

# Recommending COVID-19 Vaccination: Clinical Talking Points for Providers of Pediatric Services

This resource is designed to help you and your staff have effective conversations with families about COVID-19 vaccines, as you are the most trusted source of medical information for families.

## Begin to discuss COVID-19 vaccination now.

Start by asking, "What are your thoughts on your child receiving the vaccine?", then listen closely to their answers. Remember that the goals of these conversations are to have a cordial discussion, answer questions, understand and acknowledge any fears they express, and convey accurate information. This sets the stage for return visits, as families may need many conversations before they are ready to have their young children immunized.



## Validate parental concerns and answer questions without judgement.

As their child's provider, your guidance is influential to parents. Hearing your opinion that immunization is safe and effective can be reassuring. When parents express hesitation, ask about their concerns and acknowledge their views. For example, "If I read those things on Facebook, I would be scared, too. Let's talk about your concerns." Let parents know that you share their goal of keeping their children safe.

## Give parents accurate information.

Here are common questions and talking points to help parents. Praise parents who ask questions for wanting to know more. Wrap up the conversation by making a recommendation while acknowledging their authority in deciding for their children. For example, "I think getting vaccinated is best for your child, and ultimately, it's your choice. I'm here to guide you and answer your questions."

### Why should my child get the COVID-19 vaccine?

- **It's effective.** The vaccine does not protect against all COVID-19 infection, but [studies](#) have shown it is effective in preventing severe illness and hospitalization, including [against the Omicron variant](#).
- [Children with pre-existing conditions](#) are at higher risk for severe COVID-19 outcomes. Vaccination is especially recommended to keep children with chronic conditions and disabilities safe and healthy.
- "Healthy" children with no pre-existing conditions can have severe COVID-19, too. During Omicron, [63% of children](#) under 5 years hospitalized with COVID-19 did not have any underlying conditions.

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- The COVID-19 vaccine is [91% effective](#) against Multisystem Inflammatory Syndrome in Children (MIS-C), a serious condition that can happen in children after infection with COVID-19, even if they had mild symptoms or no symptoms at all. Children with MIS-C usually need to be hospitalized.
  - In California, there have been over 920 cases of MIS-C. Over half of these children were admitted to an ICU (as of 4/6/22).
- The vaccine can shorten time away from childcare and work. Vaccinated children [spent less time sick](#) in bed than unvaccinated children with Omicron.
- The vaccine can help protect others at home. Vaccinated persons with COVID-19 were one third less [likely to transmit](#) to others in their household in the Omicron period. Sadly, over 140,000 children have lost a caregiver due to COVID-19.

## Is COVID-19 vaccine safe for my child?

- COVID-19 vaccines are safe. Over 200 million people, including [over 20 million children](#), have safely received the COVID-19 vaccine in the United States and are now protected against serious COVID-19 infection. Getting vaccinated is much, much safer than the risks of getting sick with COVID-19.
- Mild to moderate side effects are common and are a sign that your body is building up its defenses to protect you. It's not unusual for a child to feel sore at the injection site or have a fever, headache, and muscle or joint pain for a day or two after vaccination.

## What about myocarditis?

- Myocarditis, or inflammation of the heart, is a rare side effect of some COVID-19 vaccines, but in school-aged children, myocarditis has been [very rare](#).
  - For all ages, the average risk of myocarditis from the vaccine is 1 in 200,000, which is 10 times less likely than being struck by lightning.
  - Even for older children and adults, the risk of myocarditis is [higher from COVID-19 infection](#) than it is from the vaccine, and myocarditis is usually much more serious after COVID-19 infection than after immunization.
    - In a study of children with MIS-C, [over 75% had myocarditis](#).
    - One study showed vaccine-associated myocarditis was [relatively mild](#) compared to myocarditis from MIS-C and COVID-19 infection.

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## Will the COVID-19 vaccine affect my child's fertility?

- The vaccine has not been shown to affect fertility.
  - [Many recent studies](#) found no differences in pregnancy rates among women who are vaccinated versus people who have not received the vaccine.
- The vaccine has been safely given to [over 200,000](#) pregnant women.

## Isn't it true that COVID-19 doesn't affect children?

- Unfortunately, no. In the United States, [over 12 million children](#) have become ill with COVID-19. [Over 119,000 children](#) have been hospitalized with COVID-19 since the beginning of the pandemic and [over 1,400](#) have died.

## Receive additional tips on having COVID-19 conversations with families.

"Crucial COVID-19 Conversations" helps healthcare professionals counsel patients on COVID-19 vaccine. Register for upcoming trainings or view archived sessions at the [30 Conversations Campaign webpage](#).

## Thank you.

We know these are difficult and challenging times, and we acknowledge your ongoing efforts to protect children through vaccination. We appreciate your continued partnership in ensuring children and their families are safe and healthy.