



FAQs for COVID-19 Vaccines

1. What is the difference between SARS CoV-2 and Covid-19?

SARS-CoV-2 is the name of the virus. COVID-19 is the name of the disease.

2. What is an Emergency Use Authorization (EUA)?

In an emergency, like a pandemic, it may not be possible to have all the evidence that the FDA would usually have before approving a drug, device, or a test.

When there is a declared emergency, the FDA can make a judgment that it's worth releasing something for use even without all the evidence that would fully establish its effectiveness and safety. If there's evidence that strongly suggests that patients have benefited from a treatment or test, the agency can issue an EUA to make it available.

3. Are the COVID-19 vaccines rigorously tested?

Yes. Clinical trials are evaluating investigational COVID-19 vaccines in tens of thousands of study participants to generate the scientific data and other information needed by the FDA to determine safety and effectiveness. These clinical trials are being conducted according to the rigorous standards set forth by the FDA.

4. Is the COVID-19 vaccine safe?

Before the FDA grants Emergency Use Authorization, the safety and efficacy of the vaccines will be reviewed by panels of independent experts retained by the companies; by FDA scientific staff; and by an independent panel of experts convened by the FDA.

The CDC and the FDA will continue to monitor individuals who have received the vaccine to ensure there's no evidence of even rare safety issues.

Please keep in mind that COVID-19 can be a fatal or debilitating disease, even in young, healthy people. The risks from contracting the virus are far greater than the possible small risks from receiving the vaccine

5. Should I get the vaccine if I am immunocompromised?

If you are immunocompromised or have other health conditions, please discuss whether you should receive the vaccination with your personal physician. Since none of the COVID-19 vaccines contain live virus, they generally are felt to be safe in immunocompromised patients.

6. Since I have a history of serious allergic reactions, should I get the vaccine?

There have been a few cases in the UK of individuals experiencing an allergic reaction after receiving the vaccine. If you have a history of serious allergic reactions, please discuss whether you should receive the vaccination with your personal physician.

7. What if I have an anaphylactic reaction?

To monitor for any immediate reaction, all employees are asked to stay for 15 minutes after receiving the vaccine and employees who have a prior history of anaphylaxis (due to any cause) will be monitored for 30 minutes. In the unlikely event of an anaphylactic reaction, onsite teams are prepared with the equipment and supplies to provide immediate care.

8. Is it safe for a pregnant or breastfeeding woman to get the vaccine?

There is currently limited data available on the use of this vaccine in pregnant or breastfeeding women. According to the information from Pfizer's EUA documents in the UK, if you are breastfeeding, think you may be pregnant, or are planning to have a baby, ask your doctor for advice before you receive this vaccine.

9. How do the Moderna and Pfizer vaccines work?

Pfizer and Moderna's vaccines use novel messenger-RNA technology, which uses genetic material to cause the body to create a protein from the virus. The immune system then recognizes the virus and attacks it.

Independent boards of experts looked at the placebo and vaccine participants and reported that the vaccines are 95% effective. See links at the bottom for further information.

10. Can I get COVID-19 from the vaccine?

It is not possible to get COVID-19 from vaccines. The Pfizer and Moderna vaccines use only a gene from the virus while other vaccines being studied use inactivated virus. None of these can cause COVID-19.

11. What if I have symptoms that are COVID-like (ex. headache, fatigue) on the day of my appointment?

An individual with active symptoms consistent with COVID-19 should not get the vaccine. This helps ensure a person's immune system is focused on fighting any potential illness. Based on updated CDC criteria, you are no longer required to wait 90 days to receive the vaccine if you had COVID-19. As long as you are symptom free and out of isolation, you are eligible to receive the vaccine.

12. Can I still get COVID-19 after being vaccinated?

Clinical trials showed that rates of COVID illness were reduced by about 95% in those who were vaccinated compared to those who received a placebo shot. It is rare but possible to still get infected.

13. If I have already had COVID-19, should I still get the vaccine?

Vaccination still is recommended, as the duration of protection will likely be longer. If you are no longer symptomatic and not within an isolation period for COVID-19, you may receive the vaccine if you so choose.

14. After getting the vaccine, can I still transmit and spread the SARS CoV-2 virus?

You will not be fully protected until about two weeks after the second dose of vaccine. During this time, you can still get and transmit the virus.

15. How long will it take for the vaccine to begin protecting me?

It normally takes about two to three weeks for cellular immunity to develop and several weeks for a full antibody response.

16. How long will the vaccine be effective?

The duration of protection from the vaccine is unknown, but is likely to be longer than immunity from having had COVID-19.

17. How many doses of a COVID-19 vaccine will I need?

Both Pfizer and Moderna vaccines awaiting FDA-approval will require two doses. The Pfizer vaccine requires a booster 21 days later and the Moderna vaccine requires a second dose 28 days later. The different vaccine products are not to be interchangeable. The second dose must be completed with the same vaccine brand as the first dose. Both doses are important to ensure full protection.

18. What if I am not able to get my second dose at the 28-day point? Is there flexibility with this time frame?

The second dose may be administered 28 days after the first original dose. However, the second dose can be given up to 4 days early (24 days after the first original dose), or as soon as possible if 28 days have passed since the first dose.

19. Will the vaccine be effective if the second dose is missed?

No. The vaccine will not be effective unless both vaccines are administered.

20. If I get the vaccine, am I entered into a database for tracking purposes?

If you receive the COVID-19 vaccine, your record of vaccine receipt will be reported, as required, to the Ohio Department of Health's vaccine registry.

21. When will Kettering Health Network receive the COVID-19 vaccine?

Kettering Health Network received its initial shipment of the Moderna COVID-19 vaccine the week of December 22. This allocation is to be used for those who routinely work with COVID-19 patients. We are working with the state of Ohio to better understand how the vaccine will be allocated to other personnel.

22. What are the side effects of the COVID-19 vaccine?

Both Pfizer and Moderna have stated that some Phase III clinical trial participants experienced mild-to-moderate side effects. The researchers stated that the vaccine may cause mild flu-like side effects, and about 1-15% of people will develop symptoms such as sore arms, muscle aches, and fever. These symptoms usually resolve within 24 hours. Medical experts are recommending that individuals take ibuprofen or acetaminophen before getting the vaccine. This will help to significantly alleviate the side effects. Study participants did not take pain relievers before their vaccines.

As a precaution, eligible employees are encouraged to receive the vaccine on a day adjacent to a day off, to better recover from any possible side effects.

23. What are the long-term side effects of getting the vaccine?

There have been no significant long-term side effects reported so far, after about 6 months of clinical trials.

24. Do the vaccine manufacturers have any liability for near- or long-term side effects?

While the vaccine manufacturers are shielded from liability, there is a federal program called the National Vaccine Injury Program which handles such claims.

25. Should I social distance and wear a mask after getting the vaccine?

Stopping a pandemic requires using all the tools available. It is still recommended to wear a mask and practice social distancing after receiving the vaccine. Public Health authorities will determine when this is no longer required. Vaccines work with your immune system, so your body will be ready to fight the virus 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. Together, COVID-19 vaccination and following CDC's recommendations [to protect yourself and others](#) will offer the best protection from COVID-19.

26. How much will the vaccine cost?

There is no charge to get the COVID-19 vaccine that is distributed from the Kettering Health Network allocation.

27. Are there other vaccines being studied?

AstraZeneca and Johnson & Johnson/Janssen, are also working on a vaccine but using different technology for delivering the viral genes that can produce viral proteins to activate the immune system.

Novavax and the Sanofi/GlaxoSmithKline are working on a vaccine that uses proteins themselves to trigger an immune response. All are close to completing their testing. For up-to-date information on all the vaccines, please see testing of

their shots. To track the vaccine trials, please see this [updated tracker](#) in the New York Times.

28. Will getting the vaccine end the pandemic?

In the short term, no. The soonest that COVID-19 vaccines could become widely available to the public would be in the spring. But if effective vaccines become available—and if most people get them—the spread of the pandemic could drastically shrink. This means we are one giant step closer to getting our lives back to normal.

29. What if an employee is not able to report to work due to a reaction to the COVID-19 vaccine?

Employees are encouraged to receive the vaccine when they will be off the next day to minimize the need to call off related to a vaccine reaction. Prior to receiving the COVID-19 vaccine, employees will be educated on the potential side effects/risk and will sign a consent. At this time, participation is voluntary.

If employees are unable to work because of a reaction to the COVID-19 vaccine, they should report the absence to the department using normal department call-in procedures and call the Employee Health Call Center at (937) 395-8900 to report the reaction.

The following guidelines apply to time and attendance:

When employees report absences related to COVID-19 vaccine reactions using normal department call-in procedures, it will be documented in accordance with current attendance guidelines, but we will hold on issuing discipline related to the absence.

Should an employee no call/no show, discipline may be issued as outlined in the HR-KHN Conduct and Discipline policy attendance guidelines.

PTO should be used to cover missed work time.

Absences due to COVID-19 vaccine reactions are considered COVID-19-related and will not impact COVID-19 capacity staffing incentives already earned for that pay period.

30. Other Helpful Resources

Learn all about COVID-19 vaccines in development and vaccination planning in the United States and Ohio.

- [CDC General COVID-19 Vaccine Information](#)
- [FDA COVID-19 Vaccine Information](#)
- [Ohio Department of Health Vaccine Information](#)
- [Pfizer Coronavirus Vaccine](#)
- [Moderna COVID-19 Vaccine](#)

1. What if the scheduling link doesn't work?

If you are a Kettering Health Network employee or provider, try logging in with your badge number using the "k" or "dr."

2. If you are a Kettering Transportation Services or Alternate Solutions employee, use your email address for logging in to access the schedule.

If you are still unable to get the link to work, contact iSupport at X44500 or (937) 384-4500

3. What if I didn't receive an email informing me I'm eligible to schedule my vaccine appointment?

If you completed the vaccine survey prior to the 12/21 noon deadline, didn't receive an email, and believe you should be included in phase 1, please complete the appeals form [linked here](#).

4. What if I didn't complete the initial vaccine survey or want to change my answers?

You can still complete the vaccine survey or update your answers by [clicking here](#).

5. What if I am unable to schedule my appointment based on the current appointment times?

If you have been approved to get a vaccine during phase 1 you are strongly encouraged to schedule your appointment at any of the locations where there is a clinic.

6. What if I am unable to make my scheduled appointment?

If you are late for your schedule time, arrive at the clinic and the team will do what they can to work you into the schedule. You may have to wait longer than if you had arrived on time.

If you need to reschedule or cancel your appointment, please use MyChart to do so. If you scheduled your appointment as a guest, please use the original scheduling link to go back in for rescheduling your appointment.

7. What if the appointments are full when I go to schedule mine?

Vaccine clinics are being held at various sites. Please consider an alternate site where you can receive the vaccine.

8. What if I have an illness (for example strep throat)? should I still receive my vaccine at my scheduled appointment?

Contact your primary care physician who is treating your illness for guidance on when you should receive the vaccine.

9. What if I have symptoms that are COVID-like (ex: headache, fatigue) on the day of my appointment?

An individual with active symptoms consistent with COVID-19 should not get the vaccine. This helps ensure a person's immune system is focused on fighting any potential illness.

If an individual tests positive, they should wait 90 days before getting the vaccine. If an individual tests negative, they can get vaccinated 1-2 weeks after symptoms go away. Given our current vaccine supply, if you work around patients, you will have access to the vaccine when clinically appropriate.

10. What should I do if I test positive for COVID-19 after my first vaccine dose, but before my second dose?

There are no recommendations to restart the vaccine series. The second dose should be given on schedule, unless you are still symptomatic or in isolation from your COVID-19 infection. If you are still symptomatic or in isolation at the time of your scheduled second dose, please use MyChart to reschedule your appointment.

11. How can I verify my appointment time and location?

If you went through MyChart registration, you will be able to verify your appointment date, time, and location in MyChart.

12. What if I don't typically log in remotely to my email? How can I log in to access the link from home?

Visit ketteringhealth.org and click on "Employees Only" in the top left corner. Scroll down and click on the box labeled "Outlook Email Access."

13. Who does the scheduling email come from?

If you were approved for wave 1, you will receive a scheduling link from COVIDVaccineScheduling@ketteringhealth.org

14. What confirmation information will be received once I schedule the vaccine appointment?

The only two intentional notifications Kettering Health Network is sending are an email confirmation once your appointment is scheduled online, and then a text message you will receive two days prior to your appointment. A **sample** text message is included below:

"Kettering Health: You have an appointment for your COVID vaccine on 12/29 at 3:10 PM. Please come to 3535 PENTAGON BLVD,Beavercreek OH 45431 on time and bring your employee badge. Please wear something that allows easy access to your arm. Also, be prepared to schedule your second dose during the appointment."