



COVID-19

Reporting COVID-19 Vaccinations in the United States

Updated Feb. 4, 2022

CDC's COVID Data Tracker provides COVID-19 vaccination data in the United States. Please visit the [About COVID-19 Vaccine Delivered and Administration Data](#) to better understand the IT systems behind the COVID-19 Data Tracker.



COVID-19 Data Tracker

View data on [COVID-19 Vaccinations in the United States](#)

Federal Agency Data

CDC COVID Tracker publicly displays federal agency data individually by agency and incorporates federal agency vaccination data into national and jurisdictional progress metrics.

- Federal agency data are included as part of the national total for each metric presented. These data exclude the Department of State.
- Federal agency data are presented in aggregate by agency in call-out boxes in the COVID-19 Vaccine Data Tracker.
- Federal agency data are ***also included as part of jurisdiction, state, or territory aggregate metrics***. To avoid duplicate counts, the agency data ***should not be combined*** with other data.
- When a federal agency has agreed to provide the denominator representing the population served by the agency, the rate per 100,000 is calculated. When the denominator data are not available, the rate per 100,000 is not included.
- On **January 19, 2022**, CDC changed the address algorithm for the Bureau of Prisons (BOP) and Department of Defense (DOD) to better align vaccine administration counts with the residential county of the recipient instead of the county where vaccine was administered. The change produced no net change for vaccination records at the national level and minimal impact at the jurisdiction level. The greatest impact was at the county level.
 - Residential counties located near DOD facilities will see increases in vaccine administration counts, and counties where DOD facilities are located will see decreases in vaccine administration counts.

How CDC Estimates Vaccination Coverage

CDC estimates the number of people receiving at least one dose, the number of people who are fully vaccinated, and the number of people with a booster dose. CDC estimates are based on data that includes a dose number (first, second, booster or additional dose). To protect the privacy of vaccine recipients, CDC receives data without any personally identifiable information (de-identified data) about vaccine doses. Each jurisdiction or provider uses a unique person identifier to link records within their own systems. However, CDC cannot use the unique person identifier to identify individual people by name.

There are challenges in linking doses when someone is vaccinated in different jurisdictions or from different providers. Even with the high-quality data CDC receives from jurisdictions and federal entities, there are limits to how CDC can analyze those data. If a person received doses in more than one jurisdiction or from different providers within the same jurisdiction, they

could receive different unique person identifiers for different doses. CDC may not be able to link multiple unique person identifiers for different jurisdictions or providers to a single person.

For example, most people receive their first and second dose of a 2-dose vaccine from the same provider because those doses are given within just a few weeks of each other. As they receive their booster dose months later, it's possible they will go to a new location for that dose. The person may have moved or the provider who gave them their initial doses may no longer offer vaccination. This often happens for people who went to mass vaccination clinics that have since closed. In such a scenario, the person's booster dose may appear to be their first dose when reported. This is just one example of how CDC's data may over-estimate first doses and under-estimate booster doses.

Another issue that poses challenges to estimating doses administered is that different jurisdictions and providers use different reporting practices. As people receiving doses are attributed to the jurisdiction in which they reside, the reporting method might change between doses if they move to a different vaccination location. Also, CDC may lack information about a person's residence. These issues can cause CDC's dose number estimates to differ from those reported by jurisdictions and federal entities.

CDC has capped estimates of vaccination coverage shown on [COVID Data Tracker](#) at 95%. This cap helps address potential overestimates of vaccination coverage due to first, second, and booster doses that were not linked. Other reasons for overestimates include census denominator data not including part-time residents or potential data reporting errors. Previously, CDC had capped estimates of vaccination coverage at 99.9%. CDC changed the cap to 95% on December 9, 2021 to account for differences in the accuracy of vaccination coverage estimates between different jurisdictions.

CDC encourages people to bring their CDC COVID-19 Vaccination Record card with them to their appointment for another COVID-19 vaccine shot because having the card will help ensure the doses are linked.

Fully Vaccinated and Johnson and Johnson's Janssen Vaccine

The number of people fully vaccinated by the Johnson and Johnson Janssen (J&J/Janssen) vaccine does not equal the total number of J&J/Janssen vaccine doses administered because some persons were reported to have received one or more mRNA vaccines prior to receiving the single-dose J&J/ Janssen vaccine.

Timing of Updates

Data will be updated daily after review and verification, usually between 1:30 pm and 8:00 pm ET. Note: Daily updates might be delayed due to delays in reporting.

- Data on doses of vaccine distributed and administered include data received by CDC as of 6:00 am ET on the day of reporting.
- There will be no updates on federal holidays.

Jurisdictional Reporting Conditions

Texas has historically provided COVID-19 vaccination administration data to CDC in aggregate format, which impacted CDC's ability to report metrics requiring information at the individual dose level. Although Texas still reports vaccinations data in aggregate form, Texas and CDC recently collaborated to update the format of this record submission to improve COVID-19 reporting of Texas' data on CDC's COVID Data Tracker at the national, state, and county levels.

Previously, for Texas, CDC estimated the number of people with at least one dose and the number of people who are fully vaccinated for the populations ages ≥ 12 , ≥ 18 , and ≥ 65 years of age in the metrics for Texas alone and when including Texas in the national level metrics on the [Vaccinations in the U.S.](#) site. Additionally, Texas was omitted from several demographic and county-level graphics pages. Further, prior to October 22, 2021, all records reported by Texas were assumed to be for residents of Texas.

- Beginning **September 28, 2021**, age-based metrics for Texas are directly reported rather than estimated for the populations ≥ 12 years of age, ≥ 18 years of age, and ≥ 65 years of age on the [Vaccinations in the U.S.](#) site.

- Beginning **September 28, 2021**, the national counts for booster dose data on the [Vaccinations in the U.S.](#) site include Texas.
- Beginning October 22, 2021, county-level graphics on [Vaccinations by County](#), [Vaccination Equity](#), and [Vaccinations and Other Outcomes](#) include Texas.
- Beginning **October 22, 2021**, CDC is able to attribute non-residents of Texas to their respective state or territory of residence. Texas residents who received a COVID-19 vaccination in a different state or territory are also now attributed to Texas' population-based metrics.
- Beginning **November 18**, the [Vaccination Demographics](#) and [Demographic Trends](#) sites include vaccination demographic information from Texas.

Idaho provides vaccine data only for vaccine recipients who are 18 years and older, in line with state laws. COVID-19 vaccination administration data is unavailable for the [Vaccinations in the US](#) and [Vaccinations by County](#) pages for the population aged less than 18 years.

New Hampshire lifted its national COVID-19 emergency response declaration in May 2021, which allows vaccine recipients to opt out of having their COVID-19 vaccinations included in the state's Immunization Information System registry. As such, data submitted by New Hampshire since May 2021 may not be representative of all COVID-19 vaccination occurring in the state.

COVID-19 Vaccinations in the United States Data Definitions

Total Doses Delivered; Total Count

The total number of vaccine doses that have been delivered to the following locations

- jurisdiction (state, territory, tribe, or local entity) partner clinics,
- retail pharmacies,
- long-term care facilities,
- dialysis centers participating in the Federal Dialysis Center Program,
- Federal Emergency Management Agency (FEMA) partner sites,
- Health Resources and Services Administration (HRSA) partner sites, and federal entity facilities (e.g., Department of Defense, Veterans Health Administration, Indian Health Service, and Bureau of Prisons) in that jurisdiction.

For states, Washington DC, the US Virgin Islands, and Puerto Rico, total counts of COVID-19 vaccine doses include doses delivered since December 14, 2020.

For the Republic of Palau, the Federated States of Micronesia, the Republic of the Marshall Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands, total counts of COVID-19 vaccine doses include doses marked as shipped in VTrckS since December 13, 2020.

Doses Delivered; Rate per 100,000

The total number of vaccine doses delivered for every 100,000 people (overall, per the population ages 5 years and older, per the population ages 12 years and older, per the population ages 18 years and older, and per the population ages 65 years and older) is calculated. This allows comparison between areas with different population sizes.

Total Doses Administered; Total Count

The total number of vaccine doses that have been given to people in the United States since December 14, 2020. This is the date when the first dose was administered to a person in the United States under the Emergency Use Authorization not within a clinical trial. Doses administered in a jurisdiction (state, territory, tribe, or local entity) include those administered in:

- jurisdictional (state, territory, tribe, or local entity) partner clinics,
- retail pharmacies,
- long-term care facilities,

- dialysis centers participating in the Federal Dialysis Center Program,
- Federal Emergency Management Agency (FEMA) partner sites,
- Health Resources and Services Administration (HRSA) partner sites, and
- federal entity facilities (e.g., Department of Defense, Veterans Health Administration, Indian Health Service, and Bureau of Prisons) in that jurisdiction.

Total Doses Administered; Rate per 100,000

The total number of vaccine doses given for every 100,000 people (overall, per the population ages 5 years and older, per the population ages 12 years and older, per the population ages 18 years and older, and per the population ages 65 years and older). This allows comparison between areas with different population sizes.

People Receiving at Least One Dose; Total Count* (Formerly “Receiving 1 or More Doses”)

Represents the total number of people who received at least one dose of COVID-19 vaccine, including those who received one dose of the single-shot J&J/Janssen COVID-19 vaccine.

- This metric includes everyone who has received only one dose and those who received more than one dose.
- For this measure, CDC’s COVID Data Tracker attributes each dose to the jurisdiction (state, territory, tribe, or local entity) in which the person resides.

People Receiving at Least One Dose; Percent (%) of the Population*

Represents the percent of people who received at least one dose of COVID-19 vaccine, including those who received one dose of the single-shot J&J/Janssen COVID-19 vaccine. This metric includes everyone who has received only one dose and those who received more than one dose.

- For this measure, CDC’s COVID Data Tracker attributes each dose to the jurisdiction (state, territory, tribe, or local entity) in which the person resides. This includes doses administered by FEMA partner sites, HRSA partner sites, and federal entity facilities.
- Estimates for the total population, population of those ages 5 years and older, population of those ages 12 years and older, population of those ages 18 years and older, and population of those ages 65 years and older are used as the denominators to calculate these percentages.

People Who Are Fully Vaccinated; Total Count* (Formerly “Receiving 2 Doses”)

Represents the number of people who have received the second dose in a two-dose COVID-19 vaccine series or one dose of the single-shot J&J/Janssen COVID-19 vaccine.

- For this measure, CDC’s COVID Data Tracker attributes each dose to the jurisdiction (state, territory, tribe, or local entity) in which the person resides.

People Who are Fully Vaccinated; Percent (%) of the Population*

Represents the percent of people who have received the second dose in a two-dose COVID-19 vaccine series or one dose of the single-shot J&J/Janssen COVID-19 vaccine.

- For this measure, CDC’s COVID Data Tracker attributes each dose to the jurisdiction (state, territory, tribe, or local entity) in which the person resides. This includes doses administered by FEMA partner sites, HRSA partner sites, and federal entity facilities.
- Estimates for the total population, population of those ages 5 years and older, population of those ages 12 years and older, population of those ages 18 years and older, and population of those ages 65 years and older are used as the denominators to calculate these percentages.
- This definition differs from the current [CDC Interim Clinical Considerations](#) in two ways:

1. According to the interim guidance, the second dose of Pfizer-BioNTech and Moderna vaccines should be administered as close to the recommended interval as possible, but not earlier than recommended (i.e., 3 weeks for Pfizer-BioNTech or 4 weeks for Moderna). However, second doses administered within a grace period of 4 days earlier than the recommended date for the second dose are still considered valid. If it is not feasible to adhere to the recommended interval and a delay in vaccination is unavoidable, the second dose of Pfizer-BioNTech and Moderna COVID-19 vaccines may be administered up to 6 weeks (42 days) after the first dose. Currently, only limited data are available on efficacy of mRNA COVID-19 vaccines administered beyond this window.
2. To ensure adequate time for an immune response to occur, a person is considered fully vaccinated 2 weeks after completion of a two-dose mRNA series or one dose of Janssen vaccine.

People Who Received a Booster Dose

Represents the total number of fully vaccinated people who later received another dose of any COVID-19 vaccine on or **after August 13, 2021**. This does not distinguish if the recipient is [immunocompromised and received an additional dose](#). People who are fully vaccinated are those who received the second dose in a two-dose COVID-19 vaccine series or one dose of the J&J/Janssen COVID-19 vaccine.

Learn more about [CDC's recommendations for COVID-19 vaccine booster doses](#).

On **September 30th, 2021**, this language was changed to reflect the recommendation for booster doses. People who received an additional dose since August 13, 2021 are included in this count.

People Who Are Eligible to Receive a Booster Dose

Represents the total number of fully vaccinated people who are eligible to receive another dose of an mRNA COVID-19 vaccine if it has been at least 5 months since their completed Pfizer-BioNTech or Moderna primary series or at least 2 months since their completed J&J/Janssen single-dose vaccine. Completion of a primary series does not distinguish if the recipient is [immunocompromised and received an additional dose](#). This measure excludes recipients who received an "Other" primary series vaccine type.

Rates per 100,000

Represent the rate of total doses delivered, the rate of total doses administered, the rate of people receiving at least one dose, and the rate of people who are fully vaccinated per 100,000. The total population, population of those ages 5 years and older, population of those ages 18 years and older, and population of those ages 65 years and older are used as estimates to calculate rates for total doses delivered and total doses administered. In some limited circumstances, people might receive vaccinations outside the jurisdiction (state, territory, tribe, or local entity) where they live. These rates currently account for vaccinations that occur in the jurisdiction where the vaccination was administered.

Percent of the Population

Represents the percent of people receiving at least one dose and the percent of people who are fully vaccinated. The total population, population of those ages 5 years and older, population of those ages 18 years and older, and population of those ages 65 years and older are used as denominators to calculate the percent of the total population, the percent of the population ages 5 years and older, the percent of the population ages 18 years and older, and the percent of the population ages 65 years and older who have received at least 1 dose or who are fully vaccinated. The percent of the total population was derived using the location of residence.

CDC has capped estimates of vaccination coverage shown on [COVID Data Tracker](#) at 95%. This cap helps address potential overestimates of vaccination coverage due to first, second, and booster doses that were not linked. Other reasons for overestimates include census denominator data not including part-time residents or potential data reporting errors. Previously, CDC had capped estimates of vaccination coverage at 99.9%. CDC changed the cap to 95% on December 9, 2021 to account for differences in the accuracy of vaccination coverage estimates between different jurisdictions.

*CDC determines the **number of people receiving at least one dose** and the **number of people who are fully vaccinated** based on information that state, territorial, tribal, and local public health agencies and federal entities reported to CDC on dose number, dose manufacturer, administration date, recipient ID, and date of submission. Because the method used to determine dose numbers needs to be applied across multiple jurisdictions (states, territories, tribes, or local entities) with different reporting practices, **CDC's dose number estimates might differ from those reported by jurisdictions and federal entities. People receiving doses are attributed to the jurisdiction in which the person resides. When the vaccine manufacturer is not reported, the recipient is considered fully vaccinated with two doses.**

Historical Updates

- On **January 25, 2022**, Idaho began providing vaccine data for recipients younger than 18 years of age to CDC. This resulted in an increase of 177,996 doses administered.
- On **January 20, 2022**, data review and reporting adjustments resulted in a decrease of 12,298 vaccine doses administered in Hawaii since December 14, 2020.
- On **January 19, 2022**, CDC changed the address algorithm for the Bureau of Prisons (BOP) and Department of Defense (DOD) to better align vaccine administration counts with the residential county of the recipient instead of the county where vaccine was administered. The change produced no net change for vaccination records at the national level and minimal impact at the jurisdiction level. The greatest impact was at the county level.
 - Residential counties located near DOD facilities will see increases in vaccine administration counts, and counties where DOD facilities are located will see decreases in vaccine administration counts.
- Due to a data processing issue on January 7, 2022, vaccination delivery data were not updated on CDC COVID Data Tracker and reflect data as of January 6, 2022. CDC is actively working to address this issue and the data will be updated when available.
- On **November 14, 2021**, a temporary network outage at CDC occurring Friday, November 12, 2021 resulted in vaccine administration files from 13 partner entities not being properly processed and resulted in 281,912 records being omitted. The omitted 281,912 records are included in the data for Sunday, November 14, 2021.
- On **November 5, 2021**, population estimates for all territories and protectorates (excluding Puerto Rico) have been updated using the 2020 US Census International Data Base.
- On **November 2, 2021**, CDC recommended use of the ***Pfizer-BioNTech Vaccine for children ages 5 through 11*** for the pediatric population ages 5 to 11. The ***Pfizer-BioNTech COVID-19 Vaccine*** recommended for adults and adolescents has not been recommended for use among children ages 5 through 11.
- On **October 29, 2021**, data review and reporting adjustments for Kentucky resulted in a decrease of 411,224 doses administered. The adjustments are the result of updates to how pharmacies report data to CDC and/or the jurisdictions.
- On **October 26, 2021**, CDC corrected an error in the census denominators used to calculate percentage-based metrics for the population ≥ 65 years of age in Puerto Rico. No other population groups were affected.
 - The census counts for the population aged 65 years and older in Puerto Rico increased from 542,928 to 679,656 people.
 - The census counts for the population aged 65 years and older in the US increased from 54,696,581 to 54,833,309 people.
 - CDC will update its historical data on data.cdc.gov to reflect these corrections.
- On **October 24, 2021**, CDC identified and corrected a processing error for percent of fully vaccinated people in 50+ years of age with a booster dose. This error resulted in a higher percentage of people reported with a booster dose in the age group of 50+ for October 22 and 23, 2021.
- On **September 28, 2021**, reporting adjustments for Texas resulted in a decrease of 91,119 doses.
- On **September 23, 2021**, data review and reporting adjustments resulted in a decrease in the number of vaccine doses administered for Washington State of 473,191 doses. The adjustments are the results of updates to how pharmacies report data to CDC and/or the jurisdictions.
- Due to a short network outage at CDC on **August 14, 2021**, some of the vaccine administration files were not ingested on August 15, 2021. Counts from these files are not reflected in the 6am counts for August 15, 2021

but will be in August 16, 2021 counts. This affected 11 entities for a grand total of 66,326 vaccine administrations.

- The Federal Pharmacy Partnership for Long-Term Care (LTC) Program was a partnership between CDC and CVS, Walgreens, and Managed Health Care Associates, Inc. The program offered on-site COVID-19 vaccination services for residents of nursing homes and assisted living facilities. The federal Pharmacy Partnership for LTC Program was in effect after vaccines became available to April 23, 2021, and related COVID-19 Data Tracker pages were removed on **October 7, 2021**. Historical data, previously available for download, that reflects the Pharmacy Partnership for LTC Program have been archived and are available on [cdc.gov](https://www.cdc.gov). All vaccine doses administered to residents and staff of nursing homes and assisted living facilities continue to be represented in their appropriate jurisdiction totals.
- On **July 1, 2021**, data review and reporting adjustments resulted in a larger-than-usual increase in the number of vaccine doses administered for Arizona and Puerto Rico of 258,590 and 465,704 doses respectively. The adjustment is the result of CDC and the jurisdictions actively working to correct data transmission errors.
- On **June 30, 2021**, data review and reporting adjustments resulted in an increase in the number of vaccine doses administered for North Carolina of 621,198 doses since December 2020. The adjustment is the result of updates to how pharmacies report data to CDC and/or the jurisdictions.
- On **June 25, 2021**, data review and reporting adjustments resulted in a decrease in the number of vaccine doses administered for New Jersey of 331,640 doses and a smaller-than-usual increase for New Hampshire of 6,449 doses. The adjustments are the result of updates to how pharmacies report data to CDC and/or the jurisdictions.
- During a system upgrade, CDC identified vaccine administration records from files that were previously received but not fully processed. Completion of processing on **June 14, 2021** has resulted in a net increase of 339,047 vaccine administration counts. By jurisdiction, the net increases are: CT (+39), DC (+4,528), FL (+132,008), GU (+1,607), ID (+8,081), IHS (+42), IL (+62,731), IN (+37,621), LA (+19,321), MA (+2,594), MH (+285), MN (+118), MO (+36,582), MT (+37), NY (+1,571), OK (+15,370), TN (+32,588), VA (+305), VI (+94), WI (+2,645), WV (+1,489). Vaccine administration counts for the following jurisdictions will decrease: NJ (-20,609).
- On **June 14, 2021**, CDC corrected an error in the Census denominators used to calculate percentage-based metrics for the U.S. population ages 12 years and older, 18 years and older, and 65 years and older. No other population groups were affected.
 - The census counts for the population ages 12 years and older increased from 280,216,744 to 283,545,812 people (+3,329,068).
 - The census counts for the population ages 18 years and older increased from 258,130,580 to 258,259,833 people (+129,253).
 - The census counts for the population ages 65 years and older decreased from 54,696,898 to 54,696,581 people (-317).
- On **June 10, 2021**, a data synchronization error resulted in a number of records missing the 6 AM ET cutoff for inclusion the same day on CDT. Records were instead being included on CDT the following day. The issue has been resolved and data are correctly synchronized as of June 17, 2021.
- On **June 6, 2021**, the total number of administered doses for New Mexico was incorrectly reported as 1,903,485 due to a data processing error, which has been amended. The correct total for NM on June 6, 2021, was 2,175,419 administered doses.
- On **May 27, 2021**, the total doses administered data posted to COVID Data Tracker for Vermont showed a decrease in doses administered. This is an accurate reflection of the data and is the result of ongoing efforts to improve the data quality of records reported from Vermont.
- On **May 27, 2021**, the New Hampshire 'at least one dose' values posted to Tracker appeared lower than that reported the day prior (May 26, 2021). This correction is accurate and is due to New Hampshire and CDC collaboratively correcting data transmission errors.
- On **May 25, 2021**, the 7,836,063 administered doses reported for Long-Term Care Facilities (LTCF), were fewer by 4,105 records compared to the 7,840,168 reported on May 24, 2021. This was due to an error in data processing that has now been corrected. The data for May 26, 2021 accurately reflect total LTCF doses.
- On **May 16, 2021**, the total number of administered doses for the US and New Hampshire were incorrectly reported. This was due to an error in data processing. The data for May 16, 2021 have been updated and now correctly report the total administered doses of 272,925,411 for the US, and 1,211,530 for New Hampshire.

- On **May 13, 2021**, CDC updated its methodology for calculating age-based metrics for Texas. Effective May 13, 2021, to calculate age-based metrics, CDC assumes: Residents of Texas who receive a vaccination in a different state or territory are not attributed to Texas in their population-based metrics but are still included in national-level metrics. All people receiving vaccinations in Texas are considered Texas residents of Texas. The percentage of total doses that were administered to people in each age group (ages 12 years and older, ages 18 years and older, and ages 65 years and older) is the same as both the percentage of people who received at least one dose and the percentage of fully vaccinated people within each age group. CDC estimates the “at least one dose” metric for these populations of Texas by first obtaining the percentage of the three population groups who have received ‘at least one dose’ from Texas. CDC then multiplies this percentage by the count for the total population receiving at least one dose in Texas. CDC repeats the same calculations to estimate the “fully vaccinated” metrics for the three population groups. These values will also be included in the topline national totals for 12+, 18+, and 65+.
- On **May 7, 2021**, the COVID-19 Vaccine Tracker was updated to reflect the revised Moderna emergency use authorization (EUA) to account for the new 14 dose vial as authorized by the [Food and Drug Administration \(FDA\)](#) [↗](#). Moderna deliveries to a jurisdiction on or after May 7, 2021, will reflect this combination of fourteen dose and ten dose vials; historical data will not be updated. The change to the Moderna dosage increases the number of doses delivered relative to the number of doses administered.
- On **May 7, 2021**, the New Hampshire “total doses administered” value posted to Tracker was lower than that reported on the two prior days (May 5 and 6, 2021). This downward correction is accurate and is due to New Hampshire and CDC collaboratively correcting data transmission errors. Updates will be provided as available.
- On **May 6, 2021**, the total doses administered data posted to Tracker for New Hampshire was the same as those reported the day before (May 5, 2021). New Hampshire and CDC are actively working to reconcile counts at this time. Updates will be provided as available.
- On **April 19, 2021**, the population metrics for 65+ Texas residents dropped from the metrics reported on April 18, 2021. This was due to a schedule delay in updating the calculation used to infer the 65+ population metrics. The issue was resolved on April 19, 2021 and metrics accurately reflect the total doses administered. This did not affect any other states, but did affect the total US estimates for 65+.
- On **April 13, 2021**, the total doses administered data posted to Tracker inadvertently included 221,081 duplicate doses affecting Vermont (6,605), Georgia (102,711), Illinois (64,886), West Virginia (60), and Maine (46,819). The issue has since been resolved and totals for April 14, 2021 accurately reflect the total doses administered.
- On **April 2, 2021**, New York State showed a higher than usual increase in doses administered. This is an accurate reflection of the data and is the result of a delay in records reported from New York.
- Since **March 29, 2021**, the total number of doses delivered, and total number of doses administered by dialysis centers participating in the Federal Dialysis Center Program are reflected in national totals and in jurisdictional totals.
- Due to a delay in data syncing on **March 13, 2021**, 4,575,496 new doses administered were initially reported, which included records that were reported after 6:00 AM ET (the regular cutoff time for daily reporting). The site has since been updated to reflect the totals reported as of March 13 at 6:00 AM ET. Totals for **March 14, 2021** reflect the number of doses reported through the regular daily reporting period.
- Dose counts for the state of Connecticut were updated **March 13, 2021** to correct for data transmission errors that began on February 20, 2021. Since that date, first doses have been slightly overcounted and second doses have been slightly undercounted.
- As of **March 12, 2021**, to calculate national population estimates, CDC uses, as a denominator, a combination of:
 - The 2019 National Census Population Estimates from the [US Census Bureau Annual Estimates of the Resident Population for the United States](#) [↗](#) (including the District of Columbia [DC]) and Puerto Rico and the US Census Bureau 2018 population estimates and CIA World Factbook for US territories and freely associated states (American Samoa, the Federated States of Micronesia, Guam, the Commonwealth of Northern Mariana Islands, Republic of Palau, the Republic of the Marshall Islands, and US Virgin Islands).
 - To estimate the 18+ and 65+ populations for US territories, CDC assumes that the proportions of people ages 18 years and older and people ages 65 years and older in the territories are the same as in the aggregate of the 50 states, DC, and Puerto Rico (78% and 17%, respectively).

- On **March 5, 2021**, doses were removed from the delivered doses totals for Maryland (98,475 doses), Pennsylvania (239,900 doses), and Virginia (91,950 doses) because it was determined that the doses, while delivered to federal facilities in those states, were not intended for vaccinating persons living in the region.
- On **February 28, 2021**, CDC released an official recommendation to use the J&J/Janssen COVID-19 vaccine for people ages 18 and older. Shipments to jurisdictions began on March 2, 2021.
- On **February 23, 2021**, the total numbers of national doses delivered show larger-than-typical daily increases. This is an accurate reflection of the data and is the result of recent weather events causing a backlog of vaccine delivery to many parts of the United States.
- On **February 19, 2021**, and **February 20, 2021**, the total numbers of national aggregate doses delivered were incorrect. That's because deliveries to federal entities were inadvertently counted twice; the totals should have been 74,108,895 and 74,979,165, respectively.
- On **February 15, 2021**, the COVID-19 Vaccine Tracker was updated to reflect the revised Pfizer-BioNTech emergency use authorization (EUA) to allow the use of a sixth dose, if present in a vial, as authorized by the [Food and Drug Administration \(FDA\)](#). Pfizer-BioNTech deliveries to a jurisdiction on or after February 15, 2021, will reflect this increase to six doses per vial compared to five doses; historical data will not be updated. The change to the Pfizer-BioNTech dosage increases the number of doses delivered relative to the number of doses administered.
- **The total doses administered can be greater than the total doses distributed.** This is because vials of the Pfizer-BioNTech COVID-19 vaccine officially contain at least five doses but can contain an additional sixth dose. Use of this sixth dose, if present, is authorized by FDA. Before **February 15, 2021**, the sixth dose was not reflected in the doses delivered totals; however, if administered, doses were reflected in the doses administered totals.
- From **December 21, 2020** through **January 13, 2021**, Virginia transferred 17,550 doses and Maryland transferred 16,000 doses to the District of Columbia (DC) for administration to persons from the region who were vaccinated in DC. This approved transfer of inventory is reflected in the totals presented on the CDC COVID Data Tracker to accurately reflect the inventory made available to each jurisdiction. Because of how and when (i.e., early in the vaccination program) these transfers occurred, they may not be reflected in totals presented within other inventory management systems (e.g., the Vaccine Tracking System [VTrckS]).

Update Delete Appendix

Vaccination Data Updates:

- **February 4, 2022:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 75,630 doses administered.
- **February 4, 2022:** New Jersey made updates to data previously submitted to CDC that resulted in an increase of 32,976 doses administered.
- **February 3, 2022:** Alaska made updates to data previously submitted to CDC that resulted in a decrease of 3,945 doses administered.
- **January 28, 2022:** New Jersey made updates to data previously submitted to CDC that resulted in an increase of 26,796 doses administered.
- **January 28, 2022:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 14,973 doses administered.
- On **January 27, 2022**, California made updates to data previously submitted to CDC that resulted in a decrease of 1,593,072 doses administered for California and a decrease of 800,606 doses administered at the National level (national level decrease factors in new administrations reported by other jurisdictions).
- **January 21, 2022:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 29,394 doses administered.
- **January 21, 2022:** New Jersey made updates to data previously submitted to CDC that resulted in an increase of 34,238 doses administered.

- **January 20, 2022:** Georgia made updates to data previously submitted to CDC that resulted in an increase of 139 doses administered.
- **January 20, 2022:** Wyoming made updates to data previously submitted to CDC that resulted in an increase of 2,761 doses administered.
- **January 20, 2022:** Pennsylvania made updates to data previously submitted to CDC that resulted in an increase of 206,575 doses administered.
- **January 19, 2022:** Idaho added 20,015 records for persons aged 18 years not previously submitted to CDC.
- **January 14, 2022:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 4,868 doses administered.
- **January 13, 2022:** Colorado made updates to data previously submitted to CDC that resulted in an increase of 47,260 doses administered.
- **January 13, 2022:** North Carolina made updates to data previously submitted to CDC that resulted in an increase of 41,000 doses administered.
- **January 13, 2022:** Hawaii made updates to data previously submitted to CDC that resulted in an increase of 318,481 doses administered.
- **January 11, 2022:** New Jersey made updates to data previously submitted to CDC that resulted in an increase of 31,680 doses administered.
- **January 6, 2022:** California updated 22,696,262 records previously submitted to CDC. This did not result in a change to the number of doses administered.
- **December 30, 2021:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 58,731 doses administered.
- **December 29, 2021:** South Dakota made updates to data previously submitted to CDC that resulted in an increase of 3,074 doses administered.
- **December 28, 2021:** Updates were made to data previously submitted to CDC that resulted in a decrease of 9,436 doses administered.
- **December 23, 2021:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 4,916 doses administered.
- **December 23, 2021:** West Virginia made updates to data previously submitted to CDC that resulted in a decrease of 651,436 doses administered.
- **December 22, 2021:** New Jersey made updates to data previously submitted to CDC that resulted in an increase of 25,151 doses administered.
- **December 21, 2021:** Pennsylvania made updates to data previously submitted to CDC that resulted in a decrease of 101,475 doses administered.
- **December 17, 2021:** New Mexico updated 2,213 records, previously submitted to CDC. This did not result in change to number of doses administered.
- **December 16, 2021:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 22,422 doses administered.
- **December 9, 2021:** Illinois made updates to data previously submitted to CDC that resulted in an increase of 53,344 doses administered.
- **December 2, 2021:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 46,380 doses administered.
- **November 23, 2021:** Pennsylvania made updates to data previously submitted to CDC that resulted in a decrease of 1,151,719 doses administered.
- **November 18, 2021:** Illinois made updates to data previously submitted to CDC that resulted in a decrease of 214,250 doses administered.
- **November 10, 2021:** North Dakota made updates to data previously submitted to CDC that resulted in an increase of 3,433 doses administered.
- **November 9, 2021:** Ohio made updates to data previously submitted to CDC that resulted in a decrease of 99 doses administered.
- **November 4, 2021:** Minnesota made updates to data previously submitted to CDC that resulted in an increase of 136,589 doses administered.

- **November 3, 2021:** Maryland made updates to data previously submitted to CDC that resulted in a decrease of 5,975 doses administered.
- **November 3, 2021:** A federal dialysis partner made updates to 30,556 records previously submitted to CDC that resulted in no net change in number of doses administered.
- **October 29, 2021:** Illinois made updates to data previously submitted to CDC that resulted in an increase of 316,351 doses administered.
- **October 27, 2021:** North Dakota made updates to data previously submitted to CDC that resulted in a decrease of 8,591 doses administered.
- **October 26, 2021:** New Mexico made updates to data previously submitted to CDC that resulted in a decrease of 179,565 administered doses.
- **October 22, 2021:** A federal retail pharmacy partner made updates to data previously submitted to CDC that resulted in a decrease of 563 records.
- **October 21, 2021:** South Dakota made updates to data previously submitted to CDC that resulted in a decrease of 11,366 records.
- **October 20, 2021:** North Carolina made updates to 7,727,520 records previously submitted to CDC that resulted in no net change in number of records.
- **October 8, 2021:** Michigan made updates to 9,632,251 records previously submitted to CDC that resulted in no net change in number of doses administered.
- **October 5, 2021:** North Carolina made updates to data previously submitted to CDC that resulted in an increase of 16,009 doses administered.
- **September 29, 2021:** Florida made updates to 3,001,563 records previously submitted to CDC that resulted in no net change in number of doses administered.
- **September 25, 2021:** Iowa made updated to data previously submitted to CDC that resulted in an increase of 4,928 doses administered.
- **September 24, 2021:** Virginia made updates to 9,172,838 records previously submitted to CDC that resulted in no net change in number of doses administered.
- **September 22, 2021:** New Jersey made updates to data previously submitted to CDC that resulted in a decrease of 16,888 doses administered.
- **September 16, 2021:** Ohio made updates to data previously submitted to CDC that resulted in a decrease of 54,677 doses administered.
- **September 13, 2021:** Alabama made updates to data previously submitted to CDC that resulted in an increase of 1,329 doses administered.
- **August 27, 2021:** Virginia made updates to data previously submitted to CDC that resulted in a decrease of 4,952 doses administered.
- **August 25, 2021:** A federal entity made updates to data previously submitted to CDC that resulted in an increase of 3,818 doses administered.
- **August 17, 2021:** Rhode Island made updates to data previously submitted to CDC that resulted in an increase of 1,386 doses administered.
- **August 12, 2021:** Vermont made updates to data previously submitted to CDC that resulted in a decrease of 23,325 doses administered.
- **August 4, 2021:** Colorado made updates to data previously submitted to CDC that resulted in an increase of 11,379 doses administered.
- **July 20, 2021:** A federal entity made updates to data previously submitted to CDC that resulted in a decrease of 159,648 doses administered.
- **July 14, 2021:** Utah made updates to data previously submitted to CDC that resulted in an increase of 6,028 doses administered.

Reporting COVID-19 Vaccination Demographics

Demographic data are currently collected by the jurisdiction and reported to CDC. Not all states and territories report to CDC demographic data on vaccine recipients; the laws in each state or territory dictate whether the state can collect or report demographic data. For more information on vaccine distribution and administration demographic data, see [Demographic Characteristics of Persons Vaccinated During the First Month of the COVID-19 Vaccination Program — United States, December 14, 2020–January 14, 2021](#)

Downloading Data

Users can download .CSV files of all data presented on CDC’s COVID Data Tracker. Additional vaccination data sets for COVID-19 and other diseases can be found at <https://data.cdc.gov/browse?category=Vaccinations>.

More Information

[COVID-19 Vaccine Data Systems](#)

[How COVID-19 Vaccines Get to You](#)

Last Updated Feb. 4, 2022