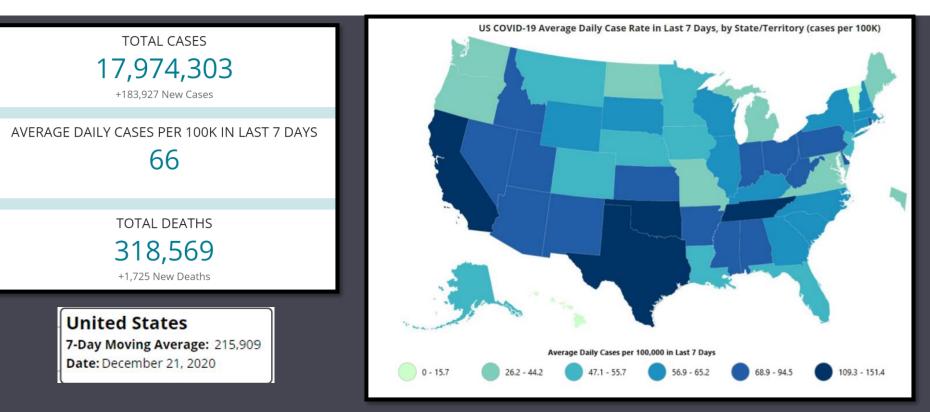


COVID-19 TOWN HALL

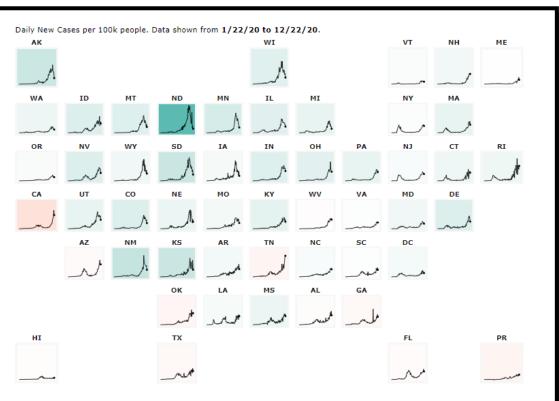
December 23rd

NATIONAL CASES





DAILY CONFIRMED NEW CASES (3 DAY MOVING AVERAGE)



Rt = Effective Reproduction Rate

Arizo	na-	¥ Torot O Share
Current R _t	Cases	Tests
1.06	461,343	4,658,553
Effective Re	production Rate · R _t	
		ne infected by an infectious person. If it's above 1.0, COVID-19 will spread quickly. If it's below
1.0, infections wi	Il slow. Learn More.	
.5		
.0	Shelter End	nded
	Shelter Started Reopening	
.5	Sheker Started	
.0 0.		1.06

Arizona Cases by Day





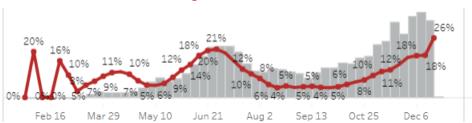
Laboratory Tests



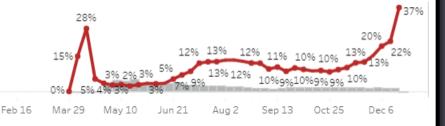
People tested for COVID-19 and percent positive by week

Total % Positive COVID-19 Diagnostic Tests: 12.2%

Percent positive is the number of people with a positive result in Electronic Laboratory Reporting (ELR), out of all people with COVID-19 testing reported via ELR in AZ. Diagnostic tests include PCR and antigen testing.



Total % Positive COVID-19 Serology Tests: 8.0%





COVID-19 Task Force -FAQ Updates



Q: Will the Board of Pharmacy continue to issue temporary work authorizations for pharmacists, interns, and technicians?

A: Yes, the Board of Pharmacy will continue to issue <u>temporary work authorizations</u> during the Declaration of Emergency in Arizona. Temporary work authorizations will expire on the date the Declaration of Emergency is lifted.

NEN

Q: I am a pharmacist who has been granted temporary authorization to practice pharmacy in Arizona. How do I obtain certification to perform immunizations?

A: Pharmacists with temporary authorization to work in Arizona must submit the <u>Application for Certification to</u> <u>Perform Immunizations</u> and provide supporting documentation. If approved, the temporary work authorization and certification to perform immunizations will expire on the date the Declaration of Emergency is lifted.



Q: I am a pharmacist or pharmacy intern who applied for certification to perform immunizations. May I administer immunizations prior to obtaining approval from the Board of Pharmacy?

A: No. The Board of Pharmacy must approve the application prior to the licensee performing immunizations. After submitting the required application and documents, please monitor the online verification site. If approved, you will find an indicator under "Immunizer" (see below).

Verification link: https://azbop.igovsolution.net/online/Lookups/AZIndividual_Lookup.aspx

-	and the second sec	And State Street	ETHEM.	0000	CHINADA			110gBm	Horological	(
Wan	Totals .	Prives	Filmes -	Plan .	1 Part 1	Pliet .		Filmel	Han-Darpfin Frans S	
		Harmanit	Drew .	14.75.5514	10.91.31121		-		10	/
Pegester 20 Records 2	14.004.0								Pages 13	



Q: Can pharmacy interns administer immunizations under the supervision of a healthcare professional that is not an immunization-certified pharmacist?

A: No. Per A.R.S. 32-1974(K), "a pharmacy intern who is certified by the board to administer immunizations and vaccines pursuant to this section may do so only in the presence and under the immediate personal supervision of a pharmacist who is certified as prescribed in this section." Further guidance may be forthcoming from the Arizona State Board of Pharmacy.



Q: My immunization certification has expired/lapsed. What is required to reinstate my certification?

A: You must submit the <u>Application for Certification to Perform Immunizations</u>. If you were previously certified to perform immunizations in Arizona:

- Indicate your previous certification on your application; Board staff will cross-reference your application to your
 previously held certification. In addition, you will be required to submit documentation of:
 - Current CPR certification as specified in A.A.C. R4-23-411(D)(3).
 - If your CPR card expired on or after March 11, 2020, the requirement to renew your CPR certification is waived for the duration of the Declaration of Emergency in Arizona. If your CPR certification expired prior to March 11, 2020, you are required to renew it.
 - Two (2) contact hours related to administering immunizations, vaccines, and emergency medications as specified in A.A.C. R4-23-204(A)(2)(a).
- If your expired/lapsed certification is not located in the Board's database, you will be required to submit documentation of:
 - Completion of a training program as specified in A.A.C. R4-23-411(E).
 - Current CPR certification as specified in A.A.C. R4-23-411(D)(3).
 - If your CPR card expired on or after March 11, 2020, the requirement to renew your CPR certification is waived for the duration of the Declaration of Emergency in Arizona. If your CPR certification expired prior to March 11, 2020, you are required to renew it.
 - Two (2) contact hours related to administering immunizations, vaccines, and emergency medications as specified in A.A.C. R4-23-204(A)(2)(a).



Q: My CPR certification has expired. Am I required to renew it?

A: If your CPR card expired on or after March 11, 2020, the requirement to renew your CPR certification is waived for the duration of the Declaration of Emergency in Arizona. If your CPR certification expired prior to March 11, 2020, you are required to renew it.

Q: I am an immunizing pharmacist and I will not be able to renew my CPR certification; can I still immunize?

A: Yes, the Board of Pharmacy will allow those pharmacists with CPR certificate expiring to during the Health Emergency to immunize for up to six months after the Health Emergency is lifted.



Q: Can employers force licensees to administer COVID-19 vaccines?

A: This business decision does not fall within the Board of Pharmacy's jurisdiction.

HHS PREP ACT

Q: May Arizona-licensed pharmacists, pharmacy interns, and pharmacy technicians follow guidance outlined in the HHS PREP Act?

A: Yes. Pharmacists, pharmacy interns, and pharmacy technicians may follow expanded scope guidance outlined in the HHS Prep Act.

- <u>Guidance for Licensed Pharmacists and Pharmacy Interns Regarding COVID-19 Vaccines and Immunity under the</u> PREP Act (09/03/2020)
- Guidance for Licensed Pharmacists, COVID-19 Testing, and Immunity under the PREP Act (04/08/2020)
- <u>Guidance for PREP Act Coverage for Qualified Pharmacy Technicians and State-Authorized Pharmacy Interns for</u> <u>Childhood Vaccines, COVID-19 Vaccines, and COVID-19 Testing (10/20/2020)</u>



NEW

Q: I am a pharmacy technician interested in administering immunizations as outlined in the HHS PREP Act. Do I need to apply for certification to perform immunizations with the Board of Pharmacy?

A: Not at this time. However, you must maintain all required documentation at the pharmacy as outlined in the <u>Guidance for PREP Act Coverage for Qualified Pharmacy Technicians and State-Authorized Pharmacy Interns for</u> <u>Childhood Vaccines, COVID-19 Vaccines, and COVID-19 Testing (10/20/2020).</u> The documentation shall be made available upon request from the Board of Pharmacy or other regulatory agency.

RECORDKEEPING

Q: I am a pharmacist or pharmacy intern certified to perform immunizations. I plan to work at a mass immunization site. What are the recordkeeping requirements?

A: Please refer to A.R.S. 32-1974(F) and <u>Executive Order 2020-57</u>. Further guidance may be forthcoming from the Arizona State Board of Pharmacy.

Q: Should healthcare organizations document movement of COVID-19 vaccine within and outside of the organization?

A: Chain of custody and transfer of ownership should be documented to comply with recordkeeping requirements and facilitate identification of specific lot numbers in the event of a product recall.

COVID-19 Vaccines

mRNA Vaccines

COVID-19 VACCINES – SUBMITTED EUA'S

Pfizer BioNTech:

- Submitted for EUA: 11/20/20
- FDA approved EUA : 12/11/20
- <u>CDC/ACIP recommended: 12/13/20</u>
- 95% effective
- Vials must be kept frozen between (-112°F to -76°F) and protect from light.
- Pfizer BioNTech Clinical Website

Moderna:

- Submitted for EUA: 11/30/20
- FDA approved EUA: 12/18/20
- <u>CDC/ACIP recommended</u>: 12/19/20
- 94.5% effective
- Vials must be kept frozen between (-13° to 5°F) and protect from light.
 - CDC's Moderna Clinical Website

ACIP Authorized Age Groups & Administration

Pfizer-BioNTech

- Ages ≥16 years
- Dose: o.3 ml
- Interval: (21 days) apart
- MDV: 5 doses per vial**
- Diluent: 0.9% sodium chloride-PF
- Minimum Order: 975 doses

<u>Moderna</u>

- Ages ≥18 years
- Dose: 0.5 ml
- Interval: (28 days) apart
- MDV: 10 doses per vial
- Diluent: None
- Minimum Order: 100 doses
- Children/adolescents outside of these age groups should not receive COVID-19 vaccination at this time.
- 2nd doses administered within ≤4 days from the recommended date are considered valid; however, doses administered earlier do not need to be repeated.
- 2nd dose should be administered as close to the recommended interval as possible but there is no maximum interval between the first and second dose for either vaccine.

Overfill- Pfizer BioNTech Vaccine

Q: Some vials of the Pfizer-BioNTech COVID-19 vaccine have contained extra product after five doses is obtained. Can the extra be used?

A: FDA is aware of the issue and working with Pfizer to determine the best path forward, and will share additional updates as we have them. At this time, given the public health emergency, FDA is advising that it is acceptable to use every full dose obtainable (the sixth, or possibly even a seventh) from each vial, pending resolution of the issue. However, since the vials are preservative free, it is critical to note that any further remaining product that does not constitute a full dose should not be pooled from multiple vials to create one.



Interchangeability with Other Products

- ACIP does **NOT state a product preference.**
- mRNA COVID-19 vaccines are <u>NOT interchangeable</u> with each other or with other COVID-19 vaccine products.
- Series should be completed with the **SAME product.**
 - However, if two doses of different mRNA COVID-19 vaccine products are inadvertently administered, no additional doses of either product are recommended at this time.

Coadministration

The mRNA vaccine series should be administered alone, with a minimum interval of 14 days before or after administration with any other vaccines.

 If mRNA COVID-19 vaccines are inadvertently administered within 14 days of another vaccine, doses do not need to be repeated for either vaccine.

Persons with History of SARS-CoV-2

Vaccination should be offered to persons regardless of history of prior symptomatic or asymptomatic SARS-CoV-2 infection.

- Data from phase 2/3 clinical trials suggest vaccination safe and likely efficacious in these persons.
- Viral or serologic testing for acute or prior infection, respectively, is not recommended for the purpose of vaccine decision-making.

Persons with known Current SARS-CoV-2 Infection

<u>Vaccination should be deferred</u> until recovery from acute illness (if person had symptoms) <u>AND</u> criteria have been met to discontinue isolation.

- No minimal interval between infection and vaccination.
- Current evidence suggests reinfection uncommon in the 90 days after initial infection, and thus persons with documented acute infection in the preceding 90 days may defer vaccination until the end of this period, if desired.

Persons Who Previously Received Passive Antibody Therapy For COVID-19

Vaccination should be deferred for at least 90 days to avoid interference of the treatment with vaccine-induced immune responses.

- Currently no data on safety or efficacy of COVID-19 vaccination in persons who received monoclonal antibodies or convalescent plasma as part of COVID-19 treatment.
- Based on estimated half-life of therapies and evidence suggesting reinfection is uncommon within 90 days of initial infection.

Persons With Underlying Medical Conditions

Vaccine may be administered to persons with underlying medical conditions who have no contraindications to vaccination

 Phase 2/3 clinical trials demonstrate similar safety and efficacy profiles in persons with underlying medical conditions, including those that place them at increased risk for severe COVID-19, compared to persons without comorbidities

Immunocompromised Persons

Persons with HIV infection, other immunocompromising conditions, or who take immunosuppressive medications or therapies might be at increased risk for severe COVID-19 and **may still receive COVID-19 vaccine** unless otherwise contraindicated.

 Individuals should be counseled about: Unknown vaccine safety and efficacy profiles in immunocompromised persons; Potential for reduced immune responses; Need to continue to follow all current guidance to protect themselves against COVID-19

Pregnancy

If a woman is part of a group (e.g., healthcare personnel) who is recommended to receive a COVID-19 vaccine and is pregnant, <u>she may choose to be vaccinated.</u>

- No data on the safety of COVID-19 vaccines in pregnant women however animal developmental and reproductive toxicity (DART) studies are ongoing; Studies in humans are ongoing and more planned
- mRNA vaccines are not live vaccines & they are degraded quickly by normal cellular processes and don't enter the nucleus of the cell
- Pregnant women are at increased risk of severe illness (ICU admission, mechanical ventilation and death). Might be an increased risk of adverse pregnancy outcomes, such as preterm birth

Statements from **SMFM** and **ACOG**

Recommendations for Vaccinated People

- Protection from vaccine is not immediate; vaccine is a 2-dose series and <u>will take 1 to 2</u> weeks following the second dose to be considered fully vaccinated.
- Given the currently limited information on how well the vaccine works in the general population; how much it may reduce disease, severity, or transmission; and how long protection lasts, <u>vaccinated persons should continue to follow all current guidance to protect themselves and others, including</u>:
 - Wearing a mask
 - Staying at least 6 feet away from other
 - Avoiding crowds
 - Washing hands often
 - Following CDC travel guidance; quarantine guidance after an exposure to someone with COVID-19; Following any applicable workplace or school guidance

Contraindications and Precautions

- Severe allergic reaction (e.g., anaphylaxis) to any component of the COVID- 19 vaccine is a <u>contraindication</u> to vaccination.
- A severe allergic reaction to any vaccine or injectable therapy (IM, IV, or SC) is a <u>precaution</u> to vaccination.
- Vaccine providers should observe patients after vaccination to monitor for the occurrence of immediate adverse reactions:
 - Persons with a history of anaphylaxis: 30 minutes
 - All other persons: 15 mins
- Appropriate medical treatment used to manage immediate allergic reactions <u>must be immediately available</u> in the event that an acute anaphylactic reaction occurs.

Vaccine Components

OVID-19 Va	ccine Components			
Description	Pfizer-BioNTech COVID-19 vaccine	Moderna COVID-19 vaccine		
mRNA	Nucleoside-modified mRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2	Nucleoside-modified mRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2		
	2[(polyethylene glycol)-2000]-N, N-ditetradecylacetamide	Polyethylene glycol (PEG) 2000 dimyristoyl glycerol (DMG)		
Linida	1,2-distearoyl-sn-glycero-3-phosphocholine	1,2-distearoyl-sn-glycero-3-phosphocholine		
Lipids	Cholesterol	Cholesterol		
	(4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl) bis(2-hexyldecanoate)	SM-102 (Proprietary to Moderna)		
	Potassium chloride	Tromethamine		
Calka	Monobasic potassium phosphate	Tromethamine hydrochloride		
Salts, sugars, buffers	Sodium chloride	Acetic acid		
bullers	Dibasic sodium phosphate dihydrate	Sodium acetate		
	Sucrose	Sucrose		

There are no preservatives and no latex in the stoppers of either product

Risk Assessment for mRNA COVID-19 Vaccination

<u>When assessing a person's history of allergic reaction to a vaccine or injectable therapy,</u> the following considerations can be used to help the provider:

- 1. Type of reaction and symptoms (e.g., whether symptoms were generalized and consistent with anaphylaxis)
- 2. For a reaction to a medication, whether the medication was administered by injection or another route
- 3. Whether the reaction required use of epinephrine (EpiPen[®], etc.) or resulted in advanced medical care, (e.g., emergency room visit, hospitalization)
- 4. How long ago the reaction occurred and whether the same vaccine or medication was subsequently administered without symptoms
- 5. Whether the patient has been evaluated by an allergist-immunologist and the diagnosis has been confirmed

Algorithm for the triage of persons presenting for mRNA **COVID-19 vaccine**

MAY PROCEED WITH VACCINATION PRECAUTION TO VACCINATION CONTRAINDICATION TO VACCINATION CONDITIONS CONDITIONS

CONDITIONS

- Immunocompromising conditions ٠
- Pregnancy
- Lactation

ACTIONS

CONDITIONS

ALLERGIES

- Additional information provided*
- 15 minute observation period

ALLERGIES

- · History of food, pet, insect, venom, environmental, latex, or other allergies not related to vaccines or injectable therapies
- History of allergy to oral medications (including the oral equivalent of an injectable medication)
- · Non-serious allergy to vaccines or other injectables (e.g., no anaphylaxis)
- Family history of anaphylaxis
- Any other history of anaphylaxis that is not related to a vaccine or injectable therapy

ACTIONS

- · 30 minute observation period: Persons with a history of severe allergic reaction (e.g., anaphylaxis) due to any cause
- 15 minute observation period: Persons with allergic reaction, but not anaphylaxis

ACTIONS

- Risk assessment •
- Potential deferral of vaccination .

Moderate/severe acute illness

• 15 minute observation period if vaccinated

ALLERGIES

- History of severe allergic reaction (e.g., anaphylaxis) to another vaccine (not including mRNA COVID-19 vaccines[†])
- History of severe allergic reaction (e.g., anaphylaxis) to an injectable therapy

ACTIONS:

- Risk assessment
- Potential deferral of vaccination .
- 30 minute observation period if vaccinated •

ALLERGIES

None

ACTIONS

N/A

History of severe allergic reaction (e.g., anaphylaxis) to any component of an mRNA COVID-19 vaccinet

ACTIONS

Do not vaccinate

Screening Tool

Pre-Vaccination Checklist for COVID-19 Vaccines questions Patient Name For vaccine recipients: The following questions will help us determine if there is Age any reason you should not get the COVID-19 vaccine today. If you answer "yes" to any question, it does not necessarily mean you should not be vaccinated. It just means additional questions may be asked. If a question is not clear, please ask your healthcare provider to explain it. Don't Yes No know 1. Are you feeling sick today? 2. Have you ever received a dose of COVID-19 vaccine? If yes, which vaccine product? Pfizer Moderna Another product 3. Have you ever had a severe alleroic reaction (e.g., anaphylaxis) to something? For example, a reaction for which you were treated with epinephrine or EpiPen*. or for which you had to go to the hospital? Was the severe allergic reaction after receiving a COVID-19 vaccine? · Was the severe allergic reaction after receiving another vaccine or another injectable medication? 4. Have you received passive antibody therapy (monoclonal antibodies or convalescent serum) as treatment for COVID-19? 5. Have you received another vaccine in the last 14 days? 6. Have you had a positive test for COVID-19 or has a doctor ever told you that you had COVID-19? 7. Do you have a weakened immune system caused by something such as HIV infection or cancer or do you take immunosuppressive drugs or therapies? 8. Do you have a bleeding disorder or are you taking a blood thinner? 9. Are you pregnant or breastfeeding?

Pre-Vaccination Checklist for COVID-19 Vaccines

Clinical Consideration Questions

Responses to these questions are not (on their own) contraindications or precautions to vaccination. However, healthcare professionals should be prepared to discuss information and options with patients based on their responses to the following questions.

Have you received another vaccine in the last 14 days?

COVID-19 vaccine series should be administered alone, with a minimum interval of 14 days before or after administration with other vaccines. This recommendation is based on the lack of data on the safety and efficacy of mRNA COVID-19 vaccines administered simultaneously with other vaccines.

Have you had a positive test for COVID-19 or has a doctor ever told you that you had COVID-19?

Vaccination should be offered to persons regardless of history of prior symptomatic or asymptomatic SARS-CoV-2 infection. Vaccination of persons with known current SARS-CoV-2 infection should be deferred until the person has recovered from the acute illness (if the person had symptoms) and criteria have been met for them to discontinue isolation.

Persons with documented acute SARS-CoV-2 infection in the preceding 90 days may delay vaccination until near the end of this period, if desired, because current evidence suggests reinfection is uncommon during this time.

Viral testing to assess for acute SARS-CoV-2 infection or serologic testing to assess for prior infection solely for the purposes of vaccine decision-making is not recommended.

Do you have a weakened immune system caused by something such as HIV infection or cancer or do you take immunosuppressive drugs or therapies?

Persons with HW infection or other immunocompromising conditions, or who take immunosuppressive medications or therapies might be at increased risk for severe COVID-19. RMAR COVID-19 vaccines may be administered to persons with underlying medical conditions who have no contraindications to vaccination. However, they should be counseled about the unknown vaccine safety profile and effectiveness in immunocompromised populations, as well as the potential for reduced Immune responses and the need to continue to follow all current guidance to protect themselves against COVID-19, including wearing a mask, social distancing, and washing hands frequently.

Do you have a bleeding disorder or are you taking a blood thinner?

COVID-19 vaccine may be given to these patients, if a physican familiar with the patient's bleeding risk determines that the vaccine can be administered intransucularly with reasonable safety. ACIP recommends the following technique for intransucular vaccination in patients with bleeding disorders or taking blood thinners a fine-gauge needle (23-gauge or smaller caliber) should be used for the vaccination, followed by thim pressure on the site, without rubbing for at least 2 minutes.

Are you pregnant or breastfeeding?

If pregnant people are part of a group that is recommended to receive a COVID-19 vaccine (e.g., healthcare personnel), they may choose to be vaccinated. For pregnant people seeking guidance in making a decision, pregnant people and their healthcare providers should consider the level of COVID-19 community transmission, the patient's personal risk of constraining covID-19, the risks of COVID-19 to the patient and potential risks to the fetus, the efficacy of the vaccine, the side effects of the vaccine, and the lack of data about the vaccine during pregnancy.

A lactating person who is part of a group recommended to receive a COVID-19 vaccine (e.g., healthcare personnel) may choose to be vaccinated. There are no data on the safety of COVID-19 vaccines in lactating people or the effects of mRNA COVID-19 vaccines on the breastfer infrant or milk production/exercision.

CDC Interim Considerations: Preparing for the Potential Management of Anaphylaxis at COVID-19 Vaccination Sites

Anaphylaxis clinical signs and symptoms:

- <u>Respiratory</u>: sensation of throat closing, stridor (high-pitched sound while breathing), shortness of breath, wheeze, cough
- <u>Gastrointestinal</u>: nausea, vomiting, diarrhea, abdominal pain
- <u>Cardiovascular</u>: dizziness, fainting, tachycardia (abnormally fast heart rate), hypotension (abnormally low blood pressure)

• <u>Skin/mucosal</u>: generalized hives, itching, or swelling of lips, face, throat If a patient develops itching and swelling confined to the injection site, the patient should be observed closely for the development of generalized symptoms. If symptoms are generalized, epinephrine should be administered, and EMS should be sought.

Management of Anaphylaxis

- 1. Rapidly assess airway, breathing, circulation, and mentation (mental activity).
- 2. Call for emergency medical services.
- 3. Place the patient in a supine position (face up), with feet elevated, unless upper airway obstruction is present, or the patient is vomiting.
- 4. Epinephrine is the first-line treatment for anaphylaxis and should be administered ASAP
 - Adults: administer a 0.3 mg IM in the mid-outer thigh. (Auto injectors preferred)
 - Repeat every 5-15 minutes (or earlier) as needed to control symptoms while waiting for EMS
 - There are no contraindications to epinephrine administration during anaphylaxis
- 5. Antihistamines and bronchodilators are not first-line treatments for anaphylaxis but can help provide relief for hives and itching & respiratory distress. Only administer after epinephrine in a patient with anaphylaxis.
- 6. Report to VAERS

Medications and Supplies for Assessing and Managing Anaphylaxis

Should be available at all sites	Include at sites where feasible			
Epinephrine prefilled syringe or autoinjector*	Pulse oximeter			
H1 antihistamine (e.g., diphenhydramine) ⁺	Oxygen			
Blood pressure cuff	Bronchodilator (e.g., albuterol)			
Stethoscope	H2 antihistamine (e.g., famotidine, cimetidine)			
Timing device to assess pulse	Intravenous fluids			
	Intubation kit			
	Adult-sized pocket mask with one-way valve (also known as cardiopulmonary resuscitation (CPR) mask)			

*COVID-19 vaccination sites should have at least 3 doses of epinephrine on hand at any given time. †Antihistamines may be given as adjunctive treatment and should not be used as initial or sole treatment for anaphylaxis.

Adverse Reactions (Side Effects)

Pfizer BioNTech

- Pain at injection site (84.1%)
- Fatigue (62.9%)
- Headache (55.1%)
- Muscle pain (38.3%)
- Chills (31.9%)
- Joint pain (23.6%)
- Fever (14.2%)
- Injection site swelling (10.5%)
- Injection site redness (9.5%)
- Nausea (1.1%)

Depending on vaccine product, age group, and vaccine dose:

- ~ 80–89% of vaccinated persons develop at least one local symptom
- ~55–83% develop at least one systemic symptom following vaccination.

<u>Moderna</u>

- Pain at injection site (92%)
- Fatigue (70%)
- Headache (64.7%)
- Muscle pain (61.5%)
- Chills (45.4%)
- Joint pain (46.4%)
- Fever (15.5%)
- Injection site swelling (14.7%)
- Injection site redness (10%)
- Nausea/Vomiting (23%)

Thawing Frozen Vaccine

Pfizer BioNTech

» Thawing Frozen Vaccine

- Vaccine may be thawed in the refrigerator or at room temperature.
- Refrigerator: Between 2°C and 8°C (36°F and 46°F)
 - 25 to 195 vials may take 2 to 3 hours to thaw in the refrigerator.
 - Fewer number of vials will take less time.

- Room temperature (up to 25°C [77°F]) between 30 minutes and 2 hours
- Vials at room temperature must be mixed within 2 hours or returned to the refrigerator.
- Do NOT refreeze thawed vaccine.

Moderna

>> Thawing Frozen Vaccine

- Vaccine may be thawed in the refrigerator or at room temperature. Do NOT refreeze thawed vaccine.
- Refrigerator: Between 2°C and 8°C (36°F and 46°F) for 2 hours and 30 minutes

- Room temperature: Between 15°C and 25°C (59°F and 77°F) for 1 hour
- Vials that have not been punctured may be kept between 8°C and 25°C (46°F and 77°F) for up to 12 hours.

Pfizer BioNTech

Prepare the Vaccine Follow aseptic technique. Perform hand hygiene before vaccine preparation, between patients, when changing gloves (if worn), and any time hands become soiled.* Remove vaccine from the freezer or refrigerator. Allow vaccine to come to room temperature. Vials can be held at room temperature for up to 2 hours before mixing. After 2 hours, return unmixed vials to the refrigerator. Before mixing, check the expiration dates of the vaccine and diluent. NEVER use expired vaccine or diluent. H With the vaccine at room temperature, gently invert vial 10 times. Do not shake the vial. If the vial is shaken, discard the vaccine. The vaccine is white to off-white in color and may contain opaque particles. Do not use if liquid is discolored. Using a new, sterile alcohol prep pad for each vial, wipe off the stoppers of the diluent and vaccine vials. Using a 21-gauge (or narrower) needle, withdraw 1.8 mL of 0.9% sodium chloride (normal saline, preservative-free) into a mixing syringe. Discard diluent vial and any remaining diluent. Do NOT use bacteriostatic normal saline or other diluents to mix the vaccine. Inject 1.8 mL 0.9% sodium chloride (normal saline, preservative-free) diluent into the vaccine vial. Using the mixing syringe, remove 1.8 mL of air from the vaccine vial to equalize the pressure in the vaccine vial. Gently invert the vial containing vaccine and diluent 10 times. The vaccine will be off-white in color. Do not use if discolored or contains particulate matter. Do not shake. If the vial is shaken, discard the vaccine. Note the date and time the vaccine was mixed on the vial. Keep mixed vaccine at room temperature (2°C to 25°C [36°F to 77°F]) and administer within 6 hours. Discard any unused vaccine after 6 hours. Do not return to refrigerator or freezer storage.

Ø

Pfizer BioNTech

Assess recipient status:	E X
Screen for contraindications and precautions. Review vaccination history.	
Ensure staff has the correct PPE before administering vaccines and implement policies for the use of face coverings for vaccine recipients older than 2 years of age (if tolerated).	
Choose the correct equipment, including the correct needle size. Use a new, sterile needle and syringe for each injection.	
Cleanse the stopper on the vial of mixed vaccine with a new, sterile alcohol prep pad. Withdraw 0.3 mL of nixed vaccine into the syringe. Ensure the prepared syringe is not cold to the touch.	0.3 mL
Remove any air bubbles with the needle still in the vial to avoid loss of vaccine. Use the same needle [*] to withdraw and administer the vaccine, unless contaminated or damaged.	and the second
Administer the vaccine immediately by intramuscular (IM) injection in the deltoid muscle.	Å
Observe recipients after vaccination for an immediate adverse reaction: Persons with a history of anaphylaxis: 30 minutes All other persons: 15 minutes	

Moderna

» Prepare and Administer the Vaccine

Assess recipient status:

- Screen for contraindications and precautions.
- Review vaccination history.

Follow aseptic technique. Perform hand hygiene before vaccine preparation, between patients, when changing gloves (if worn), and any time hands become soiled.*

Unpunctured vials: Check the expiration date. Never use expired vaccine.

Punctured vials: Check the beyond-use time. Never use vaccine after the beyond-use time.

With the vial upright, gently swirl the vaccine. Do NOT shake. If the vial is shaken, contact the manufacturer.

Note: Gently swirl the vaccine before withdrawing subsequent doses.

Examine the vaccine. It should be white to offwhite in color and may contain white particles. Do not use if liquid contains other particulate matter or is discolored.

Using a new, sterile alcohol prep pad, cleanse the stopper of the multidose vaccine vial.

Choose the correct equipment, including the correct needle size. Use a new, sterile needle and syringe for each injection.







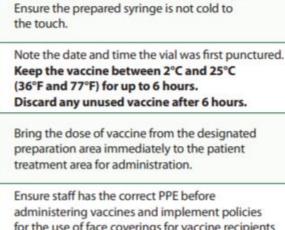






A





Withdraw 0.5 mL of vaccine into the syringe,†

for the use of face coverings for vaccine recipients older than 2 years of age (if tolerated).

Administer the vaccine immediately by intramuscular (IM) injection in the deltoid muscle.

Observe recipients after vaccination for an immediate adverse reaction:

- Persons with a history of anaphylaxis (due to any cause): 30 minutes
- All other persons: 15 minutes















FACT SHEET FOR HEALTHCARE PROVIDERS ADMINISTERING VACCINE (VACCINATION PROVIDERS)

EMERGENCY USE AUTHORIZATION (EUA) OF THE PFIZER-BIONTECH COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19)

The U.S. Food and Drug Administration (FDA) has issued an Emergency Use Authorization (EUA) to permit the emergency use of the unapproved product, **Pfizer-BioNTech COVID-19 Vaccine**, for active immunization to prevent COVID-19 in individuals 16 years of age and older.

SUMMARY OF INSTRUCTIONS FOR COVID-19 VACCINATION PROVIDERS

Vaccination providers enrolled in the federal COVID-19 Vaccination Program must report all vaccine administration errors, all serious adverse events, cases of Multisystem Inflammatory Syndrome (MIS) in adults and children, and cases of COVID-19 that result in hospitalization or death following administration of Pfizer-BioNTech COVID-19 Vaccine. See "MANDATORY REQUIREMENTS FOR PFIZER-BIONTECH COVID-19 VACCINE ADMINISTRATION UNDER EMERGENCY USE AUTHORIZATION" for reporting requirements.

The Pfizer-BioNTech COVID-19 Vaccine is a suspension for intramuscular injection administered as a series of two doses (0.3 mL each) 3 weeks apart.

See this Fact Sheet for instructions for preparation and administration. This Fact Sheet may have been updated. For the most recent Fact Sheet, please see www.cvdvaccine.com.

For information on clinical trials that are testing the use of the Pfizer-BioNTech COVID-19 Vaccine for active immunization against COVID-19, please see www.clinicaltrials.gov.

DESCRIPTION OF COVID-19

Coronavirus disease 2019 (COVID-19) is an infectious disease caused by the novel coronavirus, SARS-CoV-2, that appeared in late 2019. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have reported a wide range of symptoms, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

Use Fact Sheet in Place of VIS

FACT SHEET FOR RECIPIENTS AND CAREGIVERS

EMERGENCY USE AUTHORIZATION (EUA) OF THE PFIZER-BIONTECH COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19) IN INDIVIDUALS 16 YEARS OF AGE AND OLDER

You are being offered the Pfizer-BioNTech COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Pfizer-BioNTech COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19.

The Pfizer-BioNTech COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Pfizer-BioNTech COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Pfizer-BioNTech COVID-19 Vaccine.

The Pfizer-BioNTech COVID-19 Vaccine is administered as a 2-dose series, 3 weeks apart, into the muscle.

The Pfizer-BioNTech COVID-19 Vaccine may not protect everyone.

This Fact Sheet may have been updated. For the most recent Fact Sheet, please see <u>www.cvdvaccine.com</u>.

WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE?

WHAT IS COVID-19?

COVID-19 disease is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

WHAT IS THE PFIZER-BIONTECH COVID-19 VACCINE?

The Pfizer-BioNTech COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19.

FACT SHEET FOR HEALTHCARE PROVIDERS ADMINISTERING VACCINE (VACCINATION PROVIDERS) EMERGENCY USE AUTHORIZATION (EUA) OF THE MODERNA COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19)

The U.S. Food and Drug Administration (FDA) has issued an Emergency Use Authorization (EUA) to permit the emergency use of the unapproved product, **MODERNA COVID-19 VACCINE**, for active immunization to prevent COVID-19 in individuals 18 years of age and older.

SUMMARY OF INSTRUCTIONS FOR COVID-19 VACCINATION PROVIDERS

Vaccination providers enrolled in the federal COVID-19 Vaccination Program must report all vaccine administration errors, all serious adverse events, cases of Multisystem Inflammatory Syndrome (MIS) in adults, and cases of COVID-19 that result in hospitalization or death following administration of the Moderna COVID-19 Vaccine. See "MANDATORY REQUIREMENTS FOR THE MODERNA COVID-19 VACCINE ADMINISTRATION UNDER EMERGENCY USE AUTHORIZATION" for reporting requirements.

The Moderna COVID-19 Vaccine is a suspension for intramuscular injection administered as a series of two doses (0.5 mL each) 1 month apart.

See this Fact Sheet for instructions for preparation and administration. This Fact Sheet may have been updated. For the most recent Fact Sheet, please see <u>www.modernatx.com/covid19vaccine-</u> eua.

For information on clinical trials that are testing the use of the Moderna COVID-19 Vaccine for active immunization against COVID-19, please see www.clinicaltrials.gov.

DESCRIPTION OF COVID-19

Coronavirus disease 2019 (COVID-19) is an infectious disease caused by the novel coronavirus, SARS-CoV-2, that appeared in late 2019. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have reported a wide range of symptoms, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle and body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

FACT SHEET FOR RECIPIENTS AND CAREGIVERS EMERGENCY USE AUTHORIZATION (EUA) OF THE MODERNA COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19) IN INDIVIDUALS 18 YEARS OF AGE AND OLDER

You are being offered the Moderna COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Moderna COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19.

The Moderna COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Moderna COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Moderna COVID-19 Vaccine.

The Moderna COVID-19 Vaccine is administered as a 2-dose series, 1 month apart, into the muscle.

The Moderna COVID-19 Vaccine may not protect everyone.

This Fact Sheet may have been updated. For the most recent Fact Sheet, please visit www.modernatx.com/covid19vaccine-eua.

WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE

WHAT IS COVID-19?

COVID-19 is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chilk; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

WHAT IS THE MODERNA COVID-19 VACCINE?

The Moderna COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19.

Standing Orders

Consider using as a protocol in the Pharmacy

Pfizer-BioNTech COVID-19 Vaccine Standing Orders for Administering Vaccine

to Persons 16 Years of Age and Older

Note: For more information/guidance, please contact the immunization program at your state or local health (the appropriate state body (e.g., state board of medical/nursing/pharmacy practice).

To reduce morbidity and mortality from coronavirus disease 2019 (COVID-19) by vaccinating persons who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP)

Procedure

Purpose

- Assess persons 16 years of age and older for vaccination with Pfizer-BioNTech COVID-19 Vaccine based on the following criteria: No complete 2-dose COVID-19 vaccination history, regardless of brand. If 2 doses of a same-brand or mixedbrand series have been administered, no additional doses are recommended.
- If the recipient has received 1 previous dose of Pfizer-BioNTech COVID-19 Vaccine, the second dose of the same brand should be administered.
- This vaccine is administered in a 2-dose series. Separate doses by at least 21 days."
- Pfizer-BioNTech COVID-19 Vaccine should not be administered at the same time with other vaccines. Separate Pfizer-BioNTech COVID-19 Vaccine from other vaccines by 14 days before or after the administration of COVID-19 vaccine.
- Pfizer-BioNTech COVID-19 Vaccine should be deferred for at least 90 days for persons who received passive antibody therapy as part of (monoclonal antibodies or convalescent plasma) as part of COVID-19 treatment.
- Screen for contraindications and precautions.
- o Contraindications

Severe allergic reaction (e.g., anaphyl

dose of Pfizer-BioNTech COVID-19 Va component of the vaccine.

Where authorized under state law, standin

eligible nurses and other healthcare profes

pharmacists) to assess and vaccinate persi

criteria in the "Procedure" section below with

clinician examination or direct order fro provider at the time of the interaction.

Precautions

Policy

- Severe allergic reaction (e.g., anaphy dose of any vaccine (not including P COVID-19 Vaccine).
- Severe allergic reaction (e.g., anaphy medication that is injectable
- Moderate to severe acute illness
- Provide Emergency Use Authorization (E) information.
- Provide all recipients with a copy of the EUA Fact Sheet for Recipients and Car
- Prepare to administer the vaccine.
 - Choose the correct needle gauge, needle gauge injection site for persons: 16 through 18 years of age: 1-inch ni
 - recommended, administered in the the arm."
 - » 19 years of age and older: See table

Sex and Weight of Patient	Needle Gauge	Needle Length	Injection Site"
Female or male fewer than 130 lbs	22-25	%****-1°	Deltoid muscle of
Female or male 130–152 lbs	22-25	1"	Deltoid muscle of
Female 152~200 lbs	22-25	1-11/2*	Deltoid muscle of
Male 153-260 lbs	22-25	1-112*	Deltoid muscle of
Female 200+ lbs	22-25	11/2"	Deltoid muscle of
Male 260+ lbs	22-25	11/2**	Deltoid muscle of

* If the 3nd dose Pfase BioNTech COVID-19 Vaccine was given as early as 17 days after the 1st dose, then do not repeat a 2nd dose.

** Alternatively, the anterolateral thigh also can be used.

ann Scome experts recommend a Sill-leich needle for men and women who weigh less 130 pounds. If used, skin must be stretched tightly ide not band



Moderna COVID-19 Vaccine

Standing Orders for Administering Vaccine to Persons 18 Years of Age and Older

Note: For more information/quidance, please contact the immunization program at your state or local health department or the appropriate state body (e.g., state board of medical/nursing/pharmacy practice).

>> Policy

Purpose

· To reduce morbidity and mortality from coronavirus disease 2019 (COVID-19) by vaccinating persons who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP).

Procedure

Assess persons 18 years of age and older for vaccination with Moderna COVID-19 Vaccine based on the following criteria:

- No complete 2-dose COVID-19 vaccination history, regardless of brand. If 2 doses of a same-brand or mixedbrand series have been administered, no additional doses are recommended.
- o If the recipient has received 1 previous dose of Moderna COVID-19 Vaccine, a second dose of the same brand should be administered.
- o This vaccine is administered in a 2-dose series. Separate doses by at least 28 days.*
- Moderna COVID-19 Vaccine should not be administered. at the same time as other vaccines. Separate Moderna COVID-19 Vaccine from other vaccines by 14 days before or after the administration of Moderna COVID-19 vaccine.
- Moderna COVID-19 Vaccine should be deferred for at least 90 days for persons who received passive antibody therapy (monoclonal antibodies or convalescent plasma) as part of COVID-19 treatment.
- Screen for contraindications and precautions.

o Contraindication

» Severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine for both Pfizer-BioNTech and Moderna COVID-19 vaccines. For a list of vaccine components, see the Emergency Use Authorization (EUA).

· Where authorized under state law, standing orders enable

eligible nurses and other healthcare professionals (e.g.,

provider at the time of the interaction.

pharmacists) to assess and vaccinate persons who meet the

for clinician examination or direct order from the attending

criteria in the "Procedure" section below without the need

- o Precautions
- » Severe allergic reaction (e.g., anaphylaxis) to any other vaccine or injectable therapy (e.g., intramuscular, intravenous, or subcutaneous)
- Moderate to severe illness
- · Provide all recipients with a copy of the current federal Emergency Use Authorization (EUA) Fact Sheet for **Recipients and Caregivers**.
- · Prepare to administer the vaccine.
- o Choose the correct needle gauge, needle length, and injection site for persons:
- 18 years of age: 1-inch needle is recommended.
- 19 years of age and older: See table below.
- Follow the manufacturer's guidance for storing/handling punctured vaccine vials.

Sex and Weight of Patient	Needle Gauge	Needle Length	Injection Site†
Female or male fewer than 130 lbs	22-25	5% ⁹ -1"	Deltoid muscle of arm
Female or male 130–152 lbs	22-25	1"	Deltoid muscle of arm
Female 152–200 lbs	22-25	1-11/2"	Deltoid muscle of arm
Male 153-260 lbs	22-25	1-11/2*	Deltoid muscle of arm
Female 200+ lbs	2225	1½*	Deltoid muscle of arm
Male 260+ lbs	22-25	11/2"	Deltoid muscle of arm

* If the second dose of Moderna COVID-19 Vaccine was given as early as 24 days after the first dose, then do not repeat a second dose. * Alternatively, the antendateral think also can be used

§ Some experts recommend a 5/8-inch needle for men and women who weigh less 130 pounds, if used, skin must be stretched tightly ide not bunch subcataneous tissuel.





https://www.cvdvaccine-us.com/

This site is intended for U.S. Healthcare Professionals. Home Dosing & Administration Clinical Trials Safety Info Q&A Resources					Full EUA PI Safety Info FDA EUA Letter EUA Fact Sheets Product Storage & Dry Ice Product Storage & Dry Ice	
	Josing & Administration		Surety mo	Yan		
Emerger	er-BioNTech CC ncy Use Authori ministration (Fl	zation (EUA				Quick Access to Important Information
			peen approved	or licensed	l by FDA but	C' Safety Information
The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA, but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.			➡ Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers)			
			Fact Sheet for Recipients and Caregivers			
						C [*] Product Storage & Dry Ice

Adverse Event Reporting



Time is of the essence to provide a vaccine against this pandemic virus.

Moderna is proud to be among the many groups working to respond to this continuing global health emergency. This page summarizes key milestones in our work to advance mRNA-1273, our vaccine candidate against the novel coronavirus.

Learn more about mRNA-1273, Moderna's COVID-19 vaccine candidate.

View Moderna's standard Informed Consent Form and Authorization To Use and Disclose Protected Health Information for Protocol Number mRNA-1273-P301.

CDC/ACIP VOTE ON 1b PRIORITY GROUPS

Work Group Proposed Interim Phase 1 Sequence

Phase1c Adults with high -risk medical conditions Adults 65+

Phase 1b Essential workers

(examples: Education Sector, Food & Agriculture, Utilities, Police, Firefighters, Corrections Officers, Transportation)

Phase 1a Health care personnel LTCF residents

Time

Summary

What is already known about this topic?

On December 1, the Advisory Committee on Immunization Practices (ACIP) recommended that health care personnel and long-term care facility residents be offered COVID-19 vaccination first (Phase 1a).

What is added by this report?

On December 20, ACIP updated interim vaccine allocation recommendations. In Phase 1b, COVID-19 vaccine should be offered to persons aged ≥75 years and non-health care frontline essential workers, and in Phase 1c, to persons aged 65–74 years, persons aged 16–64 years with high-risk medical conditions, and essential workers not included in Phase 1b.

What are the implications for public health practice?

Federal, state, and local jurisdictions should use this guidance for COVID-19 vaccination program planning and implementation.

Arizona COVID-19 Vaccine Prioritization*

	hase 1 R 2020 - SPRING 2021		Phase 2 SPRING 2021 - SUMMER 2021	Phase 3 SUMMER 2021 - BEYOND
1A) 1B) 1C		
Healthcare Workers & Healthcare Support	Education &	Adults 65 and	Any Remaining Phase 1 Populations	Any Remaining Phase 1 or 2 Populations
Occupations	Childcare Workers	Older	Additional High-Risk/Critical	General Population
Emergency Medical Services Workers	Protective Services Occupations	Adults of Any Age with High-risk Medical Conditions	Populations	
	Adults living in Congregate Settings	General Population		
	Adults with Risk Conditions in Congregate Settings			
	Adults 75 and Older			ARIZONA DEPARTM OF HEALTH SERVI

MUST PRIORITIZE WITHIN YOUR ORGANIZATION FOR PHASE 1A

- Because vaccine supply is limited, organizations will need to prioritize who will be vaccinated first.
- Additionally, consider reactogenicity of vaccine and not vaccinating a whole department at once as those immunized may need/want to stay home that day after immunization due to side-effects.

Refer to guidelines on next page

Proposed Vaccine HCW Side Effect Policy

Individuals who receive the COVID-19 vaccine and develop post-vaccine side effects consistent with COVID-19 vaccination can return to work without viral testing if:

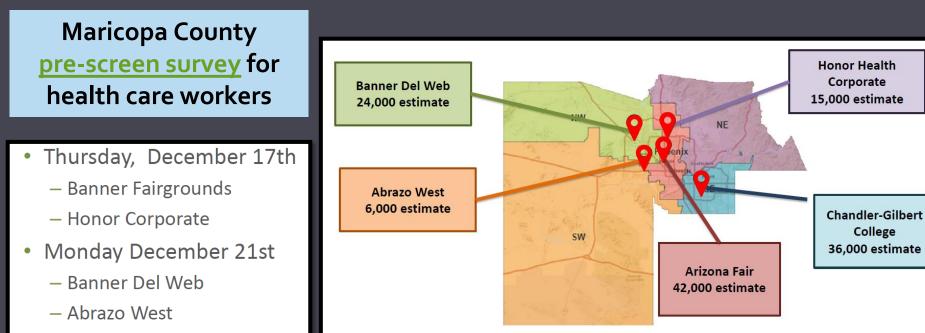
- They feel well enough and are willing to work
- They are afebrile*
- Their side effects are limited to those associated with COVID-19 vaccination and not COVID-19 disease (cough, shortness of breath, sore throat, or change in smell or taste)
 If an individual's COVID-19 vaccination side effects persist for more than 2 days, they should be excluded from work and viral testing should be considered.

*Individuals with fever measured as 38°C or 100.4°F or higher should be excluded from work and viral testing should be considered if the fever persists for more than 2 days. NOTE: For severe healthcare worker shortages, CDC allows staff to continue working with fever as long as other COVID-19 symptoms are absent.

Arizona Vaccine Supply

- Arizona is projected to receive 383,750 COVID-19 doses throughout December 2020:
 - 212,550 Pfizer doses (began 12/14)
 - 171,200 Moderna doses (began 12/21)
- CDC's Pharmacy/LTC Program begins in AZ on December 27th
- Maricopa and Pima Counties will be using the Pfizer vaccine in mass clinics for health care workers.
- Several counties are waiting for Moderna vaccine to start their clinics, because of the storage and handling limitations with Pfizer.

Maricopa County-Phase 1a POD Sites



Chandler Gilbert College

Pima County

• To qualify for vaccines in Phase 1A you must meet the following criteria:

- 1. Do you work in a facility where direct in-person care is provided to patients with laboratory-confirmed COVID-19 while contagious?
- 2. In these settings, do you interact with patients indoors or in enclosed spaces for longer than 15 minutes at a time?
- If this does describe you, <u>check this list</u> to see if your agency/facility is already registered. If listed, Pima County has explained to your administrators the prioritization and registration process. Check with HR. <u>TMC</u> and <u>Banner</u> are distributing vaccines to health care workers throughout the community based on those assignments.

Pima County Clinic Information

Other Counties

- Due to the likelihood of there being a limited supply when vaccine first becomes available, there will be a <u>phased approach</u> to distribution.
- At this time, select Arizona counties have begun Phase 1A of the COVID-19 vaccine prioritization, which includes healthcare workers, emergency medical services workers, and long-term care faculty, staff, and residents.
- Counties and tribal partners may implement their own sub-prioritizing as needed for their jurisdiction.

Website Apache Cochise Coconino Gila Graham Greenlee La Paz Maricopa Mohave Navajo Pima Pinal Santa Cruz Yavapai Yuma

ARIZONA DEPARTMENT OF HEALTH SERVICES

Phase 1B Essential Employer COVID-19 Vaccine Request Form

Please fill out this survey for consideration to receive COVID-19 vaccine when available. This form is intended for employers of Phase 1B essential workers* to attest that they meet the prioritization criteria and request a COVID-19 vaccine allocation for their workforce. In order to be considered for a vaccine allocation during Phase 1B when vaccine is available, employers are encouraged to share their vaccination plans including how many essential employees require vaccination.

Phase 1B will include essential workers defined in VAPAC recommended guidance (based on CISA and EO 2020-12 definitions), and groups will be sub-prioritized while vaccine supplies are limited to include risk of exposure and mission critical positions.

Please note that the sub-prioritization process will be based on vaccine availability, local allocation and risk assessment of each group. It is recommended that employers consider their continuity of operations plans while completing this form.

Upcoming Immunization Training/Refreshers

Immunization Certificate Program-January 9th, 2021:

- <u>https://www.lecturepanda.com/a/IMZJan21</u>
- Target Audience: Pharmacists and interns who wish to be certified to administer vaccines. Immunization Administration Training Program-On Demand:
- <u>https://www.lecturepanda.com/a/TechIMZ</u>
- Target Audience: Technicians who will be vaccinating under the current HHS order. Also a great general refresher for pharmacists and students.

Immunization Refresher Course:

- <u>https://www.lecturepanda.com/a/IMZrefresher20</u>
- Target Audience: Refresher for pharmacists and students.
- Pediatric Vaccine Refresher Course:
- <u>https://www.lecturepanda.com/a/PediatricVaccineRefresher</u>
- Target Audience: Refresher for pharmacists and students.