

# COVID-19 VACCINE: FREQUENTLY ASKED QUESTIONS



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## GENERAL VACCINE INFORMATION

### 1. Is it safe for my child to get the COVID-19 vaccine?

Yes, studies show that COVID-19 vaccines are [safe](#) and [effective](#). Like adults, children may have some [side effects](#) after COVID-19 vaccination, but they go away in just a couple of days. Children 12 years and older are eligible to get vaccinated against COVID-19. COVID-19 vaccines have been used under the most intensive safety monitoring in U.S. history, including studies in children 12 years and older. Your child cannot get COVID-19 from any COVID-19 vaccine.

### 2. Why should my child get vaccinated against COVID-19?

COVID-19 vaccination can help protect your child from getting COVID-19. Children can be infected with the virus that causes COVID-19, can get sick from COVID-19, and can spread the virus that causes COVID-19 to others. Getting your child vaccinated helps to protect your child and your family. Vaccination is [recommended for everyone 12 years and older](#). Currently, the [Pfizer-BioNTech COVID-19 Vaccine](#) is the vaccine that is available to children 12 years and older.

### 3. Will COVID-19 vaccines be available for children younger than 12 years of age soon?

COVID-19 vaccine trials are in progress for children under 12. Some of the first data be available for review (probably for 6- through 11-year-olds). If authorized for use, vaccinations in this age range could begin by late fall.

### 4. Does my child have to wear a mask and practice social distancing after he/she is vaccinated?

[If your child is fully vaccinated](#), he/she can participate in many of the activities he/she did before the pandemic. To maximize protection from the Delta variant and prevent possibly spreading it to others, everyone (including your child) should wear a mask indoors in public if you are in an [area of substantial or high transmission](#). All of Alabama is in this category. Your child should continue to wear a mask where required by laws, rules, regulations or local guidance.

### 5. Does the COVID-19 vaccine cost anything?

COVID-19 vaccines are available for everyone at no cost.

### 6. Can my child get vaccinated at Children's of Alabama?

Children's of Alabama (hospital) is not a public vaccination site, but eligible individuals may receive the vaccine at any community site. We are currently offering COVID-19 vaccines to patients in select outpatient clinics and primary care practices.

For additional information or to find a site, visit [www.alabamapublichealth.gov/covid19vaccine/index.html](http://www.alabamapublichealth.gov/covid19vaccine/index.html). To learn more on the Children's of Alabama pediatric practices offering the vaccine exclusively to their eligible patients, visit [www.childrensal.org/practices](http://www.childrensal.org/practices).

### 7. Can my child still be a carrier of the virus (asymptomatic) after the vaccine?

Yes, it is possible. However, experts believe that getting a COVID-19 vaccine could help keep your child from getting seriously ill even if he/she does get COVID-19, and from even having mild infection. It also may protect people around them — particularly people who are at increased risk for severe illness from COVID-19.

Experts continue to conduct more studies about the effect of COVID-19 vaccination on the severity of illness from COVID-19, as well as its ability to keep people from spreading the virus that causes COVID-19.

### 8. Will my child be protected from the Delta variant with the vaccine?

Current variants circulating in the U.S. are being monitored for their ability to spread, cause more severe disease, and evade vaccines and treatments. To date, most of the changes have allowed for easier spread or had minor effects on vaccines or treatments. Multiple studies have concluded that vaccinated individuals (Pfizer) are nearly 90% protected from the Delta variant.

So far, none of the variants have changed enough that they require new vaccines; however, scientists are working on vaccines that would be able to protect against the most concerning variants in case additional doses become necessary.

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## 9. Should my child get the flu vaccine or other scheduled childhood vaccines and the COVID-19 vaccine at the same time?

COVID-19 vaccines may be given at the same time as any other vaccine.

## 10. My child was just given his/her first dose of the vaccine. How long until he/she can receive the second dose?

For the Pfizer vaccine, it is recommended that the second dose be scheduled for 3 weeks (21 days) after the first dose.

According to the FDA, the Pfizer COVID-19 vaccine starts working within about one to two weeks of the first dose. The second dose of the COVID-19 vaccine triggers the immune system to produce long-lasting memory cells that stick around to protect against the virus in the future. Even if the first dose offers some protection in the short term, the second dose is critical.

## 11. Does my child need the vaccine if he/she already had COVID-19?

Yes, because immunity following a COVID-19 infection isn't as strong as immunity following vaccination. If your child has already had COVID-19, the vaccine can be given any time following recovery from that illness.

## 12. If my child has an underlying condition, can he/she get the COVID-19 vaccine?

Yes, people with underlying medical conditions can receive a COVID-19 vaccine as long as they have not had an [immediate or severe allergic reaction](#) to a COVID-19 vaccine or to any of the ingredients in the vaccine. Vaccination is an important [considerations for people with underlying medical conditions](#) because they are at increased risk for severe illness from COVID-19. If your child has an underlying medical condition, consider discussing vaccination options with his/her pediatrician before getting your child vaccinated.

## 13. What percent of the population needs to get the vaccine for it to be effective and give us "herd immunity"?

Herd immunity is achieved when large percentages of a population become immune to a disease and therefore indirectly protect those who do not have immunity. Herd immunity is not achievable without enough people being vaccinated.

Experts estimate that herd immunity would require around 80-90% of the population to have COVID-19 immunity, either through prior infection or vaccination. That is why experts are encouraging the public to get the [COVID-19 vaccine](#).

## 14. Can my child receive the vaccine if he/she has had monoclonal antibodies?

There is no data currently available on the safety and efficacy of COVID-19 vaccines in people who received convalescent plasma as part of COVID-19 treatment. Based on the estimated half-life of such therapies and [evidence](#) suggesting that reinfection is uncommon within the 90 days after their administration, in people who have received monoclonal antibodies vaccination should be delayed for at least 90 days. This is a precautionary measure until additional information becomes available to avoid potential interference of the antibody therapy with vaccine-induced immune responses.

## 15. How long will immunity last after my child gets vaccinated? Will he/she need to be vaccinated every year?

As of now, it appears that the two-dose vaccines provide protection for at least 8 months. Experts are working to learn more about both natural immunity and vaccine-induced immunity.

## VACCINE SAFETY

### 1. How was the vaccine approved by the FDA?

On Dec. 11, 2020 the FDA authorized the vaccine under an Emergency Use Authorization (EUA) for persons 16 years of age and older. The EUA process has been deliberative, and the authorization wasn't rushed to meet any artificial deadlines. On May 10, 2021, the FDA expanded the EUA for the Pfizer-BioNTech COVID-19 vaccine to include adolescents 12 through 15 years of age.

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## 2. Was the clinical trial data on the vaccine released to the public?

Yes, data on the Pfizer-BioNTech vaccine has been released to the public [here](#).

## 3. What are the ingredients in the COVID-19 vaccines?

COVID-19 vaccine ingredients can vary by manufacturer. To learn more about the ingredients in authorized COVID-19 vaccines, visit:

[Information about the Pfizer-BioNTech COVID-19 Vaccine](#)

[Information about the Moderna COVID-19 Vaccine](#)

[Information about the Johnson & Johnson's Janssen COVID-19 Vaccine](#)

[Ingredients Included in COVID-19 Vaccines](#)

## 4. Can a COVID-19 vaccine make my child sick with COVID-19?

No. None of the authorized and recommended COVID-19 vaccines cause a positive viral test, which are used to see if someone has a current infection.

If your child's body develops an immune response to vaccination, which is the goal, he/she may test positive on antibody tests. Antibody tests indicate a previous infection or immunization.

## 5. What side effects will my child experience from the COVID-19 vaccine?

Side effects in children 12 to 15 years of age are similar to what has been found in other age groups, including pain at the injection site, fatigue, headache, fever, chills, muscle pain or joint pain. Likewise, other than injection site pain, side effects are more common after the second dose compared with the first dose. Most side effects are mild or moderate.

No one in the study experienced an allergic reaction following vaccination, but this age group is not less likely to experience such a reaction; therefore, teenagers should remain at the site where the vaccine was given for 15 to 30 minutes based on their risk and history with severe allergic reactions using the same guidance offered for adults.

Recently, a small number of cases of myocarditis, or heart inflammation, have been identified in teens and young adults, particularly in the 4 days after receipt of the second dose of the vaccine. Chest pain, shortness of breath or related symptoms should be reported to a healthcare provider so that teens can be appropriately diagnosed and treated; vaccine-related myocarditis is mild and usually treated only with Advil. Your child is twice as likely to be struck by lightning in their lifetime than to have myocarditis following COVID-19 vaccination.

## 6. Will there be ongoing monitoring to ensure the vaccine is safe in the long term?

Yes. After a vaccine is authorized or approved for use, many vaccine safety monitoring systems watch for adverse events (possible side effects). This continued monitoring can pick up on adverse events that may not have been seen in clinical trials. If an unexpected adverse event is seen, experts quickly study it further to assess whether it is a true safety concern. Experts then decide whether changes are needed in U.S. vaccine recommendations. This monitoring is critical to help ensure that the benefits continue to outweigh the risks for people who receive vaccines. The CDC is using safety surveillance systems such as V-SAFE and VAERS to monitor vaccine safety.

## 7. If my child has allergic reactions to a food or medication, can they get the vaccine?

People with severe allergies to a COVID-19 vaccine ingredient ([see list here](#)) or a previous dose of the COVID-19 vaccine should not get that type of COVID-19 vaccine (mRNA or viral vector). They may be able to get the alternative type after consultation with an allergist or immunologist. Individuals with a known allergy to polysorbate should not get the COVID-19 vaccine made by Johnson & Johnson/Janssen.

People with immediate allergic reactions to an injectable medication can most often get the COVID-19 vaccine; however, they should remain at the site where they were vaccinated for 30 minutes of observation, instead of the 15 minutes that the general public is recommended to wait. Anyone with this type of allergy who has questions or concerns should discuss the situation with their healthcare provider to assess the potential risks and benefits of receiving the COVID-19 vaccine.

People who have had an anaphylactic reaction to anything else (medications, foods, bees, etc.) are allowed to get the COVID-19 vaccine but should remain at the site where the injection was given for 30 minutes, instead of the 15 minutes that the general population are recommended to wait.

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If a person with history of allergies continues to have concerns about whether or not it is safe to get the COVID-19 vaccine, they should contact their primary care provider or allergist, who has the benefit of their complete medical history and will be in the best position to discuss any potential risks and benefits for that individual.

## **8. Can the COVID-19 vaccine affect puberty or fertility in my child?**

The rumors related to COVID-19 vaccines affecting puberty or fertility are completely false. The mRNA vaccines are processed near the injection site and activated immune system cells travel through the lymph system to nearby lymph nodes. In this manner, they are not affecting hormone levels, nor are they traveling throughout the body to other parts of the body. As such, there would not be a biological reason to expect that maturation or reproductive functionality of either males or females would be negatively affected by COVID-19 vaccination now or in years to follow.

## **9. What are the expected long-term side effects of the vaccination for COVID-19?**

Most negative effects occur within 6 weeks of receiving a vaccine, which is why the FDA asked the companies to provide 8 weeks of safety data after the last dose.

- mRNA vaccines: The mRNA in the vaccine breaks down quickly because our cells need a way to stop mRNA from making too many proteins or too much protein. But, even if for some reason our cells did not break down the vaccine mRNA, the mRNA stops making the protein within about a week, regardless of the body's immune response to the protein.
- Viral vector vaccines: Although the DNA from viral vector vaccines does not break down as quickly as mRNA, it cannot alter our DNA because a gene for the enzyme, integrase, is not present.