COVID-19 **FAQS**

The Ad Council and COVID Collaborative are leading a massive communications effort to educate the American public and build confidence around the COVID-19 vaccines.

Guided by the leading minds in science and medicine and fueled by the best talent in the private sector, the COVID-19 Vaccine Education Initiative is designed to reach different audiences, including communities of color who have been disproportionately affected by COVID-19.

Here are some of the most frequently asked questions to keep your partners and stakeholders well informed. These questions have been vetted by the Centers for Disease Control and Prevention (CDC) and the U.S. Department of Health and Human Services (HHS). For the most up-to-date information, please visit CDC's FAQs or the HHS website. We will also update this document regularly.

FAQS

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1. HOW ARE THEY AUTHORIZED AND APPROVED FOR USE? WHAT'S THE DIFFERENCE BETWEEN FULL FDA APPROVAL AND EMERGENCY USE AUTHORIZATION?

Researchers began developing vaccines for COVID-19 in January 2020, based on decades of understanding immune response and how vaccines work. Thousands of volunteers participated in clinical trials that started that spring, making sure we can trust the vaccines to be safe and effective.

Based on the results, the U.S. Food and Drug Administration (FDA) has authorized multiple vaccines for public use. Recommended vaccines have met the agency's rigorous and science-based standards for quality, safety, and effectiveness.

COVID-19 is a new virus requiring new vaccines, but vaccines have been saving lives and protecting us for centuries. Now, medical experts believe COVID-19 vaccines can help us move forward in our everyday lives.

Full FDA approval takes longer than Emergency Use Authorization (EUA). More data needs to be processed and reviewed over a longer period of time. When the FDA fully approves a product, patients can be sure the approval is based on large amounts of scientific data.

In some emergencies, the FDA issues an EUA to give access to critical medical products because no approved products are available. This has been the case with the COVID-19 public health emergency, which is why vaccines were first available under an EUA.

As of August 2021, FDA has fully approved a COVID-19 vaccine.

2. HOW ARE VACCINES TESTED FOR SAFETY?

Every vaccine must go through rigorous testing and inspection to ensure it is safe.

Vaccines for COVID-19 followed a 3-phase process where there are several stages before FDA authorization:

Phase 1: The vaccine is tested in a small number of generally healthy adults, usually between 20 and 80 people. It's evaluated for safety, dosage, and any side effects. Experts also look at what type of immune response is created.

Phase 2: If there are no safety concerns from Phase I studies, the vaccine is given in various dosages to hundreds of adults who may have a variety of health issues and come from different backgrounds to make sure it is safe. These studies provide additional safety information on common short-term side effects and risks, examine the relationship between the dose given and the immune response, and may provide initial information regarding the effectiveness of the vaccine.

Phase 3: Experts broaden the study to include thousands of adults, from a variety of ages and backgrounds. They see how many people who got the vaccine were protected from the disease, compared to those who received a placebo.

After a vaccine is authorized by the FDA and made available to the public, experts continue to keep track of data to help us learn more about questions like whether vaccinated people can still get infected without having symptoms.

3. HOW DO VACCINES GET AUTHORIZED?

Vaccines are approved or authorized by the U.S. Food and Drug Administration (FDA), which sets strict standards for clinical trials and rigorously evaluates scientific data submitted by vaccine developers. Once vaccines are made available to the public, the FDA continues to monitor vaccines very closely for safety.

Researchers began developing vaccines for COVID-19 more than a year ago in January 2020, based on decades of understanding immune response and how vaccines work. Thousands of volunteers participated in clinical trials that started that spring, making sure we can trust the vaccines to be safe and effective.

Based on the results, the FDA has authorized multiple vaccines for public use. In December 2020, the FDA authorized two versions of COVID-19

vaccines (Moderna and Pfizer-BioNTech) for the American public. A third (Johnson & Johnson) was added in February 2021 and is currently available for use in the United States after a pause in April 2021. Doctors and medical experts with many years of experience regulating vaccines evaluated information about the safety, effectiveness, and manufacturing quality of the vaccines prior to making their decision.

After a vaccine is authorized by the FDA and made available to the public, experts continue to closely monitor the vaccines for ongoing safety and to help us learn more about questions like how long vaccines will provide protection.

4. DID THE CLINICAL TRIALS INCLUDE PEOPLE LIKE ME?

Researchers made sure that the trials included adults of diverse backgrounds, races, ethnicities, and geographic areas. They collaborated with faith leaders, community organizations, and health clinics to reach volunteers from many different walks of life across the United States.

Medical experts and doctors want to make sure the vaccines work safely and effectively for as many people as possible. People may respond differently to vaccines based on factors like age, gender, and health conditions — so it is important to have a diverse group of participants in clinical trials.

COVID-19 has hit hard in the Black and Hispanic communities. Historically, these populations haven't always been included in clinical research, but with COVID-19 vaccines researchers made sure volunteers included people of color, as well as people over the age of 65 who are at higher risk of complications from the virus.

5. HOW WERE THESE VACCINES MADE SO QUICKLY?

The science behind the breakthrough had a head start. Researchers had already made progress developing vaccines for other types of coronaviruses: they applied lessons learned after the 2003 SARS epidemic and the 2012 MERS outbreak. They also learned a lot from creating a vaccine for Ebola — which isn't a coronavirus but has taught us more about viruses.

The rapid spread of COVID-19 made developing these vaccines an international priority, unlocking billions of dollars in funding to ensure safety while moving with urgency to save lives.

Many researchers and medical experts have come together to develop the vaccine while still meeting the FDA's rigorous requirements for safety and effectiveness. While regulators have streamlined some steps in the vaccine authorization process, the vaccines still needed to meet the agency's rigorous, scientific standards for safety, effectiveness, and manufacturing quality.

6. HOW DO THESE VACCINES PROTECT ME?

When we get a vaccine, it activates our immune response. This helps our bodies learn to fight off the virus without the danger of an actual infection. If we are exposed to the virus in the future, our immune system "remembers" how to fight it. All authorized COVID-19 vaccines provide significant protection against serious illness and hospitalization due to COVID-19.

The Moderna and Pfizer vaccines use messenger RNA, or mRNA. mRNA vaccines do not contain a live virus — they give our bodies "instructions" for how to make and fight the harmless spike-shaped proteins that will protect against a COVID-19 infection. While these vaccines use new technology, researchers have been studying them for decades.

The Johnson & Johnson/Janssen vaccine is a viral vector vaccine and also does not contain a live virus. It uses a harmless adenovirus to create a spike protein that the immune system responds to, creating antibodies to protect against COVID-19.

It takes time for your body to build immunity after vaccination, so you won't have full protection until 2 weeks after your final dose.

7. WHY SHOULD I GET VACCINATED?

Getting immunized against COVID-19 will keep most people from getting sick. Even in a rare case where one does catch the virus, the vaccine will likely prevent you from becoming seriously ill.

Protecting yourself also protects the people around you, like those at increased risk of severe illness from COVID-19 or those who can't get vaccinated — like infants, or people with weakened immune systems from things like chemotherapy for cancer.

We are still learning how the vaccine affects whether people can still transmit COVID-19 to others. It may be possible that a vaccinated person can still carry the virus and infect others, even if that person does not appear to be sick.

8. HOW LONG DOES A COVID-19 VACCINE LAST?

Immunization against COVID-19 will help protect you for the near future, but it's still not clear how long the protection will last. We will have a clearer picture of how long immunity lasts in years to come when we have collected more data. Both natural immunity and immunity from the vaccine are important ways to fight COVID-19 that experts are trying to learn more about, and places like the CDC will keep the public informed as new evidence becomes available.

9. WHAT IF I HAVE AN UNDERLYING HEALTH CONDITION?

People with underlying medical conditions can receive the FDA-authorized COVID-19 vaccines. In fact, vaccination is especially important for adults of any age with certain underlying medical conditions, like diabetes and high blood pressure, because they are at increased risk for severe illness from COVID-19. Ask your doctor if you have specific questions.

10. WHY IS THERE MORE THAN ONE TYPE OF VACCINE?

Many teams of medical experts around the world have helped in the search for a safe and effective COVID-19 vaccine — including many of the leading doctors here in the United States.

Having multiple vaccines in development and production is crucial so that vaccination programs can be rolled out in many different countries at the same time, reaching as many people as possible.

Hundreds of millions of vaccine doses have already been distributed and hundreds of millions more are in production. New vaccine candidates are also in development which may provide more options, as well as additional quantities for the American people.

11. WHAT TYPES OF VACCINES ARE THERE?

Many vaccines work with harmless pieces of the spike-shaped proteins on the outer shell of the virus,instead of the entire virus. These proteins aren't infectious — our immune system recognizes that the virus' proteins in the vaccine don't belong in our bodies and learns how to fight them off.

Both Messenger RNA (mRNA) and viral vector vaccines teach our bodies how to protect us from the viruses that contain them. They produce antibodies, which are part of our body's immune system defenses, that fight off the virus if it enters our bodies. It's important to note that none of these vaccines affect our DNA in any way.

12. HOW WELL DO THEY WORK?

So far, the data on the vaccines show that they are extremely effective at preventing severe illness from COVID-19. Clinical trials have been carried out on several COVID-19 vaccines to assess how effective they are. Other clinical trials are ongoing. The FDA has authorized some vaccines for use by the general public, after data from their trials showed them to be highly effective.

The vaccines will continue to be monitored closely in real-world conditions once they've been given to people, to ensure continued safety and to keep learning about things like whether you can still transmit the virus even if the vaccine protects you from being infected.

13. ARE MRNA VACCINES SAFE?

Yes. mRNA vaccines have been in development for years and have been proven to be safe and effective. They build immune protection by copying the shape of the virus without actually including a piece of the virus itself.

mRNA stands for messenger ribonucleic acid and can most easily be described as instructions for how to make a protein, or even just a piece of a protein.

mRNA is not able to alter our genetic makeup (DNA). The mRNA from a COVID-19 vaccine does not affect or interact with our DNA in any way. Instead, COVID-19 vaccines that use mRNA work with the body's natural defenses to safely develop immunity to disease.

14. WHAT ARE THE DIFFERENCES IN THE VACCINES?

All authorized COVID-19 vaccines provide significant protection from serious illness and hospitalization. Getting vaccinated against COVID-19 and following CDC's recommendations to protect yourself and others will offer the best protection from COVID-19.

The Moderna vaccine is recommended for people age 18+ and includes 2 shots spaced 28 days apart. It is a messenger RNA, or mRNA, vaccine. Based on evidence from clinical trials, the Moderna vaccine was 94% effective at preventing COVID-19 and provides significant protection against serious illness.

The Pfizer-BioNTech vaccine is recommended for people age 16+ and include 2 shots spaced 21 days apart. It is an mRNA vaccine. Based on evidence from clinical trials, the Pfizer vaccine was 91% effective at preventing COVID-19 and provides significant protection against serious illness.

As of August 2021, the FDA has fully approved the Pfizer vaccine (Comirnaty) for use in the United States.

Johnson & Johnson's Janssen vaccine is a viral vector vaccine and is delivered in one shot only. Based on evidence from clinical trials, the Johnson & Johnson vaccine was 72% effective at preventing COVID-19 and provides significant protection against serious illness. Health officials are closely monitoring all vaccines for safety, including the Johnson & Johnson vaccine.

Having multiple vaccines is crucial so that vaccination programs can quickly reach as many people as possible.

15. HOW DO I GET VACCINATED?

State and local governments will ultimately decide when each group gets access to vaccines based on the local supply. That way, communities can set the priorities that work for them. The federal government does not mandate vaccines or set the rules for each community.

As more vaccines are produced over the first half of 2021, more people will be able to get vaccinated based on recommendations from the Advisory Committee on Immunization Practices (ACIP) and the CDC.

If you have questions, make sure you talk to your doctor. Some people — like pregnant women or people with certain severe allergies — might be told to wait to get a specific vaccine once it's available.

Your doctor should be able to tell you when and where you can get your shots. It might be at a hospital, the doctor's office, a pharmacy, or a drive-thru clinic.

16. WHAT TYPE OF VACCINE WILL I GET?

While supplies are limited, if you are in one of the groups recommended to take the vaccine, you will need to get whichever vaccine is available in your area. It's possible that in the coming months, as production increases and more vaccines get approved for use, that people will have options for which shot to get.

The bottom line is that every vaccine that gets through the authorization process has been thoroughly tested and proven to be effective and safe. You should feel confident that your experience will be similar regardless of which shot you get.

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You'll get a card or fact sheet at your vaccination site that will tell you about the vaccine and help you understand the details. Your card will tell you which kind of vaccine you get and when to get the second dose, if applicable.

17. HOW MUCH DOES IT COST?

There shouldn't be a cost to get vaccinated. Insurance providers will cover the cost of the vaccine, and the U.S. government has set up a system to cover costs for those who do not have insurance.

Vaccine doses bought by the U.S. government will be given to the public for free, however, vaccination providers will be able to charge an administration fee for giving the shot to someone. Vaccine providers can get this fee reimbursed by the patient's public or private insurance company or, for uninsured patients, by the Health Resources and Services Administration's Provider Relief Fund.

18. DO I NEED 1 SHOT OR 2 SHOTS?

All COVID-19 vaccines currently available in the United States have been shown to be highly effective at preventing COVID-19. It takes time for your
body to build immunity after vaccination, so you won't have full protection until 2 weeks after your final dose.

If you receive a Pfizer or Moderna COVID-19 vaccine, you will need 2 shots to get the most protection. The second shot of the Moderna vaccine should be given 28 days after your first shot, and the second shot of the Pfizer vaccine should be given 21 days after your first shot. COVID-19 vaccines are not interchangeable. If you received a Pfizer-BioNTech or Moderna COVID-19 vaccine, you should get the same type for your second shot. If you are told you need two shots, make sure that you get both of them.

Johnson & Johnson's Janssen vaccine only requires one shot. People who receive the Johnson & Johnson vaccine are considered fully vaccinated 2 weeks after receiving the single shot.

Ask your healthcare provider about tools (like V-safe) that can send you automated reminders about getting your first and second shots at the appropriate time.

19. DO I HAVE TO SHOW PROOF OF CITIZENSHIP TO GET A VACCINE?

CDC does not require United States citizenship for individuals to receive a COVID-19 vaccine.

20. WHAT'S IT LIKE TO GET VACCINATED?

Getting a COVID-19 vaccine will be a lot like getting any other shot.

When you go in, you'll be given a fact sheet that tells you more about the specific vaccine you're being offered.

Once you've had the vaccine, you will receive a vaccination card with the date, location, and type of vaccine you received. You might also get a card reminding you when to come back for the second shot if applicable.The supply of vaccines will increase in the coming weeks and months. We expect several thousand vaccine providers across the country to offer vaccines — including doctors' offices, hospitals, pharmacy chains like CVS, Walgreens, and Walmart, and certain other qualified healthcare centers.

21. HOW WILL I FEEL AFTERWARDS?

It's normal to experience some mild discomfort following a vaccine. This means it's working and creating an immune response in your body.

You may feel soreness or experience some swelling in your arm. You may also feel tired, have a headache, fever, or chills. These symptoms do not mean you have COVID-19 — it's not possible to get COVID-19 from the vaccine.

These side effects may impact your daily activities, but they shouldn't last more than 2-3 days. If they continue or get worse, call your doctor, nurse, or clinic.

Even if you have these types of effects after your first shot, it's important to make sure you get the second

one, unless a vaccination provider or your doctor tells you not to get a second shot or you get the vaccine that only requires one dose. Ask your doctor if you have questions. Your body takes time to build immunity. You may not be fully protected against COVID-19 until 1-2 weeks after your final shot.

In most cases, discomfort from fever or pain is normal. Contact your doctor or healthcare provider:

- If the redness or tenderness where you got the shot increases after 24 hours
- If your side effects are worrying you or do not seem to be going away after a few days
- If you get a COVID-19 vaccine and you think you might be having a severe allergic reaction after leaving the vaccination site, seek immediate medical care by calling 911. Learn more about COVID-19 vaccines and rare severe allergic reactions.

22. COULD I HAVE AN ALLERGIC REACTION?

Severe allergic reactions to vaccines are extremely rare. The FDA says the authorized COVID-19 vaccines appear to be safe for people with common food or environmental allergies.

If you have had an immediate allergic reaction — even if it was not severe — to a vaccine or injectable therapy for another disease, ask your doctor if you should get a COVID-19 vaccine. Your doctor will help you decide if it is safe for you to get vaccinated.

All people who get a COVID-19 vaccine should be monitored on site. People who have had severe allergic reactions or who have had any type of immediate allergic reaction to a vaccine or injectable therapy should be monitored for at least 30 minutes after getting the vaccine. All other people should be monitored for at least 15 minutes after getting the vaccine.

23. DO I STILL NEED TO WEAR A MASK ONCE I'M FULLY VACCINATED?

If you're fully vaccinated, you can safely resume many activities without having to wear a mask or stay six feet away from others—unless required by federal, state, local, tribal, or territorial laws or regulations, including business and workplace guidance.

If you travel, you should still take steps to protect yourself and others. You must still wear a mask on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States, and in U.S. transportation hubs such as airports and stations.

CDC is continuing to update guidelines as more information becomes available, so please visit their website for the latest recommendations.

24. DO VACCINES PROTECT AGAINST NEW VARIANTS?

New variants of the virus that causes COVID-19 illness have emerged. Current data suggest that COVID-19 vaccines used in the United States should work against these variants. For this reason, COVID-19 vaccines are an essential tool to protect people against COVID-19, including against new variants. CDC recommends getting vaccinated as soon as a vaccine is available to you.

The Delta variant is dangerous and more contagious than the original COVID-19 virus. The good news is that all authorized vaccines provide strong protection against serious illness and hospitalization from the Delta variant.

25. WHAT SHOULD I KNOW ABOUT VACCINES AND PREGNANCY?

At this time, the studies do not include pregnant women or young children, but testing with those groups will likely begin in the near future. Pregnant women who get infected with COVID-19 disease are more likely to have severe disease.

There is currently no evidence that antibodies formed from COVID-19 vaccination cause any problems with pregnancy, including the development of the placenta. There is also no evidence suggesting that fertility problems are a side effect of any FDA-authorized vaccine.

People who are pregnant and part of a group recommended to receive a COVID-19 vaccine, such as healthcare personnel, may choose to be vaccinated. A conversation between pregnant patients and their clinicians may help them decide whether to get vaccinated.

26. SHOULD I GET VACCINATED IF I'VE ALREADY HAD COVID-19?

If you've had COVID-19 in the past 90 days, talk to your doctor about when you should get vaccinated. People who have already had COVID-19 should still eventually get vaccinated to ensure they are protected.

Over the next few months, with more and more people getting vaccinated, we will find out more about how the vaccines protect people who have already had COVID-19.

COVID-19 vaccination should be offered to you regardless of whether you already had COVID-19 infection. You should not be required to have an antibody test before you are vaccinated.

However, anyone currently infected with COVID-19 should wait to get vaccinated until after their illness has resolved and after they have met the criteria to discontinue isolation.

27. WHEN CAN I GO BACK TO NORMAL LIFE?

We need to work together to get to the end of this pandemic.

While trial data suggests authorized COVID-19 vaccines are highly effective, we will only manage the pandemic if enough people take them. Medical experts estimate that at least 80% of the U.S. population needs to get vaccinated to achieve "herd immunity" — which means enough people have been protected to contain the spread of the virus.

Vaccine manufacturers are producing and distributing millions of doses of the vaccines, but they won't all be available at once. That's why certain high-risk groups are getting them first.

Healthcare workers, elderly people in long-term care facilities, frontline workers, and individuals 75 and older are most vulnerable and will be eligible for the vaccine first in most states. More doses will become available to other groups in the spring, as supply increases.

Until enough people have been immunized against COVID-19, we should continue wearing masks, staying 6 feet apart from people we don't live with, avoiding crowds, and washing our hands.

28. DO VACCINES IMPACT FERTILITY?

There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems. If you are trying to become pregnant now or want to get pregnant in the future, you may receive a COVID-19 vaccine when one is available to you.

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29. ARE VACCINES SAFE FOR CHILDREN?

Yes. COVID-19 vaccines have been administered under the most intensive monitoring in U.S. history. Safety studies have included adolescents, and show the vaccines are safe for this age group.

Although fewer children have been infected with COVID-19 than adults, children can be infected with the virus that causes COVID-19, can get sick from COVID-19, and can spread COVID-19 to others.

CDC recommends COVID-19 vaccination for everyone 12 years of age and older to help protect against COVID-19. If you have questions or concerns about vaccinating your child, it's important to talk to your child's pediatrician.

At this time, people over 12 years of age are eligible to receive the Pfizer-BioNTech COVID-19 vaccine, but those younger than 12 years of age are not. People younger than 18 years of age are not authorized to receive either the Moderna or Johnson & Johnson COVID-19 vaccines.

30. WHO SHOULD GET VACCINATED FOR COVID-19?

In the United States, everyone age 12 and over is currently eligible to get a COVID-19 vaccination. CDC recommends that everyone in this group get vaccinated against COVID-19 as soon as they can.

Studies show that COVID-19 vaccines are effective at keeping people from getting COVID-19. Getting a COVID-19 vaccine will also help keep people from getting seriously ill even if they do get COVID-19.

Widespread vaccination is a critical tool to protect against COVID-19 and help stop the pandemic.

31. SHOULD YOUNG ADULTS GET VACCINATED?

CDC recommends that everyone age 12 and older in the United States get vaccinated against COVID-19 as soon as they can. Studies show that COVID-19 vaccines are effective at keeping people from getting COVID-19. Getting a COVID-19 vaccine will also help keep people from getting seriously ill even if they do get COVID-19.

Although most people who contract COVID-19 get better within weeks to months of illness, some do not. CDC and experts around the world are working to learn more about short- and long-term health effects associated with COVID-19, who gets them, and why. People with long COVID report experiencing different combinations of symptoms such as tiredness or fatigue, difficulty thinking or concentrating (sometimes referred to as "brain fog"), headache, difficulty breathing or shortness of breath, or loss of smell or taste.