies</li> </ul> </li> </ul>		
SARS-CoV-2 antibody testing	<ul> <li>Antibody testing is not recommended for vaccine decision-making or to assess immunity following vaccination.</li> </ul>		
Reporting requirements	Adverse events that occur following COVID-19 vaccination should be reported to VAERS ( <a href="https://vaers.hhs.gov/">https://vaers.hhs.gov/</a> ). COVID-19 providers are required to report:  Vaccine administration errors  Serious adverse events  Cases of Multisystem Inflammatory Syndrome  Cases of COVID-19 that result in hospitalization or death		