



for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States

COVID-19 vaccine products currently approved or authorized in the United States

COVID-19 Vacci	nie produc	to curr	entry (аррготе	a or authori	zed iii tile oli	iteu 5	tates	,			
Pfizer-BioNTech												
Age indication	vaccir Vaccir		Vaccine vial		Label border	Dilution	Primary series			Booster doses		
Age malcation	composi	ition	cap	color	color	required	Dos	e	Injection	volume	Dose	Injection volume
6 months-4 years	Monova	Monovalent		aroon	Maroon	Yes	3 μο	9	0.2 mL		NA	NA
5-11 years	Monova	Monovalent		range	Orange	Yes	10 μ	10 μg 0.2 mL		nL	NA	NA
5–11 years	Bivale	Bivalent		range	Orange	Yes	NA	NA NA			10 μg	0.2 mL
12 years and older	Monova	Monovalent		Gray	Gray	No	30 μ	30 μg 0.3 mL		nL	NA	NA
12 years and older	Bivale	Bivalent		Gray	Gray	No	NA	NA NA			30 μg	0.3 mL
Moderna												
	Vaccii	Vaccine omposition		ine vial	Label border color	Dilution required	Primary series		Booster doses		oster doses	
Age indication	compos			cap color			Dos	e	Injection	volume	Dose	Injection volume
6 months-5 years	Monova	Monovalent		rk blue	Magenta	No	25 μg		0.25 r	mL	NA	NA
6-11 years	Monovalent		Dark blue		Purple	No	50 μ	g	0.5 mL		NA	NA
6-11 years	Bivalent		Dark blue		Gray	No	NA		NA		25 μg	0.25 mL
12 years and older	Monovalent		Red		Light blue	No	100 μ	ıg	0.5 mL		NA	NA
12 years and older	Bivalent		Dark blue		Gray	No	NA	NA NA			50 μg	0.5 mL
Janssen COVID-19 Vaccine is authorized for adults ages 18 years and older in certain limited situations due to safety considerations. For guidance on respective record review, scheduling and administration of Janssen vaccine see Interim Clinical Considerations for Use of COVID-19 Vaccines: Appendix A												
Age indication	Vaccine composition		Vaccine vial cap color		Label border color	Dilution required	Primary series			Booster doses		
							Do	se	Injection	n volume	Dose	Injection volume
18 years and older	Monovalent		Blue		No Color	No	5×10 ¹⁰ viral particles		0.5 mL		5×10¹º viral particles	0.5 mL
Novavax												
Ago indication	Vaccine Vaccine				er Dilution	Prir	nary seri	ary series		Booster doses*		
Age indication	composition	cap color		color	required	Dose	Injectio		n volume D		ose	Injection volume
12 years and older	Monovalent Royal blu		olue	No Color	No	5 μg rS and 50 μς Matrix-M™ adjuv				5 μg rS and 50 μg of Matrix-M™ adjuvant		0.5 mL

^{*} Booster doses are only indicated for recipients 18 years and age and older in limited situations, see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html





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All currently authorized or approve	ed COVID-19 vaccines
COVID-19 vaccination schedule	See the Interim COVID-19 Immunization Schedule for Ages 6 Months or Older at https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf
Pre-vaccination counseling	Prior to vaccination: Provide the vaccine-specific Fact Sheet for Recipients and Caregivers Pfizer-BioNTech (https://www.fda.gov/media/144413/download), Moderna (https://www.fda.gov/media/144637/download), Janssen (https://www.fda.gov/media/146304/download), Novavax (www.novavaxcovidvaccine.com) Screen for contraindications and precautions. CDC's Prevaccination Screening Form and Guidance document can be found at www.cdc.gov/vaccines/covid-19/info-by-product/index.html . Inform vaccine recipients mRNA or Novavax COVID-19 vaccines are recommended over Janssen COVID-19 Vaccine. Counsel vaccine recipients, parents, or guardians about expected reactions post-vaccination (e.g., pain and swelling at the injection site, fever, fatigue, headaches). Inform mRNA and Novavax vaccine recipients especially males ages 12-39 years, of the rare risk of myocarditis and pericarditis following receipt of these COVID-19 vaccines and the benefit of COVID-19 vaccination in reducing the risk of severe outcomes from COVID-19.† Counseling should also include the need to seek care if symptoms of myocarditis or pericarditis occur after vaccination, particularly in the week following vaccination. For more information see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#myocarditis-pericarditis. Inform vaccine recipients interested in or receiving Janssen COVID-19 Vaccine of the risk and symptoms of thrombosis with thrombocytopenia syndrome (TTS), as well as the need to seek immediate medical care should symptoms develop after receiving Janssen vaccine. For more information see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-consideration
Interchangeability of vaccines	 In general, the same COVID-19 monovalent vaccine product (Pfizer-BioNTech, Moderna, Novavax) should be used for all doses in the primary series. In exceptional situations when the previous product cannot be determined/not available or if a person is unable to complete a series with the same COVID-19 vaccine due to a contraindication any age-appropriate mRNA COVID-19 vaccine may be used (administer at a minimum interval of 28 days). For booster vaccination, any homologous or heterologous age-appropriate mRNA vaccine can be used. Recommendations vary based on age and primary series product. (https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us. html#timing-spacing-interchangeability).[‡]
Coadministration with other vaccines	 COVID-19 vaccines may be administered on the same day as other vaccines. Persons, particularly adolescent or young adult males, might consider waiting 4 weeks after orthopoxvirus (monkeypox) vaccination (either JYNNEOS or ACAM2000) before receiving a Moderna, Novavax, or Pfizer-BioNtech COVID-19 vaccine because of the observed risk for myocarditis and/or pericarditis after JYNNEOS. Administer each injection in a different injection site.

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

[‡] For booster vaccination, homologous or heterologous mRNA booster is recommended.





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All currently authorized or approv	red COVID-19 vaccines					
	History of:					
	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine					
Contraindications	A known diagnosed allergy to a component of the COVID-19 vaccine					
	■ For the Janssen COVID-19 Vaccine, TTS following receipt of a previous Janssen COVID-19 Vaccine (or other COVID-19 vaccines not currently authorized or approved in the United States that are based on adenovirus vectors, e.g., AstraZeneca) [§]					
	 History of anaphylaxis after any other vaccine or injectable therapy (i.e., intramuscular, intravenous, or subcutaneous vaccines or therapies [excluding subcutaneous immunotherapy for allergies, i.e., "allergy shots"]) 					
	History of multisystem inflammatory syndrome in children (MIS-C) or multisystem inflammatory syndrome in adults (MIS-A)					
Precautions	History of an immediate (within 4 hours of exposure) non-severe allergic reaction after a dose of one type of COVID-19 vaccine have a precaut to the same type of COVID-19 vaccine					
	 Allergy-related contraindication to one type of COVID-19 vaccine have a precaution to the other types of COVID-19 vaccines. 					
	■ Moderate or severe acute illness, with or without fever					
	■ History of myocarditis or pericarditis after a dose of an mRNA or Novavax COVID-19 vaccine					
	■ For Janssen COVID-19 Vaccine, a history of Guillain-Barré syndrome**					
Considerations for all FDA-author	ized or -approved COVID-19 vaccines					
Persons receiving HCT and CAR-T-cell therapy	If received doses of COVID-19 vaccine prior to or during HCT or CAR-T cell therapy, should be revaccinated for any monovalent primary series and bivalent booster doses received before or during treatment at least 3 months (12 weeks) after transplant or CAR-T-cell therapy. There is no revaccination for monovalent booster doses.					
Persons who are moderately or severely immunocompromised	See the Interim COVID-19 Immunization Schedule for Ages 6 Months or Older at https://www.cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf					
Persons receiving immunosuppressive therapies	■ Whenever possible, COVID-19 vaccines should be administered at least 2 weeks before initiation or resumption of immunosuppressive therapies					
	COVID-19 vaccination is recommended for everyone ages 6 months and older, regardless of a history of symptomatic or asymptomatic SARS-CoV-infection.					
SARS-CoV-2 infection	 Defer vaccination until person has recovered from acute illness and criteria have been met for them to discontinue isolation. 					
Current infection	People who recently had SARS-CoV-2 infection may consider delaying their next COVID-19 dose by 3 months from symptom onset or positive to					
History of previous infection	(if infection was asymptomatic).					
Exposed to an infected person	Viral testing to assess for acute SARS-CoV-2 infection or serologic testing to assess for prior infection is not recommended for the purpose of vaccine decision-making.					
	Additional information at: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#infection					
	COVID-19 vaccination is not recommended for post-exposure prophylaxis.					

[§] Additionally, people with a history of an episode of immune-mediated syndrome characterized by thrombosis and thrombocytopenia, such as spontaneous or classic HIT, should not receive Janssen COVID-19 Vaccine. These people should receive an mRNA or Novavax COVID-19 vaccine booster dose.

[¶] People with a known allergy to polysorbate have a contraindication to both Novavax ad Janssen COVID-19 vaccines.

^{**} People who develop GBS within 6 weeks after receipt of Janssen COVID-19 Vaccine should not receive another dose of Janssen COVID-19 Vaccine. These people should receive a booster dose of an mRNA COVID-19 vaccine for subsequent doses.





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Considerations for all FDA-authoriz	zed or -approved COVID-19 vaccines		
Persons with history of multisystem inflammatory syndrome (MIS-C and MIS-A) from SARS-CoV-2 infection	 COVID-19 vaccines can be given; wait until clinical recovery and at least 90 days after an MIS-C or MIS-A diagnosis. For persons who have had MIS-C or MIS-A from SARS-CoV-2 infection who have not yet received COVID-19 vaccine or who developed MIS-C or MIS-A after COVID-19 vaccination, a conversation between the vaccine recipient, guardian, and clinical team or specialist to discuss benefits and risks of receiving a COVID-19 vaccine is encouraged. Clinical recovery, including return to normal cardiac function, is an important factor when considering COVID-19 vaccination. Additional information at: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#covid19-vaccination-misc-misa 		
Persons who received passive antibody therapy (convalescent plasma/ monoclonal antibodies)	 COVID-19 vaccination can be given at any interval following receipt of passive antibody therapy. Persons should wait 2 weeks after COVID-19 vaccination before receiving tixagevimab/cilgavimab (EVUSHELD) for pre-exposure prophylaxis. 		
Persons who are pregnant, breastfeeding, trying to get pregnant, or might become pregnant in the future	Are recommended to be vaccinated according to the recommended schedule.		
Considerations for mRNA vaccines and Novavax			

- Development of myocarditis or pericarditis after a dose of an mRNA or Novavax COVID-19 vaccine is a precaution to a subsequent dose of any COVID-19 vaccine.
- If after a risk assessment the decision is made to receive a subsequent COVID-19 vaccine dose, the person should wait until after their episode has resolved.

Persons with a history of myocarditis or pericarditis

- For information on potential use of Janssen COVID-19 Vaccine in this situation, see Appendix A at www.cdc.gov/vaccines/covid-19/clinical-considerations-us-appendix. html#appendix-a
- Persons who have a history of myocarditis or pericarditis unrelated to mRNA or Novavax COVID-19 vaccination may receive any age-appropriate COVID-19 vaccine after the episode of myocarditis or pericarditis has resolved.
- For more information see: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#myocarditis-pericarditis

Considerations for Janssen COVID-19 Vaccine

Janssen COVID-19 Vaccine is authorized for adults ages 18 years and older in certain limited situations due to safety considerations. For more information, see https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html/appendix-a

Persons with a history of Guillain-Barré syndrome (GBS)

- A history of GBS is a precaution for receipt of Janssen COVID-19 Vaccine. An mRNA or Novavax vaccine is recommended..
- Persons who develop GBS within 6 weeks of Janssen COVID-19 vaccination should only receive an mRNA COVID-19 vaccine for subsequent doses. These people should receive a booster dose of an mRNA COVID-19 vaccine for subsequent doses.





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Considerations for Janssen COVID-19 Vaccine				
Persons with a history of thrombosis with thrombocytopenia syndrome (TTS)	 It is contraindicated to administer Janssen COVID-19 Vaccine to persons with a history of TTS following receipt of the Janssen COVID-19 Vaccine or any other adenovirus vector-based COVID-19 vaccines (e.g., AstraZeneca's COVID-19 Vaccine). These persons should receive a dose of an mRNA COVID-19 vaccine as a booster dose at least 2 months (8 weeks) following their dose of the Janssen COVID-19 Vaccine and after their clinical condition has stabilized. 			
Persons with a history of heparin- induced thrombocytopenia (HIT)	 Persons with a history of an episode of an immune-mediated syndrome characterized by TTS, such as a spontaneous or classic HIT, should not receive Janssen COVID-19 Vaccine. These persons should receive an mRNA or Novavax COVID-19 vaccine. 			
General COVID-19 Vaccination Info	rmation			
Persons vaccinated outside the United States	■ The recommendations for people vaccinated outside the United States depend on the number and type of vaccine(s) received for the primary series and booster doses, whether the primary series was completed, and whether a booster dose was received. Current guidance can be found at: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-b			
Post-vaccination observation periods	 15 minutes: Vaccination providers, particularly when vaccinating adolescents, should consider observing vaccine recipients for 15 minutes after vaccination because of the risk of syncope. 30 minutes: Vaccination providers should consider observing persons with the following medical histories for 30 minutes after vaccination to monitor for allergic reactions: An allergy-related contraindication to a different type of COVID-19 vaccine Non-severe, immediate (onset within 4 hours) allergic reaction after a previous dose of COVID-19 vaccine Anaphylaxis after non-COVID-19 vaccines or injectable therapies 			
SARS-CoV-2 antibody testing	Antibody testing is not recommended for vaccine decision-making or to assess immunity following vaccination.			
Reporting requirements	Adverse events that occur following COVID-19 vaccination should be reported to VAERS (https://vaers.hhs.gov/). COVID-19 providers are required to report: Vaccine administration errors Serious adverse events Cases of Multisystem Inflammatory Syndrome Cases of COVID-19 that result in hospitalization or death			