



COVID-19 Vaccine Frequently Asked Questions

1. Why should I get the COVID-19 vaccine?

By the end-of January, the COVID-19 pandemic has caused 100 million cases and 2.2 million deaths worldwide. The US, has had 25 million cases of COVID-19. During this winter surge, 3,200 lives are lost every day in the U.S. due to COVID-19. The two vaccines currently available in the U.S. provide 94-95% protection. We can end the COVID-19 pandemic if 70-85% of people get the vaccine. By preventing COVID-19 infection, the vaccine prevents death and the long-lasting effects of the illness that some people experience, including persistent fatigue, shortness of breath, muscle aches, joint pain, and difficulty thinking and concentrating (“brain fog”).

2. What is an mRNA vaccine? Can I get COVID-19 from it?

None of the COVID-19 vaccines have alive virus. They cannot give you COVID-19. The vaccines do not make you contagious. The two COVID-19 vaccines in the U.S. are mRNA vaccines made by Pfizer or Moderna companies. mRNA stands for “messenger ribonucleic acid” and provides instructions for your body to make a COVID-19 protein (Spike protein). mRNA is temporary and does not mix with your genetic code. Your body knows this protein is not human and makes antibodies against it. These antibodies protect you if you are later exposed to the virus. Some vaccines inject the protein itself, but mRNA vaccines inject the instructions to make the protein. Your body will destroy the mRNA and the spike protein and all that will be left will be protective antibodies. Your cells will also have the memory of how to fight against this protein. mRNA Vaccines for flu, rabies, and Zika viruses also exist.

3. How well do the vaccines work?

Both the Pfizer and Moderna mRNA COVID-19 vaccines have been tested in large vaccine trials involving tens of thousands of people. Both trials were very successful and nearly identical, preventing 94-95% of COVID-19 disease after two doses. Both vaccines were highly successful in preventing mild and severe disease, and both were highly protective in younger and older adults. These two vaccines appear to perform nearly identically, and there should be no scientific reason to favor one vaccine over the other if offered either one. Remember, both require two doses, and you should receive both doses from the same manufacturer.

4. Who should get the vaccine? Even people who already had COVID-19?

Everyone eligible to get the vaccine should receive it, including those who have had COVID-19. Infection with COVID-19 often does not lead to good immunity. Therefore, even if you have had COVID-19, you should get the vaccine. Currently, both vaccines can be given to adults (18 years and over). Additional studies in children are ongoing.

5. Should I worry that the vaccine was made so quickly? Were steps skipped?

No steps were skipped. These vaccines must meet the high U.S. standards of safety. The speed is due to several reasons. The mRNA technology means that virus does not need to be grown to make the virus protein (for example, in chicken eggs like some flu vaccines). Also, money from the government (e.g., Operation Warp Speed) and large companies allowed the trials to hire staff to enroll over 30,000 people into two trials quickly and enabled companies to hire staff and buy machinery and factories to manufacture millions of vaccine doses.

6. What side effects do the vaccines have?

COVID-19 mRNA vaccines are highly protective and produce a robust immune response. Both vaccines commonly cause mild-to-moderate “flu-like” symptoms, but you are not infected or contagious. Instead, these symptoms are a sign that your body is working to protect you. Side effects from either vaccine are similar and brief, lasting for a few days. These include temporary fatigue, headache, muscle aches, joint pain, chills, and fever. The U.S. has already vaccinated 22 million people with rare risk of serious allergies of 11 events for one million persons vaccinated. We recommend that you not take Tylenol or Advil/Motrin before receiving your vaccine since medicines that reduce fever or inflammation can lower your immune response. Take these medications only after you have symptoms to be comfortable. If you usually take these medications for medical reasons, continue to take them as you usually would.

7. How many doses is the vaccine, and how far apart?

Both vaccines are two-doses. The Pfizer vaccine is two doses given 21 days apart, and the Moderna vaccine is two doses given 28 days apart. You must receive both doses to have the 94-95% protection seen in the trials.

8. Am I protected as soon as I receive the vaccine? Can I stop wearing a mask?

No. The 94-95% protection occurs a week or two after you receive the second dose. Until we are notified, all public health guidance and orders related to COVID-19 will remain in place. Experts believe that 70-85% of the population will need to be vaccinated before the pandemic will be over. We need to act as a community until that happens.

9. Can I get the vaccine while I’m in the nursing home?

Nursing home residents are a priority. Free COVID-19 vaccines are being given to nursing home staff and residents on assigned vaccination dates. Ask your nursing home if they have an upcoming vaccine date. You will need to sign a consent form to receive the vaccine.

10. If I am discharged before getting the second dose of the vaccine, how do I get the second dose?

Nursing home residents who have been discharged before their second dose should plan to return to the nursing home on the nursing home’s next scheduled vaccine day to receive the second dose. Please ask your nursing home for the date and confirm with them one week prior that you will be there to receive your second dose.

For more information about COVID vaccines, ask your nurse or doctor.