# Welcome to California COVID-19 Vaccination Program Friday Provider Office Hours



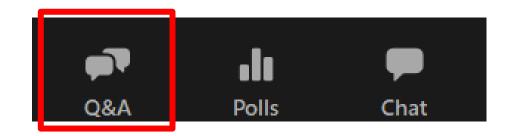
Friday, June 24, 2022



## Provider Office Hours Q&A

During today's session, please use the **Q&A panel** to ask your questions so our subject matter experts can respond directly.







## Housekeeping

#### **Reminder to Panelists:**



Please mute yourself when not speaking.

Please monitor the Q&A panel for questions you may be able to answer.

#### **Reminder to Attendees:**



Today's session is being recorded. Access today's slides and archived presentations at: <a href="https://eziz.org/covid/education/">https://eziz.org/covid/education/</a>



If you have post-webinar questions, please email <a href="mailto:leslie.amani@cdph.ca.gov">leslie.amani@cdph.ca.gov</a>



## Agenda: Friday, June 24, 2022

No.	Item	Speaker	Time (AM)
1	Welcome, Announcements, & Poll	Leslie Amani (Moderator)	9:00 – 9:05
2	Clinical Update	Caterina Liu, M.D. (CDPH)	9:05 – 9:20
3	Vaccine Administration Data	Elizabeth Reosti (CDPH)	9:20 – 9:25
4	CAIR2: COVID-19 Vaccine Updates	Michael Powell (CDPH)	9:25 – 9:30
	Q&A		9:30 – 9:35
5	Storage & Handling	Kate McHugh (CDPH)	9:35 – 9:40
6	Vaccine Management	Eric Norton (My Turn) and Daniel Conway (myCAvax)	9:40 – 9:50
7	Wrap Up & Resources Leslie Amani (Moderator)		9:50 – 10:00
	Q&A		



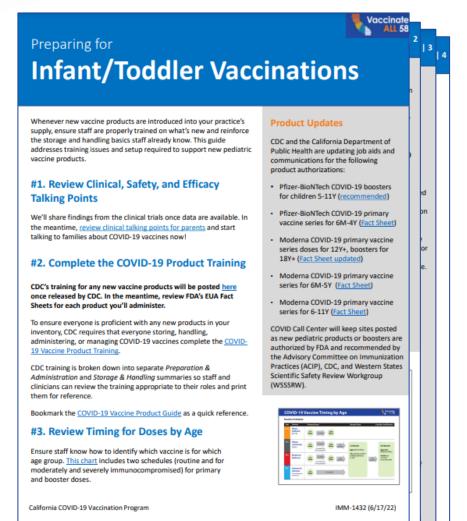
## Announcements

Leslie Amani, CDPH





## Job Aid: Preparing for Infant/Toddler Vaccinations



## Includes:

- Safety and Efficacy
- Product Training
- Timing for Doses
- Vaccine Organization
- Preparing Staff
- Links to Resources

## Coming Soon: COVID-19 Vaccine Product Training\*

See highlighted links to CDC product summary sheets, which summarize EUA fact sheets.

## Training includes COVID-19 Vaccine

- Preparation & Administration
- Contraindications and Precautions
- Reporting Doses & Adverse Events
- Storage & Handling

#### **COVID-19 Vaccine Product Training**

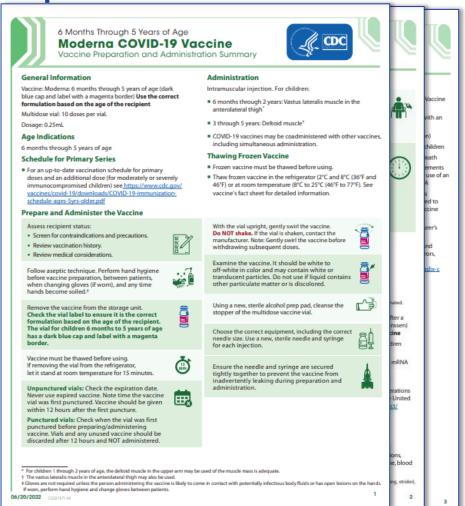
This training shows staff how to prepare, administer, store, and handle COVID-19 vaccine products and report adverse events to VAERS. To prepare in advance of initial vaccine shipments, print and review summary sheets—only for products your location will be ordering. Review times vary by learner role & technical experience.

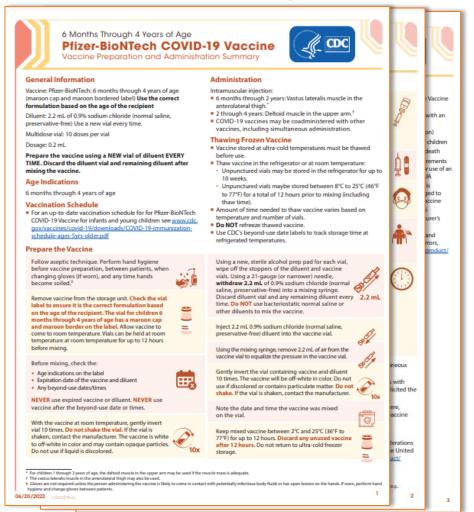
fizer-BioNtech	Location Coordinator	Vaccinator	Provider
<ul> <li>Vaccine Preparation &amp; Administration</li> <li>Ages 6M-4Y   Ages 5-11   Ages 12+ (PDF)</li> <li>Mixing Diluent &amp; Vaccine (PDF)</li> <li>Storage &amp; Handling:</li> <li>Ages 6M-4Y   Ages 5-11   Ages 12+ (PDF)</li> </ul>	~	<b>✓</b>	✓
Delivery Checklist (PDF)	<b>✓</b>	-	-

foderna	Location Coordinator	Vaccinator	Provider
Vaccine Preparation & Administration & video Ages 6M-5Y   Ages 18+ (PDF)  Storage & Handling: Ages 6M-5Y   Ages 18+ (PDF)	<b>*</b>	<b>V</b>	✓



## Infant/Toddler COVID-19 Vaccine Preparation and Administration Summary







## Job Aid: Vaccine Administration Checklist

#### **Vaccine Administration Checklist**

California COVID-19 Vaccination Program

California COVID-19 Vaccination Program



IMM-1411 (6/21/22)

Use this guidance to help ensure your patients receive sufficient protection after vaccination and to minimize revaccination efforts due to administration errors. Refer to CDC's <u>Interim Clinical Considerations</u> for additional clinical guidance and exceptional circumstances. Ensure check-in staff and vaccinators are properly trained on <u>COVID-19 vaccine timing by age</u>; ensure vaccinators are properly <u>trained to prepare vaccine products</u> your site will administer—paying extra attention to dilution of Pfizer COVID-19 vaccine products.

0	Screen recipients carefully and schedule appointments based on eligibility and age at date of vaccination.	Check-In Staff					
	COVID-19 vaccine dosages are based on age—not size or weight.  Vaccine products may have 2-dose or 3-dose primary series. Refer to COVID-19 Vaccine Timing by Age for age indicators, number/timing of primary and booster doses, recommendations for immunocompromised.  For subsequent doses in primary series: Check Mly Turn, CAIR, or your EHR to confirm the vaccine product your patient previously received AND timing of the next dose; administration at an incorrect interval may require revaccination. Determine if extended dosing interval for Pfizer/Moderna 2 <sup>nd</sup> dose is appropriate.  4-Day grace period: Primary series and booster doses administered up to 4 days before the minimum interval, known as the 4-day grace period, are considered valid.  Interchangeability of COVID-19 vaccine products: In general, the same mRNA vaccine product should be used for all doses in the primary series. See Interim Clinical Considerations for exceptions.  Transitioning from a younger to older age group: People should receive the recommended age-appropriate vaccine dosage based on their age on the day of vaccination.						
Carefully check the vaccine vial label against the prescribed vaccine in My Turn or your EHR.							
	Administering the wrong formulation may result in a lower-than-authorized dosage and insufficient protection.  For COVID-19 vaccines, use vial cap color to help distinguish products. Refer to COVID-19 Vaccine Product Guide for cap colors and age indicators by product. (Early shipments of Pfizer 6M-4Y do not correctly state the age indicators. Please refer to the Pfizer Provider Letter.)						
	Product Guide for cap colors and age indicators by product	sh products. Refer to <u>COVID-19 Vaccine</u> tt. (Early shipments of Pfizer 6M-4Y do not					
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2	Product Guide for cap colors and age indicators by product correctly state the age indicators. Please refer to the Pfize  Always check expiration date before preparation and administration.  Administration of expired vaccine may require revaccination (see  • See COVID-19 Vaccine Product Guide or EUA Fact Sheets to de	sh products. Refer to COVID-19 Vaccine tt. (Early shipments of Pfizer 6M-4Y do not or Provider Letter.)  Vaccinators  CDC revaccination guidance). termine expiration date by vaccine.					

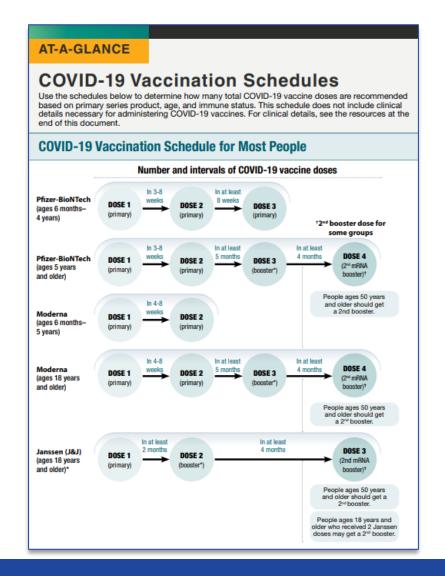
#### Vaccine Administration Checklist includes:

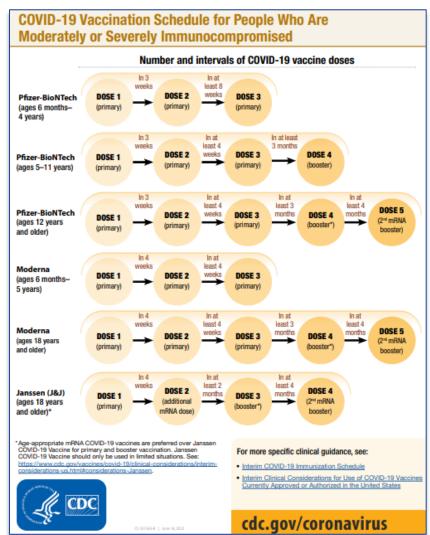
- Guidance to avoid administration errors
- Links to CDC Interim Clinical Considerations
- Links to training by age
- Link to how to prepare vaccine products
- Screening





## **COVID-19 Vaccination Schedules**





## LGBTQ+ Outreach and Archived Webinar



VA58 Information Digest: LGBTQ+ Outreach



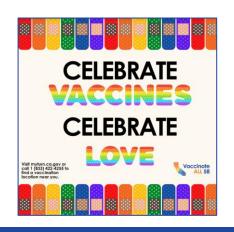
**Equality California Training** 

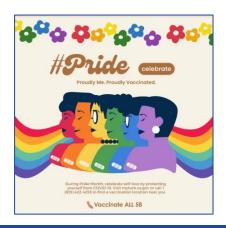
#### **Archived:**

**COVID-19 Crucial Conversations Webinar:** 

**Archived Slides Archived Recording** 









# Archived Webinars! Planning for Infant/Toddler COVID-19 Vaccinations

Dr. Erica Pan, Deputy Director, Center for Infectious Diseases, and CDPH SMEs shared information on "Planning for Infant/Toddler COVID-19 Vaccinations".

**Archived Slides** 

**Archived Recording** 

The California Immunization Coalition (CIC) COVID Conversations #11 featuring Dr. Yvonne A. Maldonado, MD, FAAP, FPIDS, FIDSA, Stanford University School of Medicine, and Dr. Robert Schechter, MD, MSC, Chief Immunization Branch, CDPH.

Archived Slides
Archived Recording

California Immunization Coalition Webpage

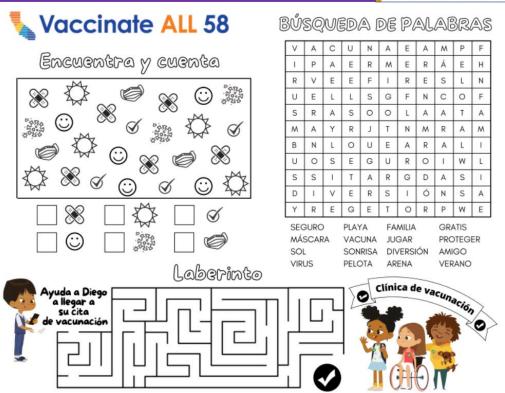




## Resources: Infant/Toddler & KidsSprint Toolkit & Graphics









LOS NIÑOS DE 6 MESES

## **Archived:** CDC COCA Webinar

CDC/Clinician Outreach and Communication Activity (COCA) Webinar

**Topic:** Recommendations for Pfizer-BioNTech and Moderna COVID-19 Vaccine Primary Series in Children 6 Months through 5 Years Old

Archived Slides
Archived Recording



#### Frequent Content Updates:

- Alerts
- Program Enrollment
- My Turn Onboarding
- Reporting Requirements
- Patient Resources
- Archived Communications
- Education & Support Materials
- More to explore!



#### California COVID-19 Vaccination Program

ENHANCED BY Google

#### **Program Updates**

Program Enrollment

My Turn Onboarding

Vaccine Management

**Vaccine Administration** 

Reporting Requirements

**Archived Communications** 

**Patient Resources** 

#### **Provider Support**

**COVID Call Center** 

Email: Program Info Phone: (833) 502-1245 Hours: Mon-Fri, 8AM-6PM

Contact us for questions about the program or help with accessing documents.

#### myCAvax and My Turn

#### Email:

myCAvax Technical Support MyTurn Onboarding, MyTurn Technical Support Phone: (833) 502-1245 Mon-Fri, 7AM-7PM Sat-Sun, 8AM-1PM

My Turn Clinic Translation

Line:

(833) 980-3933 Mon-Fri: 8AM-8PM Sun-Sat: 8AM-5PM

#### **Vaccines**

Manufacturer Contacts

#### **Updates for Providers**









Trair

#### Alerts:

#### **Updated Infant/Toddler Recommendations and Products**

- Routine and Small Orders are now open for the Infant/Toddler products. Expect delivery to begin after the wave 2 pre-order delivery window is complete after Wednesday, June 29. View Pre-Ordering/Delivery Schedule
- Interim Clinical Considerations for Use of COVID-19 Vaccines
- COVID-19 Vaccination Schedule (Timing Guide)
- Guide of COVID-19 Vaccine Products
   (Updates for Moderna 6-11 years and 12-17 years pending ACIP approval)

#### **Planning Resources**

- · Preparing for Infant/Toddler Vaccinations Job Aid
- Planning for Under 5 Vaccinations Webinar Recording and Slides
- Recommending COVID-19 Vaccination: Clinical Talking Points 6/17/22
- Requesting COVID-19 Vaccination Staff
- Expanding Vaccination Capacity

#### **Now Enrolling Providers of Pediatric Services**

- Find Information on How to Enroll
- Dispelling Provider Myths About Joining the California COVID-19 Vaccination Program
- · Welcome VFC Providers | Flyer | VFC vs. COVID Programs

#### **Featured Resources**

#### **Tools to Avoid Vaccine Mix-Ups:**

- Vaccine Administration Checklist 6/21/22
- Preventing Administration Errors 6/21/22
- Coadministration of COVID-19 Vaccine with Other Vaccines | Tips | Preteens



## **COVID-19 Vaccine Provider FAQs**

- **Answers to provider questions**
- **Updated weekly: last updated 6/23/2022**
- **Currently in its 77th iteration!**



Updated Q: How can COVID-19 vaccine Providers submit COVID-19 vaccine reimbursement claims for uninsured individuals?

A: The U.S. Health Resources & Services Administration (HRSA) stopped accepting COVID-19 vaccine reimbursement claims on April 5, 2022. COVID-19 vaccine Providers who were receiving reimbursement for vaccine administration through HRSA may receive reimbursement through the California Department of Health Care Services (DHCS) COVID-19 Uninsured Group. For guidance on the COVID-19 Uninsured Group, please visit COVID-19 Vaccine Reimbursement FAQs on the DHCS COVID-19 Medi-Cal Response page.



ื Q: If a child moves from a younger age group to an older age group during the primary series or between the primary series and receipt of the booster dose(s), which dosage should they receive?

A: Children should receive the age-appropriate formulation and follow the vaccine eligibility schedule based on their age on the day of vaccination, regardless of their size or weight. If a child moves from a younger age group to an older age group during the primary series or between the primary series and receipt of the booster dose(s), they should receive the vaccine dosage for the older age group for all subsequent doses. For further information, please visit CDC Interim Clinical Considerations: Transitioning from a younger to older age group.

California COVID-19 Vaccination Program Provider FAQs v.77.0\_6.23.22

#### California COVID-19 Vaccination Program Provider FAQs

For Prospective, Newly Enrolled, and Current California COVID-19 Vaccine Providers. Providers may also visit California COVID-19 Vaccination Program for Information and updates.

Directions: Click on a category to be directed to related FAQs.

#### Contents

New and Updated FAQs	2
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Vaccine Storage & Handling	11
Inventory	12
Reporting	13
Billing & Reimbursement	14
Communication Resources	

Provider FAQs on EZIZ, Updated Weekly





#### COVID-19 Vaccination Program Webinars and Training for Providers

#### Week of June 27, 2022

	Monday 6/27	Tuesday 6/28	Wednesday 6/29	Thursday 6/30	Friday 7/1
myCAvax	My Turn and myCAvax Office Hours 12:00 pm – 1:00 pm				
Combined Office Hours and Events	Vaccine Order Request with Q&A 10:00 am - 10:30 am  Pfizer BioNTech COVID-19 Vaccine Training & Education* 12:00 pm - 1:00 pm PW: SXpxqFPP265	Pfizer BioNTech COVID-19 Vaccine Training & Education* 12:00 pm – 1:00 pm PW: vXGkbVDv526	Pfizer BioNTech COVID-19 Vaccine Training & Education* 9:00 am – 10:00 am PW: 3JKnTe4GDx5	Pfizer BioNTech COVID-19 Vaccine Training & Education* 9:00 am – 10:00 am PW: MpBZPFCM635	Provider Office Hours 9:00 am – 10:00 am  Pfizer BioNTech COVID-19 Vaccine Training & Education* 12:00 pm – 1:00 pm PW: QMjNKiQX5324

<sup>\*</sup> Pfizer BioNTech COVID-19 Vaccine Training & Education topics vary by day and include the latest information about vaccine storage, handling, preparation, and administration; recent medical updates, healthcare provider resources, and a Q&A session. NOTE: Updated training to include potential Maroon Cap presentation for individuals 6 months through 4 years of age.

## View On Demand

- Intro to My Turn Onboarding (v. 1/4/22)
- <u>Latest Features in My Turn</u> (\*Requires My Turn Login)
- <u>Latest Features in myCAvax for Providers</u>
   (\*Requires myCAvax Login)
- myCAvax Release Notes for LHJs and CDPH Users (\*Requires myCAvax Login)
- COVID-19 Crucial Conversations Archived Webinars and Slides

 Provider 101 Account Enrollment: Section A: Organization Application (v. 10/21/21)

Note: Calendar subject to change

- Provider 101 Account Enrollment: Section B: Location Application (v. 10/21/21)
- Provider Office Hours and MCE Office Hours Archived Sessions

Help

Website: www.eziz.org/covid, FAQs

General email: covidcallcenter@cdph.ca.gov

CDPH Provider Call Center: 1-833-502-1245, 8am-6pm

My Turn email: <a href="myturnonboarding@cdph.ca.gov">myturnonboarding@cdph.ca.gov</a>

myCAvax Help Desk Email: myCAvax.HD@accenture.com

Phone: (833) 502-1245





## Pfizer COVID-19 Vaccine Updates & Trainings

Date & Time (linked)	Password			
Friday, June 24 - 12PM	XZqMY8qQV37			
Monday, June 27 - 12PM	SXpxqFPP265			
Tuesday, June 28 -12PM	vXGkbVDv526			
Wednesday, June 29 - 9AM	3JKnTe4GDx5			
Thursday, June 30 - 9AM	MpBZPFCM635			
Friday, July 01 - 12PM	QMjNKiQX532			
Tuesday, July 05 - 12PM	GBg5xe59Tjp			
More sessions listed!  NOTE: All times listed here are PDT.				

#### Audience:

Providers and immunization staff

#### **Session Topics Include:**

- Potential new vaccine presentation (Maroon Cap) for individuals 6 months through 4 years of age\*\* (Starting June 7)
- FDA approvals, authorizations including recent authorizations
- Extended expiry for Purple, Orange, and Gray Cap
- Gray Cap, Comirnaty<sup>®</sup>
- Use of each vaccine presentation, including storage, handling, preparation, and administration



## Poll: CDPH Appreciates Your Feedback!



How would you rate your overall satisfaction with the services and information provided by the CDPH COVID-19 Vaccine Team to support your work in the CA COVID-19 Vaccination Program?

Examples: Office hours, webinars, call centers, job aids, FAQs, flyers/posters, weekly wrap-ups

- □ Very Satisfied
- Satisfied
- Neither Satisfied nor Unsatisfied
- □ Unsatisfied
- □ Very Unsatisfied



## Clinical Update

Caterina Liu, M.D., CDPH



## Moderna & Pfizer Infant/Toddler COVID-19 Vaccines Authorized Under Emergency Use and Recommended by CDC/ACIP

- The Food and Drug Administration's (FDA) Vaccine Related Biologic Products Advisory Committee (VRBPAC) voted to support and the FDA authorized emergency use authorization (EUA) of:
  - Moderna vaccine for 6 through 17 years
  - Moderna vaccine for 6 months through 5 years
  - Pfizer vaccine for 6 months through 4 years
- The CDC's Advisory Committee on Immunization Practices (ACIP) and the Western States Scientific Safety Review Workgroup (WSSSRW) recommend:
  - Moderna vaccine for 6 months through 5 years
  - Pfizer vaccine for 6 months through 4 years
- ACIP voted to recommend the Moderna vaccine for 6-to-17 years on June 23, 2022; WSSSRW recommendation pending.

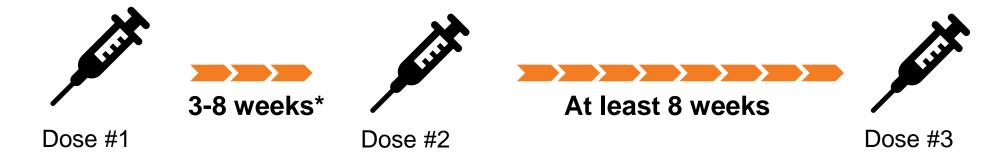
## Pediatric COVID-19 Vaccine Products

Age	Brand	Dose	Volume per dose	Primary Series
12+ years	Pfizer	30ug	0.3ml	2 doses
	Moderna	100ug	0.5ml	2 doses
5-11 years	Pfizer	10ug	0.2ml	2 doses
6-11 years	Moderna	50ug	0.5ml	2 doses
6-59 months	Pfizer	3ug	0.2ml	3 doses
6-71 months	Moderna	25ug	0.25ml	2 doses



## Primary Series Doses for Infant/Toddler:

Pfizer (3 micrograms): 3 doses for ages 6 months to under 5 years



Moderna (25 micrograms): 2 doses for ages 6 months to under 6 years



\*Shorter intervals (3 weeks for Pfizer, 4 weeks for Moderna) are recommended for individuals who are moderately or severely immunocompromised.

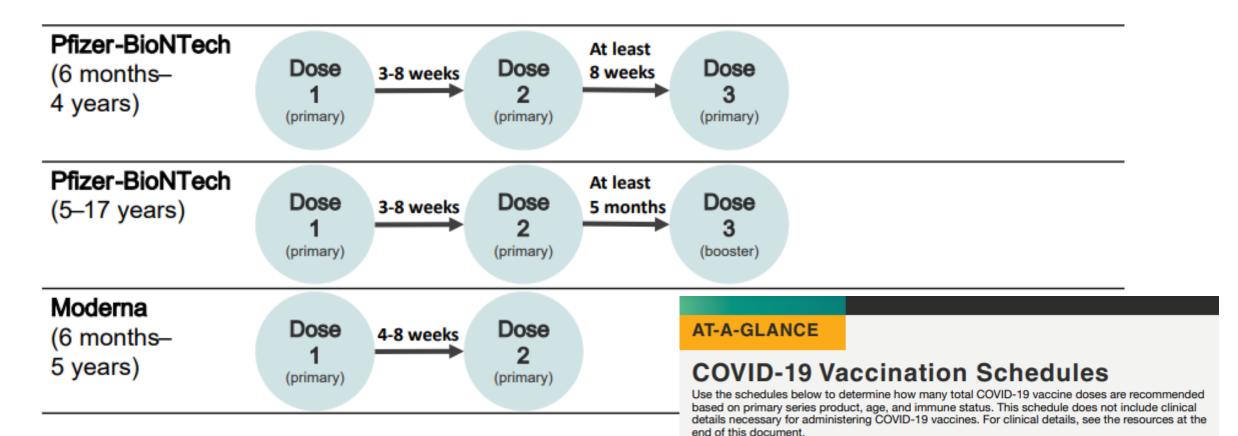


## Infant/Toddler COVID-19 Vaccine Products

		Moderna (6M – 5Y)	Pfizer (6M – 4Y)
Dose		25 mcg	3 mcg
Schedule	Dose $1 \rightarrow 2$ Dose $2 \rightarrow 3$	4 weeks (2-dose initial series)	3 weeks 8 weeks
Met primary efficacy outcome: Antibody levels equivalent to levels at older ages associated with protection against severe COVID-19?		Yes	Yes
Preliminary clinical data suggesting at least short-term protection against symptomatic infection?		Yes	Yes (based on few cases)
Effectiveness data yet against severe COVID-19?		No	No
Adverse events		Mostly mild-moderate	Mostly mild-moderate
Any fever v. placebo; fever > 104°F v. placebo		16 v. 7%: <i>0.2 v. 0%</i>	6 v. 5%: <i>0.1 v. 0%</i>
Deaths, cases of myocard identified in trial?	ditis, or new safety concerns	No	No



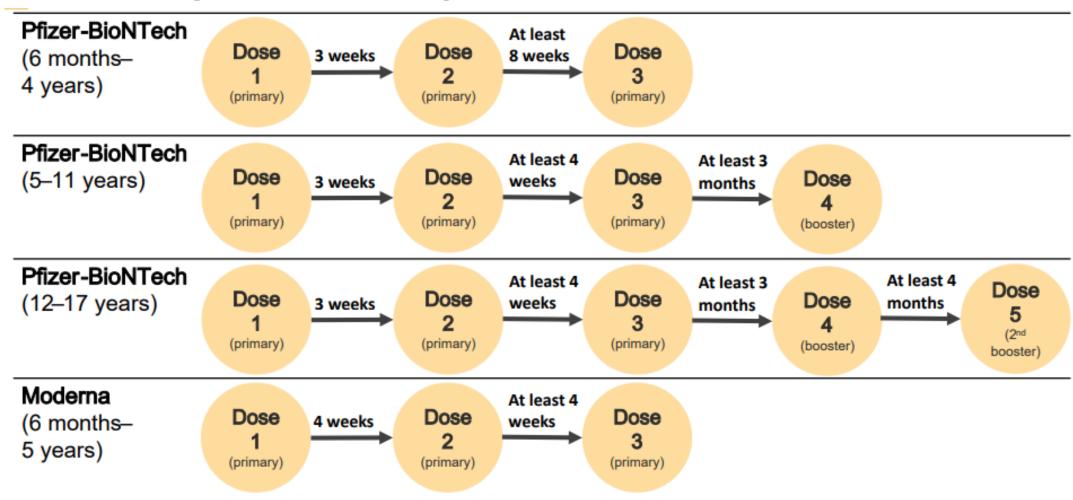
# Pediatric Schedule: People Who Are NOT Moderately or Severely Immunocompromised



**COVID-19 Vaccination Schedule for Most People** 



## Pediatric Schedule: People Who <u>ARE</u> Moderately or Severely Immunocompromised

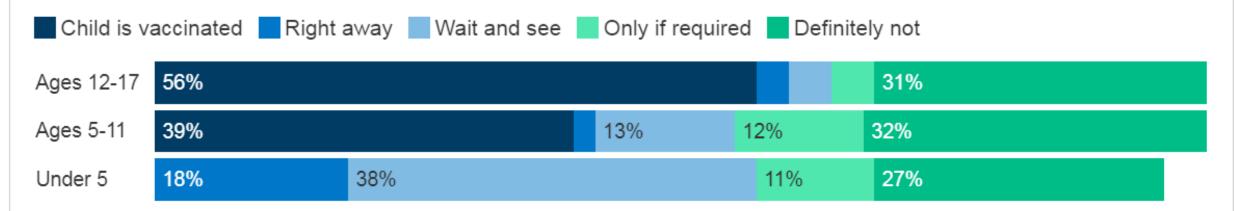




#### Figure 1

# One In Five Parents Of Children Under 5 Want To Vaccinate Their Child For COVID-19 Right Away When Authorized, But Four In Ten Want To Wait And See

Thinking about your child between the ages of...have they received at least one dose of a COVID-19 vaccine, or not? If not, do you think you will get them vaccinated...?



NOTE: Asked of parents or guardians of children under 18. For parents of children under 5, question was worded "Thinking about your child under the age of 5, once there is a COVID-19 vaccine authorized and available for your child's age group, do you think you will...?" See topline for full question wording.

KFF COVID-19 Vaccine Monitor

SOURCE: KFF COVID-19 Vaccine Monitor (April 13-26, 2022) • PNG



## COVID-19 is a Childhood Illness

## COVID-19 Impact on Children in California

As of June 8, 2022, reported COVID-19 for ages 0-to-17 years:

- > 1.68 M cases 289 K cases (17%) in children under 5 years
- > 10.4 K hospitalizations
- At least 71 deaths 25 deaths (35%) in children under 5 years
  - COVID-19 deaths have been the highest among the Latinx population.

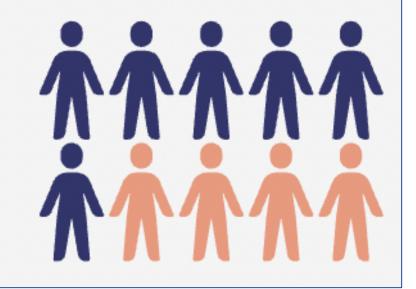


## Hospitalizations Among Children

- Children younger than 5 years old were hospitalized 5 times more during Omicron than Delta.
- Healthy children can also have severe COVID-19.

## 6 OUT OF 10

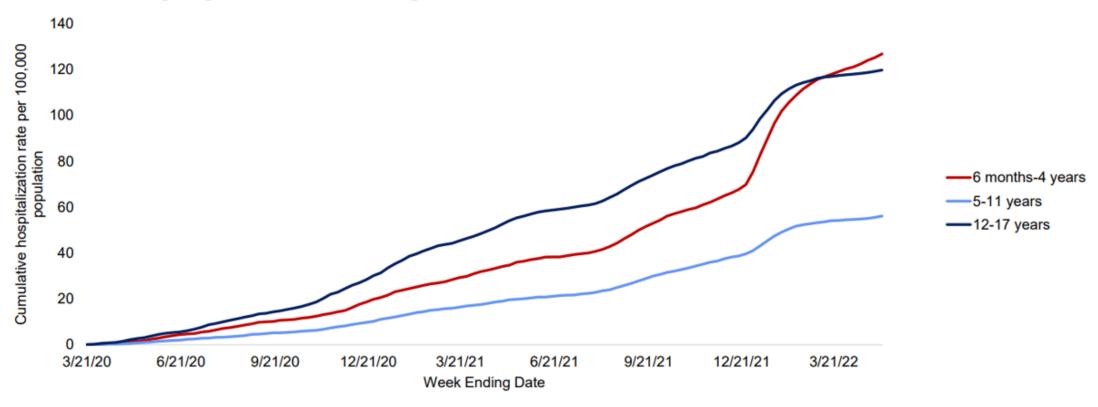
children under 5 years old who ended up in the hospital did **not** have any underlying health problems.





# Cumulative COVID-19-associated hospitalizations among children and adolescents 6 months-17 years, COVID-NET

March 2020 – March 2022

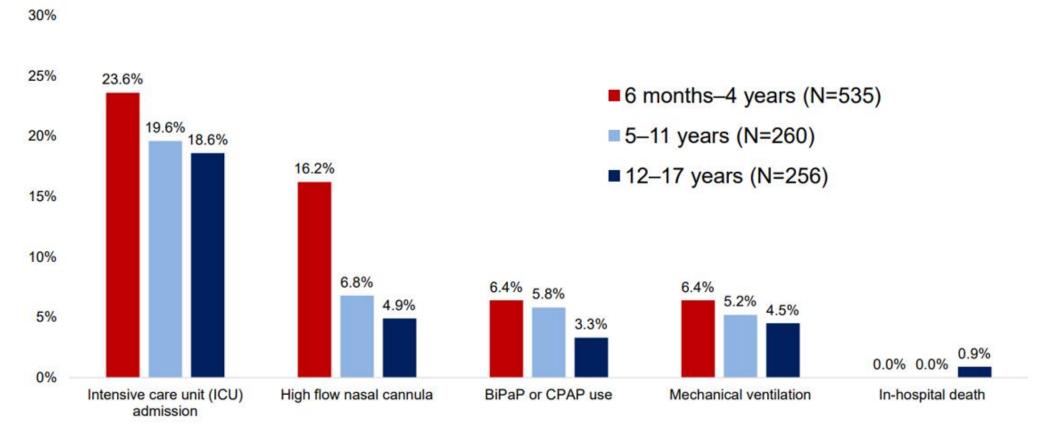


Source: COVID-NET, https://gis.cdc.gov/grasp/COVIDNet/COVID19 3.html. May 21, 2022.



# Severity of COVID-19-associated hospitalizations among children and adolescents 6 months-17 years, COVID-NET,

December 19, 2021 - March 31, 2022 (Omicron)



BiPAP: bilevel positive pressure, CPAP: continuous positive pressure

Source: COVID-NET data. Accessed May 21, 2022.



# COVID-19 as Cause of Death by Age Group, U.S. Cumulative Incidence, March 1, 2020-April 30, 2022

Age in Years	Deaths	Rank of Causes of Death
<1	269	4
1-4	134	5
5-9	134	5
10-14	195	4
15-19	701	4



## Other Pediatric Vaccine Preventable Diseases: Hospitalizations per Year Prior to Recommended Vaccines

	Hepatitis A <sup>1</sup>	Varicella <sup>2</sup> (Chickenpox)	Vaccine-type Invasive Pneumococcal Disease <sup>3</sup>	COVID-19 <sup>4</sup>
Age	5-14 years	0-4 years	0-4 years	6 months-4 years
Time period	2005	1993–1995	1998–1999	Year 1: April 2020–March 2021 Year 2: April 2021–March 2022
Hospitalization Burden (Annual rate per 100,000 population)	<1	29-42	40 <sup>5</sup>	Year 1: <b>29.8</b> Year 2: <b>89.3</b>

https://www.cdc.gov/mmwr/preview/mmwrhtml/ss5603a1.htm

<sup>5</sup> Vaccine-type invasive pneumococcal disease annual rate for children <5 years in 1998-1999 was 80 per 100.000, of which about 50% were hospitalized.</p>



<sup>&</sup>lt;sup>2</sup>Davis MM, Patel MS, Gebremariam A. Decline in varicella-related hospitalizations and expenditures for children and adults after introduction of varicella vaccine in the United States. Pediatrics. 2004;114(3):786-792. doi:10.1542/peds.2004-0012

<sup>&</sup>lt;sup>3</sup> Centers for Disease Control and Prevention (CDC). Direct and indirect effects of routine vaccination of children with 7-valent pneumococcal conjugate vaccine on incidence of invasive pneumococcal disease-United States, 1998-2003. MMWR Morb Mortal Wkly Rep. 2005 Sep 16;54(36):893-7. PMID: 16163262.

<sup>&</sup>lt;sup>4</sup> COVID-NET data, Accessed May 21, 2022.

# Pediatric vaccine preventable diseases: <u>Deaths</u> per year in the United States prior to recommended vaccines

	Hepatitis A <sup>1</sup>	Meningococcal (ACWY) <sup>2</sup>	Varicella <sup>3</sup>	Rubella <sup>4</sup>	Rotavirus <sup>5</sup>	COVID-19 <sup>6</sup>
Age	<20 years	11-18 years	5–9 years	All ages	<5 years	6 months – 4 years
Time period	1990–1995	2000–2004	1990– 1994	1966– 1968	1985– 1991	Jan 2020– May 2022
Average deaths per year	3	8	16	17	20	86

<sup>1</sup>Vogt TM, Wise ME, Bell BP, Finelli L. Declining hepatitis A mortality in the United States during the era of hepatitis A vaccination. J Infect Dis2008; 197:1282–8.

<sup>6</sup> https://data.cdc.gov/NCHS/Provisional-COVID-19-Deaths-Counts-by-Age-in-Years/3apk-4u4f/data. Accessed May 14, 2022



<sup>&</sup>lt;sup>2</sup>National Notifiable Diseases Surveillance System with additional serogroup and outcome data from Enhanced Meningococcal Disease Surveillance for 2015-2019.

<sup>&</sup>lt;sup>3</sup>Meyer PA, Seward JF, Jumaan AO, Wharton M. Varicella mortality: trends before vaccine licensure in the United States, 1970-1994. J Infect Dis. 2000;182(2):383-390. doi:10.1086/315714

<sup>4</sup>Roush SW, Murphy TV; Historical comparisons of morbidity and mortality for vaccine-preventable diseases in the United States. JAMA 2007; 298:2155-63.

<sup>&</sup>lt;sup>5</sup> Glass RI, Kilgore PE, Holman RC, et al. The epidemiology of rotavirus diarrhea in the United States: surveillance and estimates of disease burden. J Infect Dis. 1996 Sep;174 Suppl 1:S5-11.

## Post-COVID conditions in children

- Post-COVID conditions in children
  - Appear to be less common in children than in adults
  - A national survey in the UK found 7-8% of children with COVID-19 reported continued symptoms >12 weeks<sup>1</sup>
  - Can appear after mild to severe infections and after MIS-C
- Most common symptoms: Similar to adults and include fatigue, headache, insomnia, trouble concentrating, muscle and joint pain, and cough <sup>2,3</sup>
- Impact on quality of life: Limitations of physical activity, feeling distressed about symptoms, mental health challenges, decreased school attendance/participation<sup>2</sup>

<sup>1</sup>Office for National Statistics United Kingdom. (2021) Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK. Retrieved on September 17, 2021 from Office for National Statistics' website.

https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/prevalenceofongoingsymptomsfollowingcoronaviruscovid19infectionintheuk/1april2021

<sup>2</sup>Buonsenso D, Munblit D, De Rose C, et al. Preliminary evidence on long COVID in children. Acta Paediatr. 2021;110(7):2208-2211. doi:10.1111/apa.15870.

<sup>3</sup>Molteni E, Sudre CH, Canas LS, et al. Illness duration and symptom profile in symptomatic UK school-aged children tested for SARS-CoV-2. Lancet Child Adolesc Health 2021; 5: 708–18. https://www.thelancet.com/action/showPdf?pii=S2352-4642%2821%2900198-X



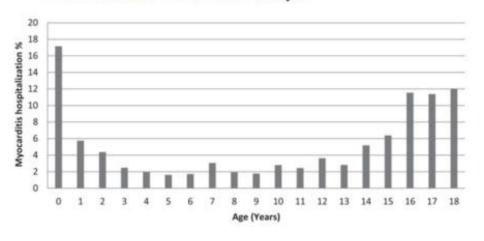
## Myocarditis in young children

## **Background rates**

- Before the COVID-19 pandemic, peaks in myocarditis hospitalizations seen in infants and adolescents
  - In adolescents, typically viral in etiology
  - In infants, many cases can represent cardiomyopathy with genetic component

#### Children

- Annual incidence 0.8 per 100,000
  - In 15-18yo, 1.8 per 100,000 in 2015-2016
- 66% male
- Median LOS 6.1 days



Vasudeva et al. American J Cardiology. 2021.

LOS = Length of hospital stay

Vasudeva et al. Am J Cardiology 2021 https://www.sciencedirect.com/science/article/pii/S0002914921002617

ACIP Meeting 6/18/22 – Dr. Oliver presentation

Previously presented: <a href="https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2021-06/02-COVID-Oster-508.pdf">https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2021-06/02-COVID-Oster-508.pdf</a>



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# VAERS reporting rates of myocarditis (per 1 million doses administered) after mRNA COVID-19 vaccination, days 0–7 and 8–21 post-vaccination\*,†

		0–7 days			8–21 days			0-7 days			8–21 days		
	Males			Males			Females			Females			
Pfizer- BioNTech	Age (yrs)	Dose 1	Dose 2	Booster	Dose 1	Dose 2	Booster	Dose 1	Dose 2	Booster	Dose 1	Dose 2	Booster
	5–11	0.2	2.6	0.0	0.6	0.0	0.0	0.2	0.7	0.0	0.2	0.0	0.0
	12-15	5.3	46.4	15.3	1.2	1.2	0.9	0.7	4.1	0.0	0.4	0.2	0.9
Ĺ	16–17	7.2	75.9	24.1	1.7	3.2	1.3	0.0	7.5	0.0	0.7	0.4	0.0
٢	18–24	4.2	38.9	9.9	1.1	2.2	0.4	0.6	4.0	0.6	0.2	0.7	0.0
	25–29	1.8	15.2	4.8	0.4	1.1	0.5	0.4	3.5	2.0	0.2	0.0	0.8
Pfizer- BioNTech and <del>~</del> Moderna	30–39	1.9	7.5	1.8	0.4	0.8	0.2	0.6	0.9	0.6	0.3	0.2	0.0
	40–49	0.5	3.3	0.4	0.2	0.5	0.0	0.4	1.6	0.6	0.2	0.2	0.0
	50-64	0.5	0.7	0.4	0.2	0.3	0.1	0.6	0.5	0.1	0.2	0.5	0.1
L	65+	0.2	0.3	0.6	0.3	0.2	0.1	0.1	0.5	0.1	0.1	0.2	0.1

<sup>\*</sup> As of May 26, 2022; reports verified to meet case definition by provider interview or medical record review; primary series and 1st booster doses only

<sup>†</sup> An estimated 1–10 cases of myocarditis per 100,000 person years occurs among people in the United States, regardless of vaccination status; adjusted for days 0–7 and 8–21 risk intervals, this estimated background is **0.2 to 2.2 per 1 million person-day 0–7 risk interval and 0.4 to 3.8 per 1 million person-day 8–21 risk interval** (peach shaded cells indicate that reporting rate exceeded estimated background incidence for the period)



### Vaccine-associated myocarditis in young children

- Risk of myocarditis after mRNA COVID-19 vaccination, if any, in young children is unknown
  - No cases occurred during clinical trials (n=7,804 with at least 7 days of follow-up)
- Based on the epidemiology of classic myocarditis and safety monitoring in children ages 5-11 years, myocarditis after mRNA COVID-19 vaccination in young children is anticipated to be rare
  - Underlying epidemiology of myocarditis fundamentally different in infants
  - Dose used in young children lower than dose used in older children



#### **Summary of GRADE**

### Pfizer COVID-19 vaccine: Children ages 6 months-4 years

Importance	Design (# studies)	Findings	Evidence type	
Critical	RCT (1)	Pfizer-BioNTech COVID-19 vaccine is effective in preventing symptomatic COVID-19; certainty in the estimate was very low	4	
omatic lab-confirmed immunobridging)  Critical RCT (1)  Pfizer-BioNTech COVID-19 vaccine is effective in preventing symptomatic COVID-19		2		
Important	No studies	Data not available from any studies	ND	
m inflammatory children (MIS-C)  Important No studies Data not available from any studies		ND		
Important	No studies	Data not available from any studies		
Critical	RCT (1)	1.0% of participants with SAEs among vaccinated and 1.5% among unvaccinated; certainty in the estimate was very low. 2 SAEs in 1 participant in the vaccine arm were judged to be related to vaccination.		
Important	RCT (1)	Severe reactions were slightly more common in vaccinated; any grade ≥3 reaction was reported by 4.3% of vaccinated vs. 3.6% of placebo group		
	Critical Critical Important Important Important Critical	Critical RCT (1)  Critical RCT (1)  Important No studies  Important No studies  Important No studies  Critical RCT (1)	Critical RCT (1) Pfizer-BioNTech COVID-19 vaccine is effective in preventing symptomatic COVID-19; certainty in the estimate was very low  Critical RCT (1) Pfizer-BioNTech COVID-19 vaccine is effective in preventing symptomatic COVID-19  Important No studies Data not available from any studies  Important No studies Data not available from any studies  Important No studies Data not available from any studies  Critical RCT (1) 1.0% of participants with SAEs among vaccinated and 1.5% among unvaccinated; certainty in the estimate was very low. 2 SAEs in 1 participant in the vaccine arm were judged to be related to vaccinated; any grade ≥3	

Evidence type: 1=high; 2=moderate; 3=low; 4=very low; ND, no data





### **Summary of GRADE**

### Moderna COVID-19 vaccine: Children ages 6 months-5 years

Outcome	Importance	Design (# studies)	Findings		
Benefits					
1. Symptomatic lab-confirmed COVID-19	Critical	RCT (1)	Moderna COVID-19 vaccine is effective in preventing symptomatic COVID-19	1	
1b. Symptomatic lab-confirmed COVID-19 (immunobridging)	Critical	RCT (1)	Moderna COVID-19 vaccine is effective in preventing symptomatic COVID-19	2	
2. Hospitalization due to		No studies	Data not available from any studies	ND	
3. Multisystem inflammatory syndrome in children (MIS-C)		No studies	Data not available from any studies	ND	
4. Asymptomatic SARS-CoV-2 Important		RCT (1)	The vaccine did not demonstrate efficacy in prevention of asymptomatic SARS-CoV-2 infection		
Harms					
5. Serious adverse events	Critical	RCT (1)	0.5% of participants with SAEs among vaccinated and 0.2% among unvaccinated; certainty in the estimate was very low. Two SAEs which occurred in one participant were judged by the investigator to be related to vaccination.		
I Reactogenicity   Important   RC   (1)			Severe reactions were more common in vaccinated; any grade ≥3 reaction was reported by 7.7% of vaccinated vs. 4.1% of placebo group	1	
vidence type: 1=high; 2=mode	rate; 3=low;	4=very low;	ND, no data	4	



#### Considerations for Extended Interval Between Dose 1 & 2

- Immunocompromised
- High risk for severe disease
- Household member with high risk for severe disease
- High COVID-19 community levels



- Reduced myocarditis risk
- Adolescent and young adult males
- Optimize vaccine effectiveness



### Vaccine Dosage and Interchangeability

#### Vaccine Dosage

- Children should receive the age-appropriate formulation and follow the schedule based on their age on the day of vaccination, regardless of their size or weight.
- If a person moves from a younger age group to an older age group during the primary series or between the primary series and receipt of the booster dose(s), they should receive the vaccine dosage for the older age group for all subsequent doses.

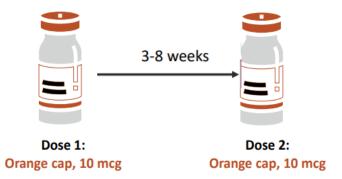
#### Interchangeability

- COVID-19 vaccines are not interchangeable.
- The same mRNA vaccine product should be used for all doses of the primary series.
- In exceptional situations in which the mRNA vaccine product administered for a previous dose(s) of the primary series cannot be determined or is not available, either age-appropriate available mRNA COVID-19 vaccine product may be administered at a minimum interval of 28 days between doses to complete the mRNA COVID-19 primary vaccination series.

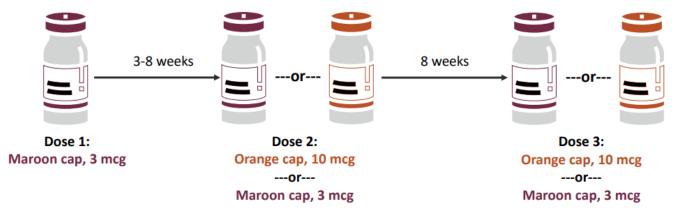


# Children Who Turn from Age 4 to 5 Years Between Any Dose in the Pfizer Primary Series

Scenario 1: A 2-dose primary series using the formulation for people ages
 5-11 years (orange cap)

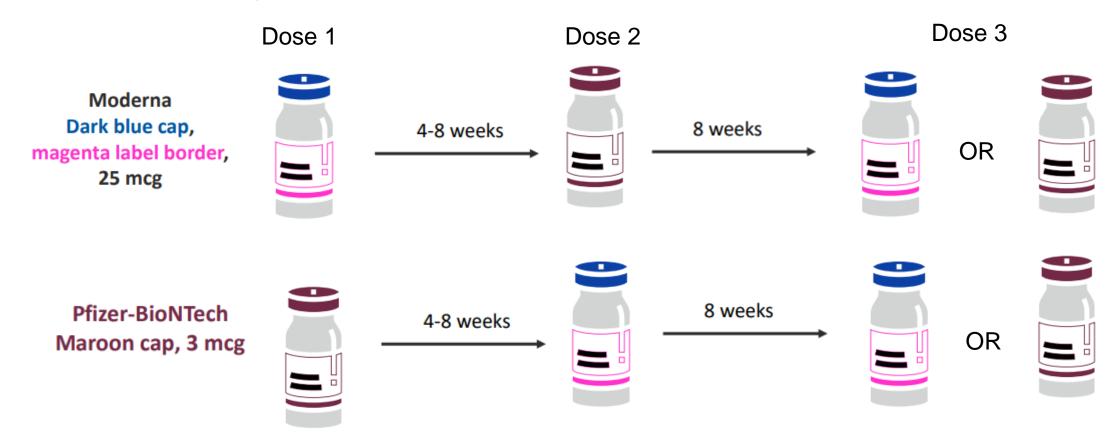


**Scenario 2**: A 3-dose primary series initiated with the formulation for ages 6 months—4 years. Dose 2 and 3 may be with: the formulation for ages 6 months—4 years or the formulation for ages 6—11 years.



### Mixed Series For Children Ages 6 Months-4 Years: 3-Dose Primary Series

Children who receive *different* mRNA products for the first 2 doses of an mRNA COVID-19 vaccine series should receive a third dose of *either* mRNA vaccine 8 weeks after the 2<sup>nd</sup> dose to complete the 3-dose primary series.

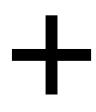


### Co-administration

- COVID-19 vaccines may be co-administered with other vaccines on the same day.
- Important to catch-up on routine immunizations. Always check if a patient is up-to-date and, if not, offer catch-up vaccines.
- Integrating COVID-19 vaccination with routine vaccination:
  - Follow best practices to avoid administration errors. See the linked resources below.
  - Use the 15-minute observation after COVID-19 vaccination (30 minutes, if at higher risk for anaphylaxis) to encourage families to **participate in <u>V-safe</u>**, and complete health screening questionnaires and counseling.











COVID-19 vaccine

Other vaccines

#### Comforting Restraint **Positions**

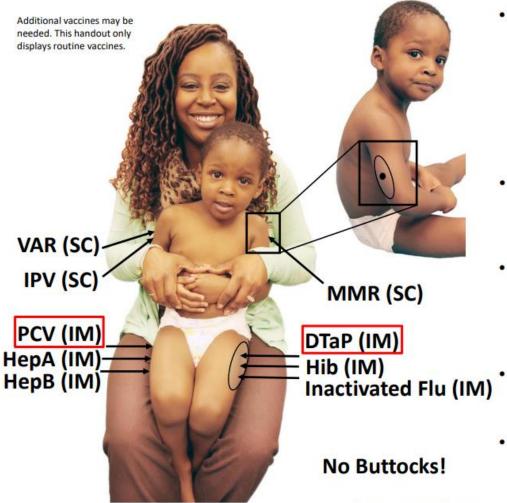


Infants and Toddlers



Older Children

### Giving All the Doses 12 Months and Older



- IM injections are given in the anterolateral thigh (preferred site for 12 mos.-2 yrs.) using a 1" needle
  - Separate IM injection sites by a minimum of 1"
  - Deltoid is preferred IM site for 3 yrs. and older
    - · Anterolateral thigh is an alternative site if deltoid cannot be used
- SC injections are given in the upper outer triceps area or thigh using a 5/8" needle (see • to the left for placement in triceps area)
- Using combination vaccines decreases the number of injections
  - IPV must be given IM when given as a combination vaccine (e.g., DTaP-IPV/Hib, DTaP-IPV-HepB)
- · Give vaccines likely to cause greater local reaction (e.g., DTaP, PCV) into separate limbs
- Give the most painful injections last (e.g., MMR, PCV)

For additional vaccine administration information see: "Administering Vaccines: Dose, Route, Site, and Needle Size" at www.immunize.org/catg.d/p3085.pdf





Intramuscular (IM) 90° Angle

Subcutaneous (SC) 45° Angle

#### Under 3 Years:

#### **Vastus Lateralis**

### hepatitis B (DTaP-IPV-HepB) **Preferred** schedule for children (www.cdc.gov/vaccines/schedules/hcj \*May also be administered by subcutaneous injection.

#### YOU CALL THE Vaccine Administration: Intramuscular (IM) Injection Children 1 through 2 years of age

#### Administer these vaccines by IM injection:

- Diphtheria, tetanus, and pertussis (DTaP)
   Diphtheria, tetanus, pertussis, polio, Diphtheria, tetanus, pertussis, polio, and
- Diphtheria, tetanus, pertussis, polio. and Haemophilus influenzae type b
- Haemophilus influenzae type b and hepatitis B (DTaP-IPV-Hib-HepB)
- Haemophilus influenzae type b
- Hepatitis B (HepB)
- Influenza vaccine, inactivated (IIV) Inactivated polio vaccine (IPV)\*
- Meningococcal conjugate (MenACWY)
- Pneumococcal conjugate (PCV13)
- Pneumococcal polysaccharide (PPSV23)\*
- Note: Age, recommendations for use, and other indications vary by product. Always review manufacturers' product information as well as the current immunization Id-adolescent.html) before administering vaccine.

To ensure vaccines are safe and effective, it's important to prepare and administer them correctly:

- Use a new, separate needle and syringe for each injection.
- Perform hand hygiene before vaccine preparation, between patients, when changing gloves (if worn), and any time hands become soiled.†

Gloves are not required unless the person administering the vaccine is likely to come in contact with potentially infectious body fluids or has open lesions on the hand-If worn, perform hand hygiene and change gloves between patient

#### Use the correct syringe and needle.

- Administer the vaccine using either a 1-mL or 3-mL syringe.
- Use the correct gauge and needle length.<sup>‡</sup>
- 22- to 25-gauge needle
- 1-inch (25 mm) needle

Use a 5/8- to 1-inch (16 to 5 mm) if using the deltoid muscle. A 5/8-inch needle may be used only if the skin is stretched tightly and the subcutaneous tissue is not bunched.

- 2. Identify the injection site.
- Recommended site: the vastus lateralis muscle in the anterolateral thigh<sup>6</sup>
- Use anatomical landmarks to determine the injection site. The muscle is located on the anterior lateral aspect of the thigh. The middle third of the muscle is used for injections - above the lateral condyle and below the greater trochanter.

<sup>5</sup>The deltoid muscle can be used if the muscle mass is adequate

- 3. Administer the vaccine correctly.
- Inject the vaccine into the middle and thickest part of the muscle. Insert the needle at a 90-degree angle and inject all the vaccine in the muscle tissue
- . Aspiration (i.e., pulling back on the plunger) is not necessary before injecting the vaccine. No large blood vessels are present at the recommended injection sites, and a process that includes aspiration might be more painful. For more information, see www.cdc.gov/vaccines/hcp/acip-recs/general-recs/

administration.html

- . If administering more than one injection in the same limb:
- · Use the vastus lateralis muscle in the anterolateral thigh. It is preferred because of its larger muscle mass.
- · Separate the injection sites by 1 inch if possible.

For additional information, go to CDC's clinical resources on vaccine administration;

Advisory Committee on Immunization Practices General Best Practice Guidelines for Immunization: Vaccine Administration section at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/administration.htm

Vaccine administration resource library at www.cdc.gov/vaccines/hcp/admin/resource-library.html



Vastus Lateralis Muscle

1 in (25 mm)



#### 3 Years and Over:

#### **Deltoid**



Vaccine Administration: Intramuscular (IM) Injection Children 3 through 6 years of age

5/8 in (16mm) -

If the skin is stretched tightly

and the subcutaneous

#### Administer these vaccines by IM injection:

- Diphtheria, tetanus, and pertussis (DTaP) Diphtheria, tetanus, pertussis, polio, Diphtheria, tetanus, pertussis, and polio
- (DTaP-IPV) Diphtheria, tetanus, pertussis, polio, and
- hepatitis B (DTaP-IPV-HepB) Hepatitis A (HepA)
- Diphtheria, tetanus, pertussis, polio, and
   Hepatitis B (HepB) Haemophilus Influenzae type b (DTaP-IPV/Hib)
- Influenza vaccine, inactivated (IIV)
- Inactivated polio vaccine (IPV)\*
- Meningococcal conjugate (MenACWY)
- Pneumococcal conjugate (PCV13)
- Pneumococcal polysaccharide (PPSV23)\*

1 in (25 mm) -

Note: Age, recommendations for use, and other indications vary by product. Always review manufacturers' product information as well as the current immunization schedule for children (www.cdc.gov/vaccines/schedu \*May also be administered by subcutaneous injection.

Haemophilus Influenzae type b and

hepatitis B (DTaP-IPV-Hib-HepB)

Haemophilus Influenzae type b

To ensure vaccines are safe and effective, it's important to prepare and administer them correctly:

- Follow asentic technique
- Use a new, separate needle and syringe for each injection.
- Perform hand hygiene before vaccine preparation, between patients, when changing gloves (if worn), and any time hands

Gloves are not required unless the person administering the vaccine is likely to come in contact with potentially infectious body fluids or has open lesions on the hands

- 1. Use the correct syringe and needle.
- Administer the vaccine using either a 1-mL or 3-mL syringe
- Use the correct gauge and needle length.<sup>‡</sup>
- 22- to 25-gauge needle
- 5/8- to 1-inch (16 to 25 mm) needle

Use a 1- to 1.25-inch (25-32 mm) needle if administering vaccine in the vastus lateralis muscle in the anterolateral third

- 2. Identify the injection site.
- Preferred site: the deltoid muscle in the upper arm<sup>5</sup>
- Use anatomical landmarks to determine the injection site. The deltoid muscle is a large, rounded, triangular shape. Find the acromion process, which is the bony point at the end of the shoulder. The injection site will be below the hone and above the axillary fold/armpit.

<sup>5</sup>The vastus lateralis muscle in the anterolateral thigh can also be used.

- Administer the vaccine correctly.
- Inject the vaccine into the middle and thickest part of the muscle. Insert the needle at a 90-degree angle and inject all the vaccine in the muscle tissue.
- Aspiration (i.e., pulling back on the plunger) is not necessary before injecting the vaccine. No large blood vessels are present at the recommended injection sites, and a process that includes aspiration might be more painful. For more information, see www.cdc.gov/vaccines/hcp/acip-recs/general-recs/

- If administering more than one IM injection: Use the vastus lateralis muscle in the anterolateral thigh for young children. This muscle is preferred for young children because of its larger muscle mass.
- Separate the injection sites by 1 inch if possible.

For additional information, go to CDC's clinical resources on vaccine administration

Advisory Committee on Immunization Practices General Best Practice Guidelines for Immunizations: Vaccine Administration section at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/administration.htm Vaccine administration resource library at www.cdc.gov/vaccines/hcp/admin/resource-library.html

11/01/2021 CS 322033-H







Injection

Sites

### COVID-19 Vaccination: Clinical Talking Points

#### 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 <u>most trusted source</u> of medical information for families.

#### Begin to discuss COVID-19 vaccination now.

The top reason parents cite for not vaccinating their children is the need for more information. For families who may be hesitant about the COVID-19 vaccine, begin the conversation by asking, "How do you feel about your child getting the COVID-19 vaccine?" The goals of these conversations are to have a cordial discussion, answer questions, understand and acknowledge any fears they express, and provide accurate information.



#### Validate parental concerns and answer questions without judgement.

As their child's provider, your guidance is influential. Hearing your opinion that immunization is safe and effective can be reassuring. When parents express hesitation, ask about and acknowledge their concerns. For example, "If I heard those things, 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. 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 <u>multiple studies</u> have shown it is effective in preventing severe illness and hospitalization, including <u>against the Omicron</u> variant.
  - During the Omicron period, unvaccinated children ages 5-11 were twice as likely to be hospitalized with COVID-19 than vaccinated children.
  - During the Omicron period, 1 in 5 children hospitalized with COVID-19 required ICU-level care.
     Vaccination lowered the risk of critical COVID-19 by 79%.
  - 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.

California COVID-19 Vaccination Program

IMM-1431 (6/1/22) Page 1

#### **Providers of Pediatric Services:**

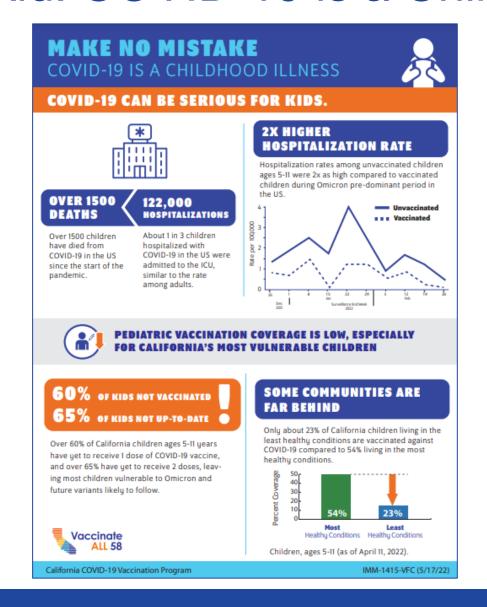
- Begin COVID-19 vaccine conversations now
- Listen
- Validate parental concerns
- Answer questions without judgment
- Supply accurate information

#### <u>Includes talking points on:</u>

- Myocarditis
- Fertility
- Safety
- And more...



### Job Aid: COVID-19 is a Childhood Illness



**YOU CAN SAVE LIVES NOW** BY PARTICIPATING IN THE **COVID-19 VACCINATION PROGRAM** 



**OF VFC PROVIDERS NOT GIVING COVID-19** VACCINE

- Many VFC providers have yet to enroll in the COVID-19 Vaccination Program, leaving many vulnerable children without access in their medical home. Enroll today!
- Many VFC providers enrolled in the COVID-19 vaccine program haven't ordered vaccine. Once enrolled, start ordering and administering vaccine!
- More access to vaccine is needed: Pharmacy appointments and school clinics are helpful but not enough to reach many children.







CALIFORNIA IMMUNIZATION

California COVID-19 Vaccination Program

#### ONLY 1 OF 6

PARENTS SAY THEIR CHILD'S DOCTOR RECOMMENDED THE COVID-19 VACCINE.

- As a trusted source, your recommendation can influence the decision to vaccinate.
- If you choose not to enroll, have a referral plan in place to ensure that your patients get vaccinated elsewhere.

- HWHR published April 22, 2022 (data from COVID-NET sample of 14 states and 99 counties from December 19, 2021–February 26, 2022)
- COVID-19 Vaccine Progress Dashboard Data
- Niational Career for Health Statistics
- Kaiser Family Foundation COVID-19 Vaccine Monitor 2021 Opdate on Parents. Views of vaccines for Kids (figure III)
- CDC COVID Data Tracker: Hospital Admission

IMM-1415-VFC (5/17/22)



### CDC Updated Guidelines and Available Resources

Information for jurisdictions, clinicians, vaccine providers, and community partners to plan and implement vaccination for children who are eligible:

- Interim Clinical Considerations for Use of COVID-19 Vaccines (updated June 19, 2022)
- Planning COVID-19 Vaccination for Children | CDC
  - Updated Pediatric COVID-19 Vaccination Operational Planning Guide-Information for Vaccine for Children 6 Months through 4 Years, and Children 6 Months through 5 Years Old (cdc.gov)
- Resources to Promote the COVID-19 Vaccine for Children & Teens | CDC
- Equity in Childhood COVID-19 Vaccination (cdc.gov)
- CDC COVID Data Tracker
- Ways Health Departments Can Help Increase COVID-19 Vaccinations | CDC
- What to Consider When Planning to Operate a COVID-19 Vaccine Clinic
- How Schools and Early Care and Education (ECE) Programs Can Support COVID-19 Vaccination
  - Hosting Vaccination Clinics: Best Practices for School Districts and Early Care and Education (ECE) Programs
  - Customizable Content for School and Childcare-Located Vaccination Clinics
  - Considerations for Planning School-Located Vaccination Clinics

#### Information for parents and caregivers:

- COVID-19 Vaccines for Children and Teens | CDC
- Frequently Asked Questions about COVID-19 Vaccination in Children | CDC
- 6 Things to Know about COVID-19 Vaccination for Children | CDC
- V-safe After Vaccination Health Checker | CDC



#### FDA VRBPAC & ACIP MEETINGS: JUNE 2022

Monday	Monday Tuesday		Thursday	Friday	Saturday
20 Juneteenth Holiday	21	22 ACIP	23 ACIP Moderna EUA for children 6-17 years	24	25
	First sh	ed to arrive			
27	Strain composition of COVID-19 Vaccines	29	30		

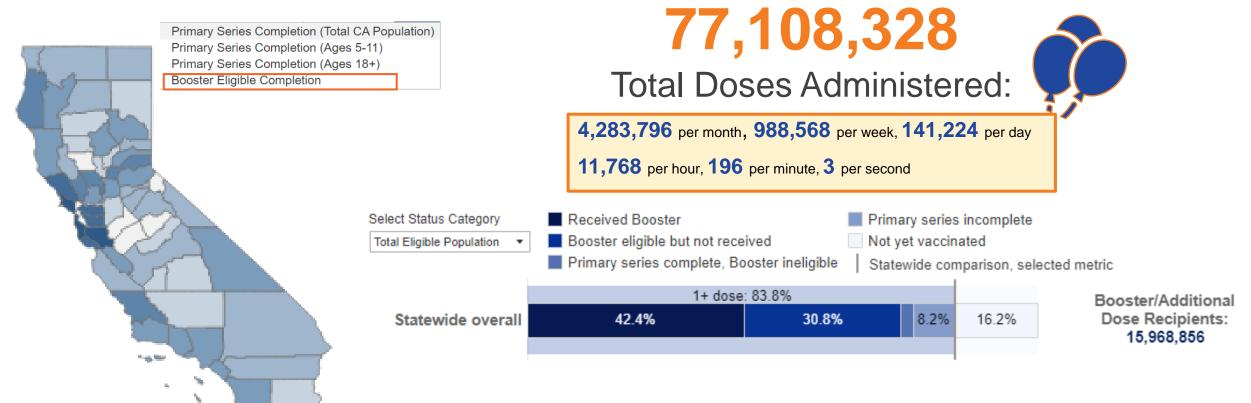
### Vaccine Administration Data

Elizabeth Reosti, CDPH



### Vaccine Administration Summary

as of June 20, 2022



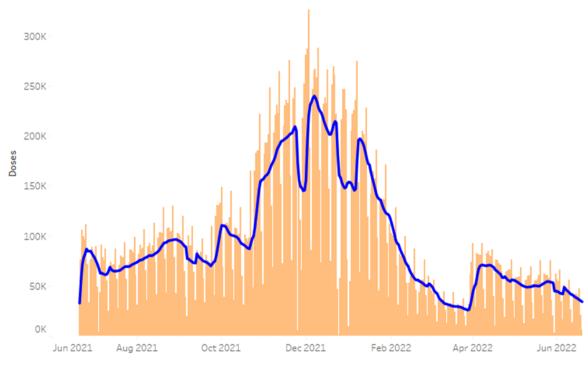


Public Dashboard

### Trends in Vaccine Administration

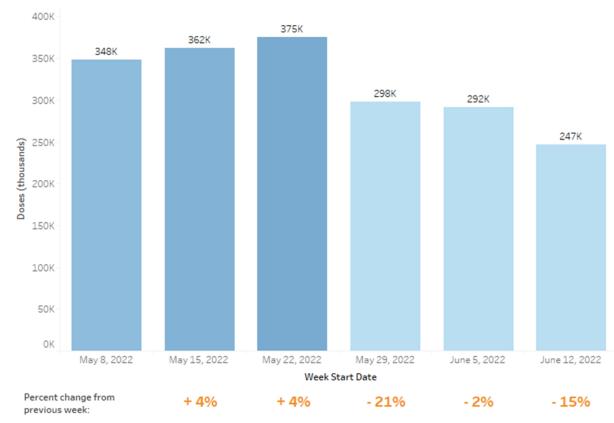
as of June 20, 2022





Month of Date Administered

#### Weekly Doses Administered: **Statewide** (thousands)





### Trends in Vaccine Administration

as of June 20, 2022

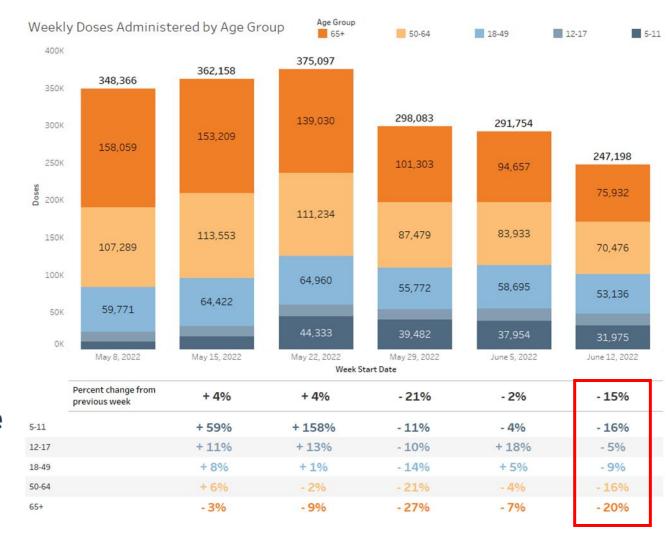
#### **New Booster Eligibility Driving Demand**

- Second boosters among 50+ year-olds
- First boosters among 5-to-11-year-olds

FDA NEWS RELEASE

#### Coronavirus (COVID-19) Update: FDA Expands Eligibility for Pfizer-BioNTech COVID-19 Vaccine Booster Dose to Children 5 through 11 Years

For Immediate Release: May 17, 2022

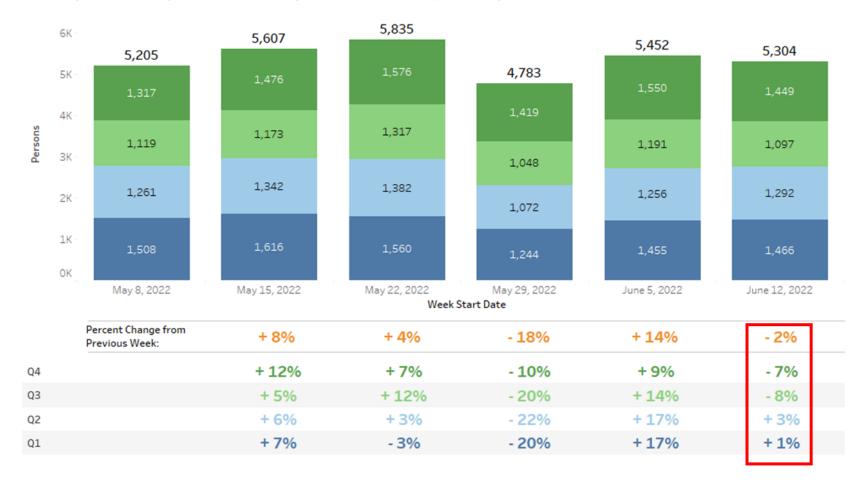


### 5-to-11-Year-Old Vaccination Trends

as of June 20, 2022

Recent decrease in first doses among 5-to-11-year-olds

Weekly New 5-11 year-old Partially Vaccinated Recipients by VEM: Statewide





### **Data Summary**

as of June 20, 2022

#### **Latest Metrics**

77.1 Million doses administered

247k doses administered in previous week (-15% pt change)

5,304 new 5-11-year-old recipients (-2% pt change)

#### **System Updates**

- •4<sup>th</sup> doses included in overall dose admin count, but not currently displayed in immunization status
- Vaccines approved for children 6 months and older (Pfizer and Moderna)



### CAIR2: COVID-19 Vaccine Updates

Michael Powell, CDPH



### Previous (Moderna)

Tradename	CVX
Moderna Spikevax (Red Cap)	207
Moderna (Dark Blue Cap)	221

### New (Moderna)

Tradename	CVX
Moderna (Magenta Border) <6Y	228
Moderna (Purple Border) 6-11Y	221
Moderna Spikevax (Red Cap) 12Y+	207

### New (Pfizer)

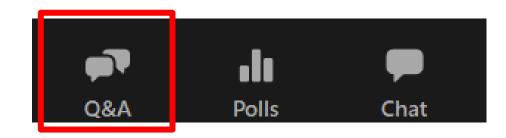
Tradename	CVX
Pfizer COVID (Maroon Cap) <5Y	219



### Provider Office Hours Q&A

During today's session, please use the **Q&A panel** to ask your questions so our subject matter experts can respond directly.







### Storage & Handling

Kate McHugh, CDPH





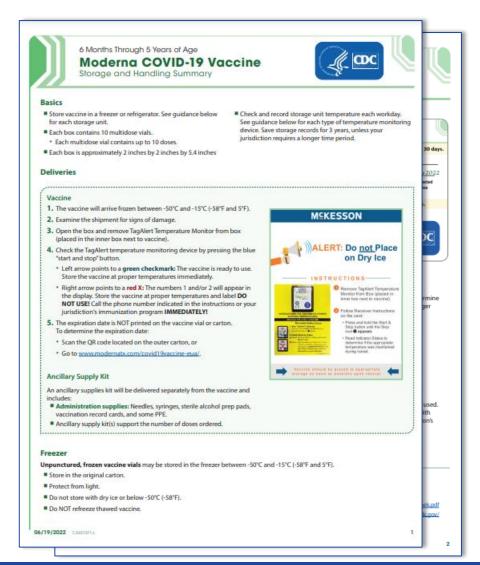
## COVID-19 Vaccine Product Guide

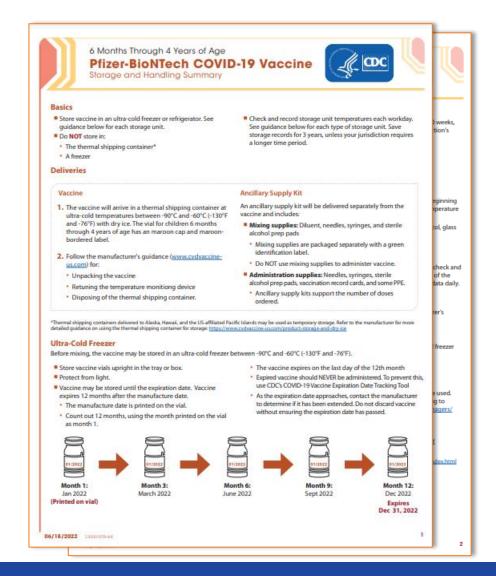
#### Vaccinate **COVID-19 Vaccine Product Guide ALL 58** Check vaccine labels before use to avoid mix-ups. Products may look similar. Moderna Janssen (J&J) Refer to CDC Product Guide for more information. Details may differ from packaging; EUA fact sheets supersede info on vials and carton. Note: Pfizer 12+ (purple cap) no longer distributed. 6-11 years: primary /Toddler 12+ years: primary\* Adult s-5 years 18+ years: booster 18+ years: booster Moderna Janssen (J&J) 18+ years Pfizer Infant/Toddler **Pediatric** Adol/Adult Infant/Toddler 6-11 years: primary\* 12+ years: primary\* Adult 18+ years: booster 6 months-4 vears\* 5-11 years 12+ years 6 months-5 years 18+ years: booster 18+ years t dilute. Do not dilute. Do not dilute Do not dilute 0.5 mL 0.5 mL 0.5 mL Light g dose) (50 mcg dose) (100 mcg dose) - Section Magenta Purple Blue Border Border Border 0.5 mL 0.5 mL 0.25 mL\* (only ages 18+) (only ages 18+) Dark Blue Cap **Red Cap** Orange Cap Dark Blue Cap **Packaging** Maroon Cap **Gray Cap** Blue Cap 2 hours If needed immedi-2.5 hours Doses Per Vial 10 doses 10 doses 6 doses 10 doses 5 doses 10-11 doses 5 doses stand at (Let vial stand at (Let vial stand at ately, thaw at room emp for room temp for 100 doses 60 doses 100 doses room temp for 15 temperature Carton Size 100 doses 50 doses 100 doses 50 doses before 15 min before minutes before Min. Standard Order 100 doses 100 doses 300 doses 100 doses 100 doses 100 doses 100 doses istering.) administering.) administering.) Carton NDC # 59267-0078-4 59267-1055-4 59267-1025-4 80777-279-99 80777-275-99 80777-273-99 59676-580-15 45 minutes at utes at 1 hour at Carton: up to 4 hrs 219 217 CVX 218 221 207 212 25°C 15° to 25°C 15° to 25°C Vial: about 1 hour at 77°F) (59° to 77°F) 25°C (77°F) max Storage Limits Before Puncture: Label vaccine with expiration and use-by dates. Strictly comply with manufacturer guidance. (59° to 77°F) **(N)** (0) (0) ULT (-90°C to -60°C) Until expiration Until expiration Until expiration to 24 Store up to 24 Store up to 24 Store up to 12 at 8°C to hours at 8°C to hours at 8°C to 25°C hours at 9°C to 25°C ▧ Thermal Shipper (11) 16°F to 77°F) 25°C (46°F to 77°F) (46°F to 77°F) (47°F to 77°F) Freezer Until expiration Until expiration Until expiration (-50°C to -15°C) (-50°C to -15°C) (-50°C to -15°C) Refrigerator (2-8°C) Up to 10 weeks Up to 10 weeks Up to 10 weeks Up to 30 days Up to 30 days Up to 30 days Until expiration Disard after 6 hours at 2° to 8°C 12 hours at 2°C to 12 months from 12 months from 12 months from Checking Expiration Check product Check product Check product Check product irs at 2°C to 12 hours at 2°C to 25°C (36°F to 77°F) (36°F to 46°F) or manufacture date. manufacture date. manufacture date. website, QR code, or Dates<sup>†</sup> website or QR code website or QR code website or QR code 36°F to 77°F 25°C (36°F to 77°F) Discard after 20 2 hours at 25°C Check FDA fact sheet. Check FDA fact sheet Check FDA fact sheet. call 800-565-4008 punctures. (77°F) max Labels for Pfizer Maroon Cap and Moderna Booster products may not reflect expanded age ranges. † Do not dispose of expired vaccine until checking with manufacturers for extended expiration dates. IMM-1399 (6/23/22) California COVID-19 Vaccination Program IMM-1399 (6/23/22)





### Infant/Toddler Vaccine Products S&H Summaries







### Job Aid: Preventing Administration Errors

#### **Preventing Administration Errors**

California COVID-19 Vaccination Program



Once an error or deviation has occurred, use this guidance to prevent the administration error from occurring again. Refer to CDC's Interim Clinical Considerations or Revaccination Guidance for next steps.

An administration error is any preventable event that may cause or lead to improper use of vaccine or patient harm. To reduce errors, complete <u>COVID-19 vaccine product training</u> and demonstrate competency for products your site will administer. Report errors to <u>VAERS</u> and <u>ISMP</u> to help prevent future errors.

Error Type	Guidance to Prevent Administration Errors
Wrong Site or	Administer COVID-19 vaccines in deltoid muscle (or anterolateral thigh) using IM injection.
Route	If multiple vaccines are administered at a single visit, administer each injection in a different injection site. Post this anatomical illustration to help identify recommended injection sites.  For people 211 years, the deltoid muscle can be used for more than one intramuscular injection administered at different sites in the muscle.  For children (5–10 years), if more than two vaccines are injected in a single limb, the vastus lateralis muscle of the anterolateral thigh is the preferred site because of greater muscle mass.  For 6 months through 2 years: The injection site is the vastus lateralis in the anterolateral thigh.  For 3 years and older: The injection site is the deltoid muscle.  An IM injection given with too short a needle is functionally a subcutaneous injection; post this reference guide and use clinical judgment to adjust needle length for patient weight and gender.  COVID-19 vaccines may be administered without regard to timing of other vaccines. If coadministering COVID-19 vaccines with routine vaccines, prepare and organize syringes to ensure products are administered in correct site and route.  Ask patient to completely expose their shoulder when administering in the deltoid muscle. Ensure vaccinators can locate upper/lower borders of a safe IM injection zone. Incorrect administration into shoulder joint instead of deltoid muscle can trigger inflammation and injury.*
Wrong Age	Do not administer vaccine to an unauthorized age group.  Select the correct vaccine product based on patient eligibility and age at date of vaccination.
Wrong	Select correct vaccine formulation based on patient age at date of vaccination.
Formulation	COVID-19 vaccine dosages are based on patient age at date or vaccination.  OVID-19 vaccine dosages are based on patient age—not size or weight; administering the wrong formulation may result in a lower-than-authorized dosage and insufficient protection.  Double check vial labet; always verify patient birthdate. (Early shipments of Pfizer 6M-4Y do not correctly state the age indicators. Please refer to the <a href="Pfizer Provider Letter">Pfizer Provider Letter</a> .)  Refer to <a href="COVID-19 Vaccine Product Guide">COVID-19 Vaccine Product Guide</a> for cap colors and age indicators by product.
Overdosage	Do not administer a higher-than-authorized vaccine injection volume for primary series and additional or booster doses.
	<ul> <li>If too much vaccine is administered, dose may invoke stronger adverse effects; double check injection volume for product &amp; dose before administration. (Report adverse events to VAERS.)</li> </ul>

California COVID-19 Vaccination Program

IMM-1410 (6/21/22)

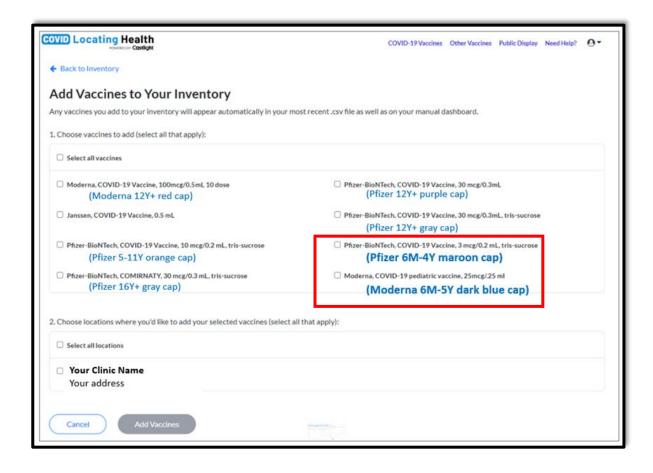
#### Preventing Administration Errors includes:

- Revaccination Guidance
- Error Types
- VAERS (Vaccine Adverse Event Reporting System)
- ISMP (Institute for Safe Medication Practices)
- Reporting
- Top 10 Errors Related to COVID-19 Vaccination





### Job Aid: Reporting Inventory to VaccineFinder



Begin reporting Infant/Toddler inventory once vaccines arrive, at least weekly on Fridays by close of business.

	Pfizer 6M-4Y (maroon)	Pfizer 5-11Y (orange)	Pfizer 12Y+ (gray)	Pfizer 12Y+ (purple)	Moderna 6M-5Y (dark blue)	Moderna 12Y+ (red)	Janssen (blue)
NDC	59267- 0078-4	59267- 1055-4	59267- 1025-4	59267- 1000-2	80777- 279-99	80777- 273-99	59676- 580-15
Max Doses Reported	10	10	6	6	10	10	5

Report these maximum quantities for unpunctured vials.

### What is Happening with Moderna 6-to-11?

- It's coming!
  - Shipments will likely begin late next week or early the week of the 4<sup>th</sup>.
- They are repurposing the Moderna "booster-only" vials for this age group because the concentration is the same as a booster dose.
  - This means the vials will initially arrive mislabeled because they were already manufactured!
  - These vials will have a blue cap and purple border.
- What about Moderna 12-to-17?
  - Moderna 12-to-17 will use the same adult vials (with a red cap) that you already have in inventory



#### Moderna 6-to-11 Vial Presentation

- Blue cap and purple border
- Mislabeled says booster dose only
- 5 doses per vial
- 0.5mL injection volume
- Same storage conditions as the other Moderna products
  - ∘ -50C to -15C for long-term storage
  - 2C to 8C for up to 30 days in the fridge
- Letter explaining the mislabeling





# Links to EUA Fact Sheets and Healthcare Provider Letter

- Moderna Infant/Toddler 6 months-5 years
  - Provider fact sheet
  - Recipient/caregiver factsheet
- Pfizer Infant/Toddler 6 months-4 years
  - Provider fact sheet
  - Recipient/caregiver fact sheet
  - Letter to explain mislabeling
- Moderna 6 years-11 years
  - Provider fact sheet
  - Recipient/caregiver fact sheet
  - Letter to explain mislabeling



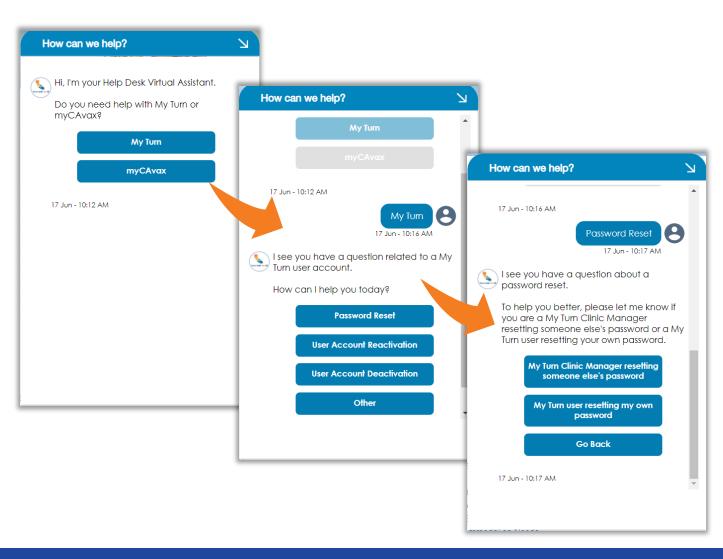
### Vaccine Management

Eric Norton, My Turn, and Daniel Conway, myCAvax



### Help Desk Chat Virtual Assistant–Launched June 17th!





The Help Desk Chat launched a Virtual Assistant for My Turn Clinic and Public as well as myCAvax on **June 17**<sup>th</sup>.

Get help with tasks directly in the chat by clicking on the item.

My Turn Clinic and myCAvax users can use Virtual Assistant for the following:

- Password Reset
- User Account Reactivation
- User Account Deactivation



# My Turn Public

### What's New in My Turn Release 28!



#### New updates for My Turn Public and Clinic launched on 6/20.

My Turn Clinic

#### **Release Highlights**

- ✓ The Pfizer Infant/Toddler 3 dose primary series for children 6 months- 4 years old has been deployed.
- ✓ The Moderna Infant/Toddler 2 dose primary series for children 6 months- 5 years old has been deployed.

#### **Release Highlights**

- ✓ The Moderna Infant/Toddler 6 months-5-years two dose series has been enabled.
- ✓ The Pfizer Infant/Toddler 6 months-4-years threedose vaccine series has been enabled.
  - ✓ VA Flow Updates & EUA Links
  - ✓ Update to Dose Fields
  - ✓ Add Vaccine Supply & Inventory
  - ✓ Bulk Walk-In Upload
  - ✓ Clinic Creation Setup
  - ✓ Walk-in flow Update
  - √ Vaccine Administrator Flow Update
  - ✓ Single/Bulk Update
  - ✓ Appointment/IIS Tab Filter Update



### Release 28 - Infant/Toddler Updates





In Release 28, Pfizer Infant/Toddler (3 doses) and Moderna Infant/Toddler (2 doses) were deployed through scheduling, walk-ins, and inline and CSV bulk-upload on My Turn Public and Clinic.

Clinic Managers and Vaccine Administrators can now create and update appointments for Infants/Toddlers ages 6 months – 5 years and schedule all doses in the series.

### Moderna Ages 6-to-17 Ordering and My Turn Update



The FDA amended the Emergency Use Authorization (EUA) to include the Moderna 6-to-11 and 12-to-17 age groups.

ACIP met yesterday and voted in favor of recommending Moderna 6-to-11 and Moderna 12-to-17. The Western States Scientific Safety Review Workgroup will be meeting soon to review their recommendations as well. My Turn Clinic and Public will be updated soon. myCAvax will also provide additional information about ordering information as we receive it from CDC.

# Infant/Toddler Deliveries This Week!





Deliveries for Wave 1 and Wave 2 of the Pfizer Infant/Toddler (6 months-4 years, Maroon Cap) and Moderna Infant/Toddler (6 months-5 years, Blue Cap) are occurring this week!

Monday	Tuesday	Wednesday	Thursday	Friday		
June 20	21	22	23	24		
Previously Scheduled Wave 1 Deliveries	Previously Scheduled Wave 2 Deliveries					
27	28	29	30	1		
Monday	Tuesday	Wednesday	Thursday	Friday		
June 20	21	22	23	24		
Expected Wave 1 Deliveries		Expected Wave 2 Deliveries				
27	28	29	30	1		
Expected Wave 2 Deliveries						



### Ordering for Infant/Toddler Vaccine



You can place Small Orders for the **Pfizer Infant/Toddler** (6 months - 4 years, **Maroon Cap**) through **AmerisourceBergen** (TPR) as of **June 20**<sup>th</sup> (Minimum 30 doses, Maximum 90 doses).



Routine Ordering: Now all Infant/Toddler Orders follow the Order and Distribution Cadence Calendar.



# APPENDIX



### What's New on My Turn: Release 28 (06/20)

### **My Turn Public**

#### **General Enhancements**

- ✓ Pfizer Infant/Toddler rollout for 3 dose primary series for children 6 months-4 years old
- ✓ Moderna Infant/Toddler rollout for 2 dose primary series for children 6 months-5 years old
- √ [Testing] Update error messaging for better user experience and accessibility

### **My Turn Clinic**

#### **General Enhancements**

- ✓ Moderna Infant/Toddler 6 months-5-years two dose series
- ✓ Pfizer Infant/Toddler 6 months-4-years three-dose vaccine rollout
  - ✓ VA Flow Updates & EUA Links
  - ✓ Update to Dose Fields
  - ✓ Add Vaccine Supply & Inventory
  - ✓ Bulk Walk-In Upload
  - ✓ Clinic Creation Setup
  - ✓ Walk-in flow Update
  - √ Vaccine Administrator Flow Update
  - ✓ Single/Bulk Update
  - ✓ Appointment/IIS Tab Filter Update
  - ✓ Dashboard Homepage Update



### myCAvax – Known Issues - *Updated 6/20*



### **Known Issues**

### Inventory On-Hand Records Not Updating upon Second Save

✓ We are currently investigating an issue in which saving orders as 'Draft' through multi-line ordering and then changing the on-hand inventory data, upon order submission, is not saving the changes made to the on-hand inventory data.



### **Workaround/Next Steps**

- ✓ Fix: TBD
- No Workaround for the Time Being

# Slide Icon Key

Icon	Meaning
	This is to label slides that are referencing upcoming or existing functionality and how to use it in the system.
	This is to label slides that include important system reminders.
<u> </u>	This is to label slides that include tips and best practices to improve your system experience.



### myCAvax Release Roadmap

### RECENTLY DEPLOYED

June 16th (R27.0)

#### **Orders**

- ✓ LHDs to Move Small Orders to Standard Orders
- ✓ Order Page Layout Changes
- √ New order cancelation 'Status Reason' options
- ✓ Update Audit History for Orders/Transfers
- ✓ Add 'Doses Requested' to Standard Order Screen

#### Account

✓ Storing docusign at the Location Application

#### Community

- ✓ Add Knowledge Center article to account page
- ✓ Change Flow Title for Multiple Flows

#### Other

- ✓ Auto-Deactivate Licenses
- ✓ Default tab display on opening of records
- √ Remaining email templates to Lightning

#### **IN PROGRESS**

July 14th (R28.0)

#### Orders

- Order Fulfillment Updates to allow multiple lots and general UI enhancements
- ✓ Allow CDPH and LHD users to update additional details on the Shipment Records such as quantity, product, expiration date, etc.
- √ Validate Shipping Hours
- ✓ Set Flags for Temporary Closure on Vaccine Order Review page

#### Account

- √ Temporary Closure for Location Accounts
- ✓ Add VFC Regions to Accounts
- ✓ Add Calibration Expiration date to Storage Unit List

#### Community

- ✓ Update Thermometer Type options
- ✓ Add Data Logger as Shipment Incident Type

#### **Site Visits**

- √ Provider Category
- ✓ VFC Assigned Pin

#### Other

✓ Put LHD Dashboard on LHD Homepage

### **UPCOMING**

August 11th (R29.0)

#### **Orders**

✓ Draft Order Enhancements

#### Account

- ✓ Provider initiated Disenrollment
- ✓ Disenrollment due to inactivity

#### Other

- ✓ Start of Contact enhancements to remove duplicate contacts
- ✓ Sharing Rule enhancements for accounts, storage units, etc.



### My Turn Public Product Roadmap

### June 20th (R27)

CURRENT
July 13<sup>th</sup> (R28.4)

### UPCOMING July 27th (R29)

#### Release 28

- Pfizer Infant/Toddler rollout for 3 dose primary series for children 6 months-4years old
- Moderna Infant/Toddler rollout for 2 dose primary series for children 6 months-5-years old
- [Testing] Update error messaging for better user experience and accessibility
- ✓ [Continued] Failure Point Notification setting up monitoring tools throughout system to flag (potential) issues
- ✓ Continued Analysis Consider Walk-in and bulk upload appointments for clinic's Public Portal capacity and availability

#### Release 28.4

- ✓ Moderna 6-11 and 12-17 rollout
- √ [Testing] Update error messaging for better user experience and accessibility
- ✓ [Continued] Failure Point Notification setting up monitoring tools throughout system to flag (potential) issues
- ✓ Continued Analysis Consider Walk-in and bulk upload appointments for clinic's Public Portal capacity and availability

#### Release 29

- Removing flu zero out flu vaccine supplies to remove nasal spray and flu shot tags
- ✓ In-home vaccination and transportation page updates to reflect guidance for under 5 patients
- √ [Testing] Custom flows for vaccine type
- [Delivery] Update error messaging for better user experience and accessibility
- ✓ [Continued] Failure Point Notification setting up monitoring tools throughout system to flag (potential) issues
- √ [Testing] Consider Walk-in and bulk upload appointments for clinic's Public Portal capacity and availability



# My Turn Public

### My Turn Clinic Product Roadmap

### June 20th (R28)

### CURRENT July 13th (R28.4)

### UPCOMING July 27th (R29)

### Release 28

- ✓ Moderna Infant/Toddler 6 month-5years two dose series
- ✓ Pfizer Infant/Toddler 6 month-4years three dose series
  - ✓ Dose Fields Update
  - Add Vaccine Supply & Inventory
  - ✓ Bulk Walk-In Upload
  - ✓ Clinic Creation Setup
  - ✓ Walk-in Flow Update
  - ✓ Vaccine Administrator Flow Update
  - ✓ Single/Bulk Update
  - ✓ Appointment/IIS Tab Filter Update
  - ✓ Dashboard Homepage Update

#### Release 28.4

- Moderna 6-years-11-years two dose series
- ✓ Moderna 12-years-17-years two dose series
  - Add Vaccine Supply & Inventory
  - ✓ Bulk Walk-In Upload
  - ✓ Clinic Creation Setup
  - ✓ Walk-in Flow Update
  - ✓ Vaccine Administrator Flow Update
  - ✓ Single/Bulk Update
  - Appointment/IIS Tab Filter Update
  - Dashboard Homepage Update

#### Release 29

- ✓ [SMS/Email] Opt-out on the Walk-In flow
- ✓ [Vaccine Inventory] Entering Lot Numbers correctly
- ✓ [CAIR2] Concatenate "Cross Street 1" and "Cross Street 2"



# Wrap-up

Leslie Amani, CDPH



## Additional Support

Type of \$	Support	Description	<b>Updated 6.6.22</b>	
	COVID-19 Provider Call Center	The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace.  • Email: <a href="mailto:covidcallcenter@cdph.ca.gov">covidcallcenter@cdph.ca.gov</a>		
		Phone: (833) 502-1245, Monday through Friday from 8AM–6PM		
	Enrollment Support	For Provider enrollment support, please contact myCAvax Clinic Operations at		
		Email: myCAvaxinfo@cdph.ca.gov		
	myCAvax Help Desk	Dedicated staff provide up-to-date information and technical support on the myCAvax system.		
	myCAvax neip besk	Email: myCAvax.HD@Accenture.com		
		<ul> <li>Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM</li> </ul>		
		For training opportunities: <a href="https://eziz.org/covid/education/">https://eziz.org/covid/education/</a>		
My Turn Clinic	My Turn Clinic Help Desk	For <b>onboarding support</b> (those in the process of onboarding): <a href="mailto:myturnonboarding@cdph.ca.gov">myturnonboarding@cdph.ca.gov</a>		
	my rum emme neip beek	For <b>technical support</b> with My Turn Clinic for COVID-19 and flu vaccines: <a href="MyTurn.Clinic.HD@Accenture">MyTurn.Clinic.HD@Accenture</a> (833) 502-1245, option 4: Monday through Friday 8AM–6PM	e.com or	
		For job aids, demos, and training opportunities: flu at <a href="https://eziz.org/covid/myturn/flu/">https://eziz.org/covid/myturn/flu/</a> and COVID at <a href="https://exiz.org/covid/myturn/flu/">https://eziz.org/covid/myturn/flu/</a> and COVID at <a href="https://exiz.org/covid/myturn/flu/">https://eziz.org/covid/myturn/flu/</a> and COVID at <a href="https://exiz.org/covid/myturn/flu/">https://eziz.org/covid/myturn/flu/</a> and COVID at <a href="https://exiz.org/">https://exiz.org/</a> and <a href="https://exiz.org/">https://exiz.org/<a href="https://exiz.org/">https://exiz.org/</a></a>	:://eziz.org/covid/myturn/	
Archived Communications  For archived communications from the COVID-19 Provider Call Center about the visit  • Website: EZIZ Archived Communications		For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Visit	accination Program	
		Website: EZIZ Archived Communications		



### Hear it? Clear It.

If you see or hear of any vaccine-related rumors within the communities you serve, share them with our Trust and Safety team via the CDPH Rumors Inbox.



### Trust and Safety Team

Our shared mission is to reduce COVID-19 vaccine hesitancy and increase vaccination across the State of California.



### **How You Can Help**

You are critical in our effort to provide Californians accurate and timely information around COVID-19 vaccination.



### Monitor What You See and Hear

Monitor online media and what you hear in your local communities for potential rumors and inaccurate information.

If found, report it to rumors@cdph.ca.gov

Contact



### Public COVID-19 Call Center

- Phone: (833) 422-4255: M-F 8AM-8PM; S-S 9AM-5PM
- For questions about general COVID questions, including COVID-19 vaccines, scheduling vaccination appointments through My Turn, school-related question, masking, testing, and more.

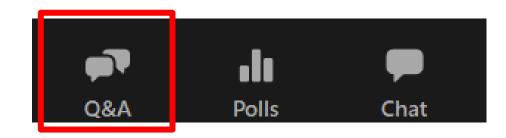




### Provider Office Hours Q&A

During today's session, please use the **Q&A panel** to ask your questions so our subject matter experts can respond directly.







# Thank you!



### **Monday**

My Turn and myCAvax Office Hours

Next session: Monday, June 27, 12PM

### **Friday**

**Provider Office Hours** 

Next session: Friday, July 1, 9AM

