COVID-19 Vaccination
General Questions and Answers
Version 4: 12/04/2020

YNHHS anticipates receiving the vaccine at our facilities by mid-December and will begin vaccinating employees immediately thereafter.

1. Which COVID-19 vaccine will be offered to employees?

   Initially, YNHHS will be offering the Pfizer vaccine, which is a 2-shot series given three weeks apart.

2. Is the COVID-19 vaccination mandatory for YNHHS employees like the flu vaccination?

   No, not at this time.

3. Which employees will be offered the vaccine first?

   We anticipate getting enough vaccine for all our employees. However, we will likely get them in batches and will prioritize first vaccinations for those involved in work that is directly relating to patient care, meaning any employee whose responsibilities require them to be in care settings, or for whom physical presence is required to support our clinical care. We will ensure that scheduling will be done in a fair, ethical and transparent way. We will be including all members of the Medical Staff (employed, faculty, or community) in our first wave of vaccinations. We are also coordinating our vaccination program with Yale Health Center, which will also receive supplies to vaccinate the non-physician healthcare workers at Yale Medicine and the University.
4. **How will I be notified if I am on the first priority list for the vaccination?**

   Employees will receive notification that they may schedule a vaccination by their work email, or by personal email, if necessary. The email notification will include a link to schedule a vaccination in MyChart. (Employees that do not currently have a MyChart account should consider setting up an account in advance of receiving the notification.) We are developing a process to contact individuals for whom we do not have an email address in our IT systems.

5. **Will vaccinations be administered at the delivery networks in a specific order?**

   Vaccination sites will be set up at all delivery networks from the beginning.

6. **How does the Pfizer vaccine work?**

   The Pfizer vaccine is a 2-shot series that is given three weeks apart. It consists of genetic material called mRNA encased in tiny particles that shuttle it into our cells. From there, it stimulates the immune system to make antibodies that protect against the virus. The Moderna vaccine, which we expect to be approved soon, works in the same way. These vaccines do not have any impact on our genes. The vaccine material breaks down in the body shortly after it is taken into our cells.

7. **Is the vaccine safe?**

   All data we have thus far indicate that the vaccine is safe. Thus far, no serious long-term side effects have occurred, and any side effects that do occur are not severe and occur within six weeks of vaccination. The FDA will continue to monitor for any rare safety issues.

8. **Can receiving the vaccination give someone COVID-19?**

   No. The vaccine does not contain live or dead versions of the virus, so it cannot give someone COVID-19.
9. How can I tell if side effects are from the vaccine or from actual COVID-19 infection?

Common side effects from the vaccine include soreness, redness and swelling at the injection site. In addition, fever, muscle aches and headaches can develop after the COVID-19 vaccine. Symptoms typically go away on their own within a couple of days. These side effects are a sign that the immune system is working.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death. No severe side effects have been reported from the clinical trials.

The vaccine does not cause respiratory symptoms or a loss of taste or smell, which are sometimes seen with a true COVID-19 infection. For these symptoms or anything apart from mild side effects, you should call the COVID-19 Call Center at 833-ASK-YNHH (option 2) between 7 am - 7 pm, 7 days a week, or an Urgent Care center if after-hours, for medical advice and possible COVID-19 testing.

10. Will the COVID-19 vaccination cost anything?

We will be offering vaccines to our employees at no cost. However, vaccine providers for the general public may be able to charge administration fees for performing vaccinations.

11. How long will the vaccine protect those that receive it?

Pfizer reports that vaccine is ninety-percent effective. While the studies haven’t indicated how long protection will last, the FDA predicts it to be effective for several months and possibly a year. Vaccine experts are continuing to study the virus and vaccine to learn more.

12. Are you immune to COVID-19 after recovering from it?

The extent to which antibodies that develop in response to SARS-CoV-2 infection are protective is still under study. If these antibodies are protective, it’s not known what antibody levels are needed to protect against reinfection. Therefore, even those who previously had COVID-19 can and should receive the COVID-19 vaccine.
13. Why should someone get the vaccine even though they are doing other things such as wearing a mask, washing their hands often and practicing social distancing?

Stopping a pandemic requires using all the tools available. Vaccines work with your immune system so your body will be ready to fight the virus and reduce or eliminate illness if you are exposed. Other steps, like covering your mouth and nose with a mask and staying at least six feet away from others, help reduce your chance of being exposed to the virus or spreading it to others.

14. Does the flu vaccine also protect you from COVID-19?

No. The coronavirus (COVID-19) and the flu are completely different. The flu vaccine does not protect you from becoming infected with COVID-19, so you should get both vaccines. One of the benefits from getting a flu vaccine in addition to the COVID-19 vaccine, is that a recent study suggested that people who received flu vaccine faced a lower risk for being hospitalized if they got COVID-19.

15. Can we stop wearing masks once vaccinations are given?

No. While the vaccine is extremely effective, a small percentage of those who receive it may not be fully protected, so we need to continue to wear masks and other PPE, social distance and use other precautions. Also, because not everyone will be vaccinated, it will take a while before COVID-19 is no longer circulating widely.

16. What if I am sick with COVID-19 or another acute respiratory illness during the time period offered?

You should wait until you are completely better and then schedule your appointment. If you have difficulty with scheduling your vaccine, contact the COVID-19 Call Center at 833-ASK-YNHH (option 2) between 7 am - 7 pm, 7 days a week.

17. What if I am on quarantine when I am offered the vaccination?

To protect others, you must wait until after your quarantine period ends to get vaccinated.
18. What if I am not available to get my vaccine during the time period offered but want it at a later date?

We expect to have adequate supplies of the vaccine for a period of several weeks after it becomes available because the state is allocating the initial supplies only to healthcare workers and skilled nursing facilities. We hope to administer first doses of vaccine to most healthcare workers within 3-4 weeks of the beginning of the vaccine campaign. If you do not take advantage of this opportunity, you may have to wait until the vaccine is widely available, which may be in the spring or summer of 2021.

19. Given the potential side effects of the vaccine, how can we vaccinate first line employees all at once? Won’t that result in several employees experiencing side effects at the same time?

We are extremely fortunate that we expect to receive COVID-19 vaccines to offer to all our health care workforce. In order to avoid side effects leading to several absences in health care workers in a single department at the same time, we will be sending out invitations in waves to stagger scheduling of vaccination appointments.

20. Should I be vaccinated if I'm pregnant or breastfeeding?

Based upon what we know at this time, pregnant women are probably at an increased risk for severe illness from COVID-19. Additionally, pregnant women with COVID-19 might be an increased risk for other adverse pregnancy outcomes, such as preterm birth and stillbirth. Pregnant women were excluded from the initial vaccine clinical trials so there are limited data at this time. At least one professional organization (Society for Maternal Fetal Medicine) at this time recommends that healthcare workers be offered the vaccine if pregnant. The CDC’s Advisory Committee on Immunization Practices (ACIP) is currently reviewing available data and guidance and we anticipate they will make recommendation soon. We will update our employees as soon as possible about specific recommendations on COVID-19 vaccines to pregnant and breastfeeding women but expect to offer it.
21. When will the vaccine be available to our patients and the general public?

The vaccine could be authorized for certain high-risk populations before the end of the year. Exactly who in the general public will qualify for these initial doses has not been decided, but groups that are at higher risk for infection, or are more vulnerable to the virus, are likely to get priority. That would include older adults and those who have underlying chronic medical conditions. Pfizer plans to ramp up production to 1.3 billion doses a year, and there are 10 other vaccines now in late-stage trials across the globe.

22. How can I learn more?

Ask your healthcare provider; call your local or state health department; or contact the Centers for Disease Control and Prevention (CDC) at 1-800-232-4636 (1-800-CDC-INFO) or visit CDC’s vaccine website: www.cdc.gov/coronavirus/2019-ncov/vaccines.

YNHHS will be updating and distributing more generally asked questions and answers as more information becomes available.