Summary Document for Interim Clinical Considerations

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

Pfizer-BioNTech

Age indication	Vaccine vial cap color	Label border color	Dilution required	Primary series		Booster doses	
				Dose	Injection volume	Dose	Injection volume
6 months–4 years	Maroon	Maroon	Yes	3 µg	0.2 mL	NA	NA
5–11 years	Orange	Orange	Yes	10 µg	0.2 mL	10 µg	0.2 mL
12 years and older	Purple	Purple	Yes	30 µg	0.3 mL	30 µg	0.3 mL
12 years and older	Gray	Gray	No	30 µg	0.3 mL	30 µg	0.3 mL

Moderna

Age indication	Vaccine vial cap color	Label border color	Dilution required	Primary series		Booster doses	
				Dose	Injection volume	Dose	Injection volume
6 months–5 years	Dark blue	Magenta	No	25 µg	0.25 mL	NA	NA
6-11 years	Dark blue	Purple	No	50 µg	0.5 mL	NA	NA
12–17 years	Red	Light blue	No	100 µg	0.5 mL	NA	NA
18 years and older	Red	Light blue	No	100 µg	0.5 mL	50 µg	0.25 mL
18 years and older	Dark blue	Purple	No	NA	NA	50 µg	0.5 mL

Janssen

Age indication	Vaccine vial cap color	Label border color	Dilution required	Primary series		Booster doses	
				Dose	Injection volume	Dose	Injection volume
18 years and older	Blue	N/A	No	5×10^{10} viral particles	0.5 mL	5×10^{10} viral particles	0.5 mL

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All currently authorized or approved COVID-19 vaccines	
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). ■ Screen for contraindications and precautions. CDC's Prevaccination Screening Form and Guidance document can be found at www.cdc.gov/vaccines/covid-19/info-by-product/index.html. ■ Inform vaccine recipients mRNA vaccines are preferred 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 vaccine recipients especially males ages 12-39 years, of the rare risk of myocarditis and/or pericarditis following receipt of mRNA 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: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#safety-mRNA. ■ Inform vaccine recipients interested in or receiving Janssen COVID-19 Vaccine of the risk and symptoms of thrombosis with thrombocytopenia syndrome (TTS), as well as the need to seek immediate medical care should symptoms develop after receiving Janssen vaccine. For more information see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#considerations-Janssen.
Interchangeability of vaccines	■ In general, the same mRNA vaccine product should be used for all doses in the primary series. In exceptional situations when the previous product cannot be determined or is not available, any age-appropriate mRNA COVID-19 vaccine may be used (administer at a minimum interval of 28 days). ■ Any age-appropriate mRNA COVID-19 vaccine can be used for the booster dose(s); mRNA vaccines are preferred. The Janssen COVID-19 Vaccine cannot be used as a second booster. (https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#Interchangea).†
Coadministration with other vaccines	■ COVID-19 vaccines may be administered on the same day as other vaccines. ■ Administer each injection in a different injection site.
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)‡

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

† Although CDC provides considerations for a mixed series in exceptional circumstances for a primary or additional dose, this is still considered an administration error that requires VAERS reporting. Heterologous booster doses are allowed (mRNA vaccines preferred) and are not considered a vaccine error.

‡ 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 COVID-19 vaccine.

Summary Document for Interim Clinical Considerations

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All currently authorized or approved COVID-19 vaccines	
Precautions	■ History of immediate allergic reaction to any other vaccine or injectable therapy (i.e., intramuscular, intravenous, or subcutaneous vaccines or therapies [excluding subcutaneous immunotherapy for allergies, i.e., "allergy shots"]) ■ History of multisystem inflammatory syndrome in children (MIS-C) or multisystem inflammatory syndrome in adults (MIS-A) ■ 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 ■ Allergy-related contraindication to one type of COVID-19 vaccine (e.g., mRNA) is a precaution to other types of COVID-19 vaccines (e.g. Janssen) ■ Moderate or severe acute illness, with or without fever ■ For mRNA COVID-19 vaccines, history of myocarditis or pericarditis after a dose of an mRNA COVID-19 vaccine ■ For Janssen COVID-19 Vaccine, a history of Guillain-Barré syndrome§
Considerations for all FDA-authorized 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 doses received before or during treatment at least 3 months (12 weeks) after transplant or CAR-T-cell therapy
Persons who are moderately or severely immunocompromised	■ In most cases can receive a COVID-19 vaccine. Additional doses are recommended for this population. ■ See the Interim COVID-19 Immuniation Schedule for Ages 6 Months or Older at https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf
Persons receiving immunosuppressive therapies	■ Whenever possible, COVID-19 vaccines should be administered at least 2 weeks before initiation or resumption of immunosuppressive therapies
SARS-CoV-2 infection ■ Current infection ■ History of previous infection ■ Exposed to an infected person	COVID-19 vaccination is recommended for everyone ages 6 months and older, regardless of a history of symptomatic or asymptomatic SARS-CoV-2 infection. ■ Defer vaccination until person has recovered from acute illness and criteria have been met for them to discontinue isolation. ■ 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). ■ 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. ■ Additional information at: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#infection ■ COVID-19 vaccination is not recommended for post-exposure prophylaxis.
Persons with history of multisystem inflammatory syndrome (MIS-C and MIS-A) from SARS-CoV-2 infection	■ COVID-19 vaccines can be given; for children and adolescents wait at least 90 days after an MIS-C diagnosis. ■ 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. ■ Clinical recovery, including return to normal cardiac function, is an important factor when considering COVID-19 vaccination. Additional information at: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#infection

§ 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 an mRNA COVID-19 vaccine.

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Considerations for all FDA-authorized or -approved COVID-19 vaccines	
Persons who received passive antibody therapy (convalescent plasma/monoclonal antibodies)	■ COVID-19 vaccination can be given at any interval following receipt of passive antibody therapy. ■ Persons should wait 2 weeks after COVID-19 vaccination before receiving tixagevimab/cilgavimab (EVUSHELD) for pre-exposure prophylaxis.
Persons who are pregnant, breastfeeding, trying to get pregnant, or might become pregnant in the future	■ Are recommended to receive a COVID-19 vaccine primary series, additional mRNA doses (if indicated), and a booster dose(s).
Considerations for mRNA vaccines	
Persons with a history of myocarditis or pericarditis	■ Development of myocarditis or pericarditis after a dose of an mRNA COVID-19 vaccine is a precaution to a subsequent dose of any COVID-19 vaccine. ■ 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. ■ For males ages 18 years and older who choose to receive a subsequent COVID-19 vaccine, a Janssen COVID-19 Vaccine can be considered instead of mRNA COVID-19 vaccines. ■ Persons who have a history of myocarditis or pericarditis unrelated to mRNA COVID-19 vaccination may receive any age-appropriate COVID-19 vaccine after the episode of myocarditis or pericarditis has resolved. ■ For more information see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#safety-mRNA
Considerations for Janssen COVID-19 Vaccine	
Persons with a history of Guillain-Barré syndrome (GBS)	■ A history of GBS is a precaution for receipt of Janssen COVID-19 Vaccine. An mRNA vaccine is preferred. ■ Persons who develop GBS within 6 weeks of Janssen COVID-19 vaccination should only receive an mRNA COVID-19 vaccine for subsequent doses. ■ For more information see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#considerations-Janssen
Persons with a history of thrombosis with thrombocytopenia syndrome (TTS)	■ 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). ■ 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. ■ Prior to booster vaccination, a conversation between the patient and their clinical team may assist with vaccination decisions.
Persons with a history of heparin-induced thrombocytopenia (HIT)	■ 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. ■ These persons should receive an mRNA COVID-19 vaccine.

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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: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#appendix-a
Post-vaccination observation periods	**30 minutes** – people with a history of: ■ A contraindication to different type of COVID-19 vaccine product (i.e., mRNA or viral vector COVID-19 vaccines) ■ Immediate (within 4 hours of exposure) non-severe allergic reaction to a COVID-19 vaccine ■ Immediate allergic reaction of any severity to non-COVID-19 vaccine(s) or injectable therapies ■ Anaphylaxis due to any cause **15 minutes** – all other persons
SARS-CoV-2 antibody testing	■ Antibody testing is not recommended for vaccine decision-making or to assess immunity following vaccination.
Reporting requirements	Adverse events that occur following COVID-19 vaccination should be reported to VAERS (https://vaers.hhs.gov/). 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