COVID-19 Vaccine – 12-15 Year Olds
Frequently Asked Questions

Updated: 5/12/2021

1. Why should my child get vaccinated?

In the early months of the pandemic, you may have heard that children are not likely to get COVID-19. However, kids can get severe cases of COVID-19. In recent months, we have seen an increase in COVID-related hospitalizations at Yale New Haven Children’s Hospital. Getting vaccinated is the best way for your child to be protected.

All age groups contribute to transmission of the virus, and vaccinating children helps to reduce spread of COVID-19 across families, schools, and communities.

2. What vaccine will my child get?

Right now, the only vaccine available for children 12 years and older is the Pfizer vaccine. When signing up your child for their vaccine appointment, please be sure to select a day when the Pfizer vaccine will be administered at your preferred location.

3. Do I need to consult my pediatrician?

If you have any specific health concerns, please contact your pediatrician to discuss your options. However, if your child does not have any specific health concerns, you may schedule your appointment without consulting your pediatrician.

4. What are the side effects?

Just like with adults, common side effects can include pain at the injection site, fatigue, headaches, muscle and joint pain, and fever. Side effects are usually mild and should only last 1-2 days. Severe allergic reactions, such as anaphylaxis, have been rarely reported following receipt of COVID-19 vaccines. This is the reason why everyone who receives the vaccine is
monitored for at least 15 minutes after their vaccine. Any child with a history of an immediate allergic reaction to a vaccine or injectable therapy, an allergy to polysorbate, or a history of anaphylaxis due to any cause will be monitored for at least 30 minutes after their vaccine. Trained staff are available on-site to monitor and treat your child if they experience a reaction to the vaccine during this observation period, and emergency treatment can be readily accessed. If your child experiences any unusual or severe symptoms after this period of monitoring, contact your pediatrician or urgent care.

5. **Can I give my child acetaminophen (Tylenol) or ibuprofen (Motrin or Advil) before vaccination to prevent side effects?**

The Centers for Disease Control (CDC) advises against giving your child a pain-relieving medication before getting the vaccine because it may reduce the immune response to the vaccine. However, if your child develops fever or pain after the vaccine, it is acceptable to provide acetaminophen or ibuprofen at the appropriate dose unless they have a known contraindication.

6. **My child just got a different routine vaccination. Can my child still get a COVID-19 vaccine?**

Yes. COVID-19 and other vaccines may now be administered without regard to timing of other vaccines. This includes simultaneous administration of COVID-19 and other vaccines on the same day.

7. **Can my child get the vaccine if they have food allergies, a history of anaphylaxis, and/or carries an Epi-pen?**

Unless your child had an allergic reaction to a previous dose of the COVID-19 vaccine or has an allergy to one of the ingredients in the vaccine (e.g., polyethylene glycol or PEG), your child should be able to get the vaccine. If you have concerns regarding your child’s history of allergic reactions, you should discuss your child’s history with your pediatrician before scheduling a vaccine appointment.

If your child has a history of a severe allergic reaction or carries an Epi-pen, please let our staff know on the day of your child’s appointment. They will be able to monitor your child and respond in case they experience a reaction.
8. My child had a reaction to Miralax or another medication that contains PEG (polyethylene glycol). Is it safe for my child to get the Pfizer vaccine?

If your child has had a severe allergic reaction (e.g., anaphylaxis), or an immediate allergic reaction of any severity to Miralax or another medication that contains polyethylene glycol (PEG), your child cannot receive the Pfizer COVID-19 vaccine. Symptoms of this type of allergic reaction include diffuse itching, hives, swelling of face/lips, respiratory distress (e.g. wheezing, stridor) with onset within minutes to hours of taking the medication.

A common, known (intended) effect of orally administered polyethylene glycol is abdominal discomfort and diarrhea. This type of reaction would NOT be considered an allergic reaction unless accompanied by allergic symptoms such as itching, rash, facial swelling, or difficulty breathing.

9. If my child already had COVID-19, should I bother with vaccination?

Yes, your child should have a COVID-19 vaccination regardless of whether they have already had COVID-19. This is because the vaccine provides additional protection by reducing the risk of a repeat COVID-19 infection. It is recommended that your child wait one month after resolution of COVID-19 symptoms before getting vaccinated, recognizing that the risk of reinfection with COVID-19 and, therefore, the benefit of vaccination, might increase with time following the initial infection.

10. My child has a history of multisystem inflammatory syndrome (MIS-C). Can my child receive a COVID-19 vaccine?

Children and young adults who had MIS-C may choose to be vaccinated. If they decide to get the vaccine, CDC suggests they should consider delaying COVID-19 vaccination until they have recovered from this illness and for 90 days after the date of diagnosis of MIS-C.

11. My child has a bleeding condition (e.g., idiopathic thrombocytopenic purpura, hemophilia, etc.). Can my child get a COVID-19 vaccine?

Yes. For children with a history of Hemophilia (or other severe bleeding disorder) or platelet count less than 50,000/uL:

a. First consult with your pediatrician or specialty physician for guidance prior to vaccination. If that physician agrees that the benefit of the intramuscular (IM)
vaccination outweighs possible risks, the following steps at the time of vaccination are recommended:

i. If your child takes replacement clotting factors, then the IM vaccination should be administered as soon as feasible after the dose of the clotting factor.

ii. Nursing staff who routinely perform IM injections are preferred to administer the vaccination.

iii. An ice pack should be applied to the site before the injection.

b. After the vaccination, firm pressure should be applied over the site of the injection for 5 minutes.

12. I have read that some women have experienced menstrual irregularities after a COVID-19 vaccine. Should I be worried about this in my daughter?

At this time, there is no scientific evidence that COVID-19 vaccines themselves cause menstrual changes. Period timing and flow volume can vary due to numerous causes, including stress, illness, and age. Individual patient reports of heavier periods being a temporary side effect of the vaccine could thus be attributable to many other causes. Menstrual irregularities should not be a cause for concern about the vaccine.

13. I have heard that the COVID-19 vaccines may impact fertility. Is there any evidence for this?

There is no evidence that mRNA vaccines for COVID-19 have a negative effect on fertility. In fact, in the recent COVID-19 clinical trials, equal numbers of pregnancies occurred in the group given the vaccine as in the group given a placebo. Theories about COVID-19 vaccines impacting fertility have no scientific basis. Claims that mRNA vaccines will cause the immune system to attack genes or proteins important for reproduction are unfounded and have been refuted by reproductive scientists across the world. The American College of Obstetricians and Gynecologists, the American Society for Reproductive Medicine, and the Society for Maternal-Fetal Medicine continue to assert that COVID-19 vaccines do not affect fertility (https://www.acog.org/news/news-releases/2021/02/medical-experts-assert-covid-vaccines-do-not-impact-fertility and https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/12/vaccinating-pregnant-and-lactating-patients-against-covid-19).
14. Is the dose of COVID-19 vaccine the same for 12-15 year-olds as it is for adults?

Yes, the dose of COVID-19 vaccine given to children ages 12-15 is the same dose as is given to older children and adults. This is the dose that was tested in the clinical trial and determined to be safe and effective for children ages 12-15.

15. How does my child get an appointment?

Parents can make their child’s vaccine appointment online at www.ynhhs.org/covidvaccine or by calling the Yale New Haven Health Call Center at 833-ASK-YNHH (833-275-9644). When scheduling, you will be asked to verify your child’s age and attest to any comorbidities. Then you will be able to see the appropriate appointments for the Pfizer vaccine.

16. Do parents/guardians need to give consent?

Yes, a parent or guardian will need to give consent at the time of vaccination.

17. What should I bring to the vaccination appointment?

Eligible children (12-17 year olds) should be accompanied by a parent or legal guardian at the time of their vaccination. Parents and legal guardians should bring a form of ID and child’s insurance card if available. Masks should be worn.