

## Late 2021

**September 22:** FDA expands Pfizer-BioNTech EUA to authorize booster doses for individuals 65 years of age and older, individuals 18 through 64 years of age at high risk of severe COVID-19, and individuals 18 through 64 years of age whose frequent institutional or occupational exposure to SARS-CoV-2 puts them at high risk of serious complications of COVID-19 including severe COVID-19.

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**November 2:** CDC ACIP recommends Pfizer-BioNTech pediatric COVID-19 vaccine for children 5 to 11 years.

**November 19:** FDA amended the EUA for both the Moderna and Pfizer-BioNTech COVID-19 vaccines authorizing use of a single booster dose for all individuals 18 years of age.

**November 26:** WHO classifies a new variant, Omicron, as a variant of concern.

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## Early 2022

**January 5:** CDC endorses ACIP recommendation to expand eligibility of booster doses to those 12-15 years old.

**January 22:** FDA licenses COVID-19 vaccine Spikevax (Moderna) for individuals 18 years and older.

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**March 17:** A Johns Hopkins Bloomberg School of Public Health study found that harassment of public health officials was widespread during the initial phase of the pandemic, March 2020-January 2021.

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**April 20:** CDC ACIP recommends second booster doses for adults 50 years and older.

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## Mid 2022

**June 14:** FDA issues EUA for a two-dose Moderna COVID-19 vaccines series for children ages 6-11 years and ages 12-17.

**June 15:** FDA issues EUA for both the Moderna COVID-19 vaccine 2-dose primary series for children 6 months - 5 years and the Pfizer 3-dose series for children 6 months - 4 years.

**June 18:** CDC ACIP recommends the Moderna and Pfizer COVID-19 vaccines for young children 6mos to 5/6 years of age.

**June 23:** CDC ACIP recommends a two-dose Moderna COVID-19 vaccines series for children ages 6-11 years, under the EUA issued by FDA.

**July 13:** FDA issues EUA for Novavax COVID-19 vaccine.

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## Late 2022

**September 1 or 2:** ACIP will likely meet to discuss Moderna and Pfizer bivalent COVID-19 booster for adults.