Welcome to
Talking with Parents about COVID-19 Vaccines for Infants/Toddlers

September 1, 2022
12:00PM-1:00PM
Housekeeping

For Panelists: Please remember to mute yourself when not speaking.

For Attendees: Please access today’s slides through the following link: [https://eziz.org/covid/crucialconversations](https://eziz.org/covid/crucialconversations)

Please use “Q&A” to ask questions.

For post-webinar questions, contact [rachel.jacobs@cdph.ca.gov](mailto:rachel.jacobs@cdph.ca.gov)
Questions & Answers and Discussion

During today's session, please use the Q&A panel to ask your questions.
Webinar Objectives

- Understand the burden of COVID-19 infections in infants and toddlers
- Review the data behind COVID-19 vaccines in this age group
- Learn how to discuss COVID-19 vaccinations in an effective and non-confrontational manner
# Agenda: Thursday, September 1, 2022

<table>
<thead>
<tr>
<th>No.</th>
<th>Item</th>
<th>Speaker(s)</th>
<th>Time (PM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Welcome</td>
<td>Rachel Jacobs (CDPH)</td>
<td>12:00 – 12:05</td>
</tr>
<tr>
<td>2</td>
<td>Crucial COVID-19 Conversations Webinar: Vaccination for Infants/Toddlers</td>
<td>Eric Ball, MD, FAAP</td>
<td>12:05 – 12:40</td>
</tr>
<tr>
<td></td>
<td><strong>Questions &amp; Answers</strong></td>
<td></td>
<td>12:40 – 12:55</td>
</tr>
<tr>
<td>3</td>
<td>Resources, Poll, and Wrap-Up</td>
<td>Rachel Jacobs (CDPH)</td>
<td>12:55 – 1:00</td>
</tr>
</tbody>
</table>
Poll: CDPH appreciates your feedback!

How confident are you in your ability to effectively discuss COVID-19 vaccination with parents?

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident
Talking with Parents about COVID-19 Vaccines for Infants/Toddlers

Eric Ball, MD, FAAP
CHOC Children's Primary Care Network
American Academy of Pediatrics, California
#ThisIsOurShot
Cumulative Number of Pediatric Cases: United States
As of August 25, 2022

- **14,448,662** total pediatric cases
- Eight states reported:
  - over 500,000 pediatric cases
  - 22% or more of cases were in children
Cumulative COVID-19-Associated Hospitalizations among Children and Adolescents 6 months - 17 years
March 2020 – March 2022
Cumulative COVID-19-Associated Hospitalizations among Children and Adolescents 6 months - 17 years
March 2020 – March 2022
Severity of COVID-19-Associated Hospitalization among Children and Adolescents 6 months – 17 years
December 19, 2021 – March 31, 2022 (Omicron period)

BiPAP: bilevel positive pressure, CPAP: continuous positive pressure

CDC ACIP Meeting 6.17.2022: COVID-19 epidemiology in children ages 6 months–4 years
Percent of Children Ages 6 months – 4 years with COVID-19-Associated Hospitalization with Underlying Health Conditions
March 2020 – March 2022

- At least 1 underlying medical conditions  - No underlying medical conditions

New Vaccine Surveillance Network, March 2020 – April 2022

- 46%  - 54%

COVID-NET, March 2020 – March 2022

- 49%  - 51%
COVID-19 is a Leading Cause of Death among Children Ages 0 – 19 Years
March 1, 2020 – April 30, 2022

<table>
<thead>
<tr>
<th>Age group</th>
<th>Rank of COVID-19 among causes of death</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1 year</td>
<td>4</td>
</tr>
<tr>
<td>1–4 years</td>
<td>5</td>
</tr>
<tr>
<td>5–9 years</td>
<td>5</td>
</tr>
<tr>
<td>10–14 years</td>
<td>4</td>
</tr>
<tr>
<td>15–19 years</td>
<td>4</td>
</tr>
</tbody>
</table>
Summary: COVID-19 Epidemiology in Children and Adolescents Ages 6 months – 4 years

• As of June 12, 2022, COVID-19 has caused **more than 570,000** cases among infants under 1 year and **over 1.9 million cases** among children ages 1 – 4 years.

• Omicron surge in the United States led to the highest number of COVID-19 cases, emergency department visits, and hospitalization rates seen during the pandemic.
Summary: COVID-19 Epidemiology in Children and Adolescents Ages 6 months – 4 years

- Children ages 6 months – 4 years are at risk of severe illness from COVID-19.
  - More than half of hospitalized children ages 6 months – 4 years had no underlying conditions.
  - During Omicron predominance, COVID-19-associated hospitalizations among children ages 6 months – 4 years have similar increased severity compared to older children and adolescents.
  - Burden of COVID-19 hospitalization is similar to or exceeds that of other pediatric vaccine-preventable diseases.
- COVID-19 pandemic continues to have a significant impact on families and increases disparities.
June 15, 2022: Federal Food and Drug Administration (FDA) Vaccines and Related Biological Products Advisory Committee (VRBPAC) met and recommended Emergency Use Authorization (EUA) for:
  - Moderna COVID-19 vaccine in children 6 months through 5 years
  - Pfizer-BioNTech COVID-19 vaccine in children 6 months through 4 years

FDA officially authorized both on June 17

CDC Advisory Committee on Immunization Practices (ACIP) met on June 17 and 18 and unanimously endorsed the recommendation that all children 6 months through 4 years should receive vaccination.

CDC ACIP recommended Moderna’s COVID-19 vaccine for 6-17-year-olds on June 23.
Where are Infants/Toddlers Getting Vaccinated?

- Pharmacies have a diminished role
- Pop-up events (childcare, Women, Infants, and Children [WIC])

*More Primary Care Providers are needed!*
  - Vaccines for Children (VFC) and non-VFC providers
  - Medical home is a trusted source of care, and most have established relationships and familiarity with childhood immunizations.
Infant/Toddler Vaccination Trends: California
as of August 29, 2022

- **8.4%** of children under 5 have initiated primary series
- **2.6%** of children under 5 have completed their primary series
Disparities in Infant/Toddler Vaccination Trends: California as of August 29, 2022

- Disparities in vaccination coverage rates by Vaccine Equity Metric Quartile after the first ten weeks of eligibility
- Children living in the Most Healthy Places are >7 times more likely to have initiated vaccination than children living in the Least Healthy Places

15.4% pts
Pediatric Vaccination Trends: United States

Our vaccination efforts are slowing.
Proportion of U.S. Children Ages 6 Months – 4 Years Who Received the Initial Dose of the COVID-19 Vaccine by State of Residence
Proportion of U.S. Children Ages 5 – 11 Years Who Received the Initial Dose of the COVID-19 Vaccine
by State of Residence

Proportion of U.S. Children Ages 12 – 17 Years Who Received the Initial Dose of the COVID-19 Vaccine by State of Residence

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...?

- **Child is vaccinated**
  - Ages 12-17: 56%
  - Ages 5-11: 39%
  - Under 5: 18%
- **Right away**
  - Ages 12-17: 31%
  - Ages 5-11: 12%
  - Under 5: 38%
- **Wait and see**
  - Ages 12-17: 13%
  - Ages 5-11: 12%
  - Under 5: 11%
- **Only if required**
  - Ages 12-17: 32%
  - Ages 5-11: 12%
  - Under 5: 27%
- **Definitely not**
  - Ages 12-17: 31%
  - Ages 5-11: 32%
  - Under 5: 27%

**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.

**SOURCE:** KFF COVID-19 Vaccine Monitor (April 13-26, 2022) • PNG
Discussing COVID-19 Vaccines: Raising Awareness and Urgency

- Parents may be unaware that their infants/toddlers are eligible for COVID-19 vaccines.
- Parents may not think their children need the COVID-19 vaccine.
- Vaccine safety is a top concern among parents.
In general, COVID-19 vaccines may be administered without regard to timing of other vaccines. This includes simultaneous administration of COVID-19 vaccine and other vaccines on the same day.

However, there are additional considerations for Moderna, Novavax, and Pfizer-BioNTech COVID-19 vaccines if administering an orthopoxvirus vaccine.

In accordance with general best practices, routine administration of all age-appropriate doses of vaccines simultaneously is recommended for children for whom no specific contraindications exist at the time of the healthcare visit.

Coadministration of COVID-19 Vaccines with other Vaccines
Vaccine Safety

• COVID-19 vaccines are safe. Over 220 million people, including over 23 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.
Vaccine Safety: Myocarditis

A recent study of almost 50,000 children ages 5-11 who received their COVID vaccine showed few serious side effects of the vaccine, including a much lower rate of myocarditis versus older groups.
Vaccine Safety: 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.

• No cases of myocarditis seen in clinical trials for children 6 months – 5 years.
Vaccine Safety: Myocarditis

- Even for older children and adults, the risk of myocarditis is much 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.
Vaccine Safety: Fertility & Pregnancy

• The vaccine has not been shown to affect fertility.

• Many recent studies found no differences in pregnancy rates among people who are vaccinated versus people who have not received the vaccine.

• The vaccine has been safely given to over 200,000 pregnant people.
Preliminary data on Pfizer vaccine for children 6 months through 4 years shows it is **73%** effective in preventing COVID-19 disease.

- Between March and June 2022 (during testing), there were **21** COVID-19 cases among the **351** children who got placebo shots, compared to just **13** among the **794** children given three vaccine doses.
U.S. Reports to VAERS Among Children after Primary Series Pfizer-BioNTech (ages 6 months – 4 years) or Moderna (ages 6 months – 5 years) Vaccination
As of August 21, 2022

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>Doses admin(^\d)</th>
<th>Total reports</th>
<th>Median age</th>
<th>Male(^\d) n (%)</th>
<th>Female(^\d) n (%)</th>
<th>Non-serious n (%)</th>
<th>Serious n (%)</th>
<th>Myocarditis reports (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pfizer-BioNTech</td>
<td>890,378</td>
<td>496</td>
<td>3 years</td>
<td>249 (50)</td>
<td>245 (49)</td>
<td>486 (98)</td>
<td>10 (2)</td>
<td>0</td>
</tr>
<tr>
<td>Moderna</td>
<td>664,484</td>
<td>521</td>
<td>2 years</td>
<td>272 (52)</td>
<td>240 (46)</td>
<td>512 (98)</td>
<td>9 (2)</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>1,554,862</td>
<td>1,017</td>
<td>3 years</td>
<td>521 (51)</td>
<td>485 (48)</td>
<td>998 (98)</td>
<td>19 (2)</td>
<td>0</td>
</tr>
</tbody>
</table>

* Among children ages 6 months–4 years after Pfizer-BioNTech, and among children ages 6 months–5 years after Moderna, vaccinated during June 18–August 21, 2022; reports received and processed as of August 23, 2022.
\(^\d\) Dose 1 and dose 2 administered among children described in previous footnote during June 16–August 18, 2022.
\(^\d\) 2 reports after Pfizer-BioNTech and 9 reports after Moderna did not have sex reported.
\(^\d\) Based on the Code of Federal Regulations if one of the following is reported: death, life-threatening illness, hospitalization or prolongation of hospitalization, permanent disability, congenital anomaly or birth defect.
During the Omicron period, unvaccinated children were more than **twice as likely** to be hospitalized for COVID.
Vaccine Effectiveness Against Hospitalization

Vaccination lowered the risk of critical COVID hospitalization by 79% during the Omicron period.

### Table: Vaccine Effectiveness Against Hospitalization

<table>
<thead>
<tr>
<th>Subgroup</th>
<th>Vaccinated Case Patients</th>
<th>Vaccinated Control Patients</th>
<th>Vaccine Effectiveness (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescents 12–18 yr of age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delta-predominant period</td>
<td>33/684 (5)</td>
<td>442/1161 (38)</td>
<td>92 (89 to 95)</td>
</tr>
<tr>
<td>Critical Covid-19</td>
<td>6/198 (3)</td>
<td>442/1161 (38)</td>
<td>96 (90 to 98)</td>
</tr>
<tr>
<td>Noncritical Covid-19</td>
<td>27/486 (6)</td>
<td>442/1161 (38)</td>
<td>91 (86 to 94)</td>
</tr>
<tr>
<td>Omicron-predominant period</td>
<td>89/234 (38)</td>
<td>100/196 (51)</td>
<td>40 (9 to 60)</td>
</tr>
<tr>
<td>Critical Covid-19</td>
<td>11/51 (22)</td>
<td>100/196 (51)</td>
<td>79 (51 to 91)</td>
</tr>
<tr>
<td>Noncritical Covid-19</td>
<td>77/175 (44)</td>
<td>100/196 (51)</td>
<td>20 (−25 to 49)</td>
</tr>
</tbody>
</table>

**NEJM: BNT162b2 Protection against the Omicron Variant in Children and Adolescents**
Vaccine Effectiveness Against Multisystem Inflammatory Syndrome (MIS-C)

- Multisystem Inflammatory Syndrome in Children (MIS-C) is a serious condition that can happen in children after infection with COVID-19, even if they had mild symptoms or no symptoms at all.
  - The COVID-19 vaccine lowers the risk of MIS-C by 91%, according to data from July-December 2021.
  - In California, there have been over 960 cases of MIS-C, many of which were admitted to an ICU (as of 5/9/22).
Vaccine Effectiveness against Diabetes

Children infected with COVID-19 were found to be more likely to develop diabetes than those without COVID-19. Vaccination may lower this risk.
Vaccine Effectiveness Against Long COVID

- We are still learning about Long COVID in children. Children have reported ongoing respiratory, cardiac, neurologic, and other symptoms following COVID-19 infection.
- Research in adults suggests that people who are vaccinated against COVID-19 are less likely to develop Long COVID.

**Fig. 3: Risk and 6-month excess burden of post-acute sequelae in people with BTI compared to those with SARS-CoV-2 infection without prior vaccination.**

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AAP: Post COVID-19 Conditions in Children and Adolescents
Nature Medicine: Long COVID after breakthrough SARS-CoV-2 infection
This graphic shows the pooled prevalence of long-COVID by symptoms in children and adolescents:

- Meta-analyses revealed that the prevalence of more than 40 long-COVID symptoms in children and adolescents.
- The presence of one or more symptoms following a SARS-CoV-2 infection was **25.24%**.
Benefits of COVID-19 Vaccination: School and Childcare Opportunities

The vaccine can shorten time away from school, childcare, and work. Vaccinated children spent less time sick in bed than unvaccinated children, during the Omicron period.
Benefits of COVID-19 Vaccination: Protection for Others

- The vaccine can help protect others at home, including the most at-risk members of your family and community, such as grandparents, babies, and people with compromised immune systems.
  - Vaccinated persons with COVID-19 were one-third less likely to transmit to others in their household in the Omicron period.

[Source: CDC MMWR: SARS-CoV-2 B.1.1.529 (Omicron) Variant Transmission Within Households — Four U.S. Jurisdictions, November 2021–February 2022]
Talking with Families about the COVID-19 Vaccine
# COVID-19 Vaccine Language Tips

<table>
<thead>
<tr>
<th>Do Say</th>
<th>Don’t Say</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccination</td>
<td>Injection or shot</td>
</tr>
<tr>
<td>A safe and effective vaccine</td>
<td>A vaccine developed quickly</td>
</tr>
<tr>
<td>Authorized by FDA based on clinical testing</td>
<td>Approved by FDA; Operation Warp Speed; Emergency Use Authorization*</td>
</tr>
<tr>
<td>Get the latest information</td>
<td>There are things we still don’t know</td>
</tr>
<tr>
<td>Keep your family safe; keep those most vulnerable safe</td>
<td>Keep your country safe</td>
</tr>
<tr>
<td>Public Health</td>
<td>Government</td>
</tr>
<tr>
<td>Health/medical experts and doctors</td>
<td>Scientists</td>
</tr>
<tr>
<td>People who have questions</td>
<td>People who are hesitant, skeptical, resistant, or “anti-vaxxers”</td>
</tr>
</tbody>
</table>

*The perceived speed of vaccine development is a current barrier among many audiences. These recommendations are based partly on research conducted by the de Beaumont Foundation.*
## Conversation Methodology

<table>
<thead>
<tr>
<th>3</th>
<th>5</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steps to Start the Conversation</td>
<td>Key Messages</td>
<td>Post-Conversation Steps</td>
</tr>
</tbody>
</table>

To address patients concerns, use the 3-5-3 method.
3 Steps to Initiating Conversations

1. Ask and listen to the answer
   - “What do you think about the vaccine?”
   - “Why do you feel that way?”
   - “What concerns do you have about the vaccine?”

2. Create an alignment of safety
   - “I would be scared too. Let’s do what’s safe here.”
   - “We both want what's safest for you.”

3. Find common goals
   - “We all want to be able to safely be with our loved ones again.”
   - “What reasons would motivate you to get vaccinated?”
   - Find their personally motivating reason.
5 Key Messages

1. The vaccine will keep you safe.

   The vaccine will protect you from getting very sick. Over 220 million Americans have been safely vaccinated and are now protected.
2. Mild side effects are common, but serious side effects are rare.

Mild side effects are a sign your body is activating to protect you. For a few days after vaccination, many people temporarily feel:

- Sore arm (at administration site)
- Tired or fatigue
- Headache
- Muscle pain
- Joint pain
3. The best vaccine is the one that is available to you.

Many pediatric providers are only offering one brand of the COVID vaccine for children 6 months to 5 years. Both have been shown to be safe and offer a robust immune response.

(Caveat is that bivalent vaccines that protect against Omicron BA5 will likely be available in 1-2 weeks for people older than 12 years)
4. The vaccine is built on 20 years of research and science.

It is good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.
5 Key Messages

5. Have questions? Please ask.

I’m glad that you want to know more. Ultimately, the choice is yours. If you have questions, talk with your doctor or healthcare provider soon. Go to myturn.ca.gov or text your zip code to GETVAX or VACUNA to get your free vaccine today.
3 Steps Post-Conversation

1. Acknowledge their agency and personal choice
   “I want you to get vaccinated today, but ultimately it’s your choice.”
   “I'm here as a resource to help you.”

2. Keep lines of communication open
   Trust is a journey. Give folks a way to reach you that you are comfortable with as they consider their decision.

3. Offer to find a vaccine
   Offer myturn.ca.gov or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.
Thank You!

eball@choc.org
Twitter: @DrEricBall
Questions & Answers and Discussion

During today's session, please use the Q&A panel to ask your questions.
Resources & Polls

Rachel Jacobs, CDPH
Poll: CPDH appreciates your feedback

Following this training, how confident are you in your ability to talk with your patients and clients about COVID-19 vaccines?

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident
Clinical Talking Points for Providers of Pediatric Services

A guide to having effective conversations with families about COVID-19 vaccines:

- Start the conversation now
- Validate parental concerns
- Provide accurate information
Back-to-School Toolkit

Toolkit includes:
• Fliers
• Fact sheets
• Social media
• Virtual backgrounds

Materials available in English, Spanish, Tagalog, Simplified Chinese, Hmong, and Punjabi
#ThisIsOurShot Toolkit
COVID-19 Crucial Conversations Campaign

**COVID-19 VACCINE CONVERSATIONS**

**TOP MESSAGES**

**SAFETY**
The vaccine will protect you from getting very sick from COVID. Over 100 million Americans have been safely vaccinated and are now protected.

**SIDE EFFECTS**
Side effects are common. They are a sign your body is building up its defenses to protect you. Many people temporarily feel:
1. Sore arm (near site of vaccination)
2. Fatigue
3. Headache
4. Muscle pain
5. Joint pain

**EFFECTIVENESS AND VARIANTS**
Each vaccine is nearly 100% effective at preventing hospitalization and death from COVID and its variants. It will allow us to do the things we love and miss most. Vaccinated individuals can get a mild COVID infection.

**SPEED**
It’s good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

**QUESTIONS?**
I’m glad you want to know more. Ultimately, the choice is yours. If you have questions, talk with your doctor or healthcare provider soon. Text your zip code to GETVAX (438829) to get your free vaccine today.

**Do Say**
- Vaccination
- A safe and effective vaccine
- Authorized by FDA based on clinical testing
- Get the latest information
- Keep your family safe and keep those most vulnerable safe
- Public Health
- Health care facilities and doctors
- People who have questions
- People who are hesitant, skeptical, resistant, or “anti-vaxxers”

**Don’t Say**
- Injection or shot
- A vaccine developed quickly
- Approved by FDA, Operation Warp Speed, Emergency Use Authorization
- There are things we still don’t know
- Keep your country safe
- Government
- Scientific
- People who have questions
- People who are hesitant, skeptical, resistant, or “anti-vaxxers”

**Messaging Elements That Resonate**
Validating concerns and answering questions.

**Messaging Elements That Don’t Resonate**
Negating fear

**TOP 5 REASONS Your Kids Should Get the COVID-19 Vaccine**

Unvaccinated children are at risk of getting COVID-19, and can suffer very serious complications, and potential long-term impacts that we are still learning about. The vaccine is safe and effective, and no long-term problems have been seen for any vaccine.

The science behind the vaccine has been under development and studied by the U.S. Department of Health and Human Services for over 20 years.

Getting those who are eligible vaccinated can help keep school communities safe.

Kids have missed critical social and emotional milestones with their school community. Getting them safely back to the classroom and their favorite after-school activities helps support their mental health and wellness.

Vaccines are safe, effective, and free, regardless of insurance or immigration status.

Get your children back to school safely. Get them vaccinated against COVID-19 today! Learn more at VaccinateAll58.com.

VaccinateAll58.com
Next Crucial Conversations Webinar: Talking with Patients about Bivalent Booster Doses

Please join Dr. Ilan Shapiro to discuss talking with patients about bivalent booster doses.

**When:** Thursday, September 8 at 12:00PM-1:00PM

[Register here!](#)
For California COVID-19 Vaccine Providers

Monday

**Provider Therapeutics Webinar**
Next session: Monday, September 12, 12PM

**My Turn and myCAvax Office Hours**
Next session: Monday, September 19, 12PM

Friday

**Provider Webinar**
Next session: Friday, September 2, 9AM
## Additional Support

<table>
<thead>
<tr>
<th>Type of Support</th>
<th>Description</th>
</tr>
</thead>
</table>
| **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: covidcallcenter@cdph.ca.gov  
  • 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.  
  • Email: myCAvax.HD@Accenture.com  
  • Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM  
  For training opportunities: [https://eziz.org/covid/education/](https://eziz.org/covid/education/) |  
| **My Turn Clinic Help Desk** | For onboarding support (those in the process of onboarding): myturnonboarding@cdph.ca.gov  
  For technical support with My Turn Clinic for COVID-19 and flu vaccines: MyTurn.Clinic.HD@Accenture.com or (833) 502-1245, option 4: Monday through Friday 8AM–6PM  
| **Archived Communications** | For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit  
  • Website: EZIZ Archived Communications |

Updated 6.6.22
Special Thanks to
Today's Presenter:
Eric Ball, MD, FAAP
Webinar Planning & Support:
Rachel Jacobs, Cheri Banks, Michael Fortunka, and Blanca Corona