



November 12, 2021

**FAQs: 20 Questions on COVID-19 Vaccines in Children**

**1. Where can my child get the COVID-19 vaccine?**

Vaccines are currently available at local pharmacies, doctor's offices, CVS, and Rite-Aid. All locations may not carry all vaccine types for all ages—ask about availability when you make an appointment. You can visit [myturn.ca.gov](https://myturn.ca.gov) or call 833-422-4255 to make an appointment.

**2. What COVID-19 vaccines can children receive?**

Currently, only the Pfizer-BioNTech vaccine has been authorized for children age 17 and younger. The vaccine for children 5-11 years old is a smaller dose than what adolescents and adults receive, but it has the same active ingredient. This smaller dose was found to create the same amount of immune system response as what the larger vaccine dose creates in adolescents and young adults. Dose is based on age, so children receive the dose for the age they are at the day of getting the vaccine (e.g. if they turn 12, they will then receive the larger dose).

Two doses are required to be considered fully vaccinated; the second dose is a necessary “reminder” to the immune system to make sure the body has strong protection. It takes two weeks after the second dose to be protected.

**3. Why did it take longer for the vaccine to be approved for young children?**

It is common to start vaccine studies with older people who are more vulnerable (e.g. the elderly and people with health conditions) before studying it in younger ages. Clinical trials and real-world data have continued to show the vaccine is safe and effective.

More than 4,500 children ages 5-11 years old were included in the clinical trials so far, where two-thirds received the COVID-19 vaccine and one-third received a placebo (saline with no medicine or treatment) so that effectiveness and safety could be compared between the two groups. In children ages 5-11 years old, the vaccine was 91% effective against preventing symptomatic disease in clinical trials. Vaccine safety and efficacy monitoring is very comprehensive and continues beyond the clinical trials.

**4. If my child has a history of severe allergies, can they still get the COVID-19 vaccine?**

Yes. Allergic reactions to the COVID-19 vaccine are rare and none were reported in the clinical trials for young children. Everyone is monitored after they receive the shot; those with allergies sometimes need to be monitored a little longer out of caution.

Talk with your doctor if your child has a history of severe allergic reactions. Anyone with severe life-threatening allergies (anaphylaxis) to COVID-19 vaccine ingredients or a prior COVID-19 vaccine should not get the vaccine.

**5. If my child has asthma or other health conditions, can they get the COVID-19 vaccine?**

Yes. It is recommended everyone age 5 years and older receive the COVID-19 vaccine even if they have health conditions. In fact, some health conditions (like asthma) can put children at higher risk of having severe COVID-19 infection, so it is especially important that they get the vaccine to be protected. Talk to your doctor if you have questions about your child's specific health conditions.



#### **6. How should I prepare for my child's vaccine appointment?**

Similar to other doctor's appointments, it is important to make sure your child has eaten a meal and well-hydrated (drank enough water) before their appointment. Talk with your child beforehand—see [helpful tips for vaccine appointments](#). Make the second vaccine appointment before you leave the clinic; be sure to keep the COVID-19 vaccine card from your first appointment so it can be updated when your child receives their second vaccine. If you have specific questions about your child's health, talk with your child's pediatrician.

#### **7. Does the COVID-19 vaccine have side effects?**

The possible side effects are similar to other routine, childhood vaccines; these are expected whenever the body's immune system is working and building up protection for the future. If side effects occur, they are usually mild and go away on their own within a day or two. Expected side effects can include a sore arm, redness around the shot site, feeling tired, mild fever, chills, or body aches. Some children may need a day or two off from school to rest, so some families may consider scheduling an appointment on a Friday or Saturday for this reason; however, some children may be able to go back to school immediately without any problem. Talk with your family doctor if you have questions.

Note: The vaccine does not contain COVID-19 virus, so the vaccine cannot infect someone with COVID-19. However, some of the vaccine side effects are the same symptoms as a COVID-19 infection (because both a vaccine and infections make the body's immune system work). Your child's school may ask for them to stay home and get tested if they have any symptoms of COVID-19 after their shot. This is because it can be hard to tell whether symptoms are from the body reacting normally to the vaccine with side effects or if the body is starting to fight off a COVID-19 infection—the only way to know is with a nose swab test. The vaccine cannot make someone test positive on a nose swab test and the vaccine takes two weeks after the second dose to be protected, so it is important to get tested.

#### **8. Can my child get the COVID-19 vaccine at the same time as the flu shot or other childhood vaccines?**

Yes, they do not have to wait time between shots and it is safe to get multiple kinds of vaccines at the same time. Their arms may feel a little sorer or they may feel a little more of the expected side effects. It is possible for children to get sick from both flu and COVID-19 infections—even at the same time—so both vaccines are recommended to protect them whether done at the same time or not.

#### **9. Can my child get the vaccine without a parent or guardian there?**

A parent or adult guardian must be present to consent to the child getting the vaccine at county locations. The exact process will depend on the clinic or doctor's office you get the vaccine—ask when you make your appointment if you have questions.

#### **10. I heard vaccinated people get COVID-19—are the vaccines still working?**

Yes. The vaccines continue to be very effective at preventing hospitalization and death from COVID-19 in children and adults; however, in higher risk adults the vaccine started to be a little less effective at preventing infections. The Delta variant of COVID-19 is more than twice as contagious as the original version of the virus and it caused some fully vaccinated adults get infected. Many of those adults had health problems that make them higher risk, which is why booster doses are now recommended to make sure they have ongoing protection.

Even so, recent CDC data show that the vaccine has still been very effective against the Delta variant of COVID-19: persons who get the vaccine are 5 times less likely to get infected and more than 10 times less



likely to be hospitalized or die from COVID-19 compared to someone who did not receive the vaccine. This summer, the vaccine was found to be 93% effective at preventing hospitalizations in adolescents 12-18 years old. Clinical trials for children ages 5-11 years old found to be over 90% effective at preventing symptomatic disease. The vaccine will continue to have ongoing monitoring of its effectiveness in all ages as the virus changes.

### **11. Why is it important that children get vaccinated against COVID-19?**

Children also get COVID-19 infection; over 6.5 million children have tested positive in the U.S. so far. There is not sufficient data on the long-term effects of COVID-19 infection in children, but so far “long haul” COVID with lasting symptoms has been found in children and some children develop MIS-C (multi-system inflammatory syndrome in children) which requires hospitalization. More than 65,000 children have been hospitalized due to COVID-19 in the U.S.

Vaccinating all eligible persons in the household is the best way to prevent spread of COVID-19 and help protect the health and well-being of all family members too. So far, more than 140,000 children in the United States have lost a parent or primary caregiver to COVID-19. Getting exposed and infected also means more time out of school and work. Persons who are fully vaccinated are much less likely to get infected after exposure, so they do not have to quarantine at home if they have no symptoms. Vaccinating your child along with all adults can be an important part of protecting your household, especially if there is anyone in the family who cannot get the vaccine (e.g. babies).

### **12. Should my child get the vaccine if they have already had COVID-19 infection?**

Yes, as long as they have recovered. The vaccine is recommended for everyone 5 years and older regardless of whether you have had COVID-19 infection or not. It is possible to get COVID-19 infection more than once and it is not known how long potential protection from infection may last or how strong that protection may be. So far, data shows that the vaccine may provide better, more reliable protection than the infection alone and that the vaccine boosts protection in people who have had the infection before.

Your child should *not* get a COVID-19 vaccine if they were recently exposed or diagnosed with COVID-19; they should wait until quarantine or isolation is complete. Anyone who received monoclonal antibody treatment or was diagnosed with MIS-C or MIS-A (complications of COVID-19 infection) within the last 90 days should also wait to get the COVID-19 vaccine. And in general, anyone who is sick with a fever should wait until they feel better before getting vaccines.

### **13. If my child gets the vaccine, can they stop wearing a mask?**

Masks are still required for everyone indoors at school and when visiting medical or congregate living facilities. It is strongly recommended that everyone age 2 and older continue to wear masks when indoors in public as an extra layer of protection (both to protect you and those around you) until there is less COVID-19 in the community. Currently, only unvaccinated persons are required to wear masks indoors in most other public settings in California.

The COVID-19 vaccine is very effective. Children are not considered “fully vaccinated” until after two weeks from the second dose because it takes that long for the body to build up protection. However, like most medicines and vaccines, it is not 100% effective. This is why masks are still recommended. This is especially important for people who live with higher-risk persons (e.g. elderly persons, persons with health problems or



weaker immune systems, persons who cannot yet get the vaccine like babies, etc.) to make sure the family stays protected too.

**14. If my child gets the vaccine, do they still need to get tested?**

Everyone should get tested for COVID-19 if they feel sick with COVID-19 symptoms (get a test ASAP) or if they were recently exposed to COVID-19 (get a test 5 days later). This is because while fully vaccinated people are much less likely to get infected than people who have not gotten the vaccine, it is not 100%. It is still possible to get the infection and fully vaccinated people are contagious if they do happen to get infected.

Note: The vaccine cannot make people test positive; only getting exposed to another person with the virus can make someone test positive on a nose swab.

**15. If my child gets the vaccine, do they still need to quarantine after an exposure?**

No. If they are fully vaccinated, they do not have to stay home on quarantine if they are exposed as long as they have no symptoms (they can stay in class and continue after-school activities). This is because people who are fully vaccinated are much less likely to get infected than people who have not received the vaccine.

Fully vaccinated people should still wear a mask indoors, watch for symptoms, and get a test 5 days after an exposure to be sure they didn't get infected. This is because while they are much less likely to get infected, the vaccine is still not 100% effective; fully vaccinated people are contagious if they do happen to get infected so it is important to check and take precautions just in case.

**16. If my child didn't get the second vaccine dose on time, can they still get the vaccine?**

Yes, it is important to complete the series to be protected. It is OK to get the second dose even if it's been more than 21 days since the first dose, but get it as close to 21 days as possible so that they can be protected as soon as possible. It takes two weeks after the second dose to be considered fully vaccinated and protected.

**17. Do children need to get booster vaccines?**

No, booster doses have only been authorized for adults 18 and older at this time. Some children age 12 and older may qualify for a third dose of Pfizer-BioNTech if they are severely immunocompromised (have a very weak immune system) and meet special criteria—talk with your family doctor if you are unsure.

**18. Will my child have to get vaccinated to attend in-person learning?**

Yes, the COVID-19 vaccine will be added to California's list of vaccinations that are already required for school like vaccines for measles, varicella, etc. California K-12 students will be required to be vaccinated for in-person learning starting the term after the vaccine receives full FDA approval for their age group (7<sup>th</sup>-12<sup>th</sup> grades or K-6<sup>th</sup> grades). So because the EUA for adolescents came out first, the requirement for 7<sup>th</sup>-12<sup>th</sup> grades may be January 2022 or July 2022 depending on when it receives full FDA approval.

Families are encouraged to not wait for the requirement to get their children protected. Children who are vaccinated are less likely to get infected with the virus, less likely to get severely sick or die from COVID-19, and less likely to pass the virus to others in the family. Also, children who are vaccinated do not have to quarantine at home after an exposure as long as they have no symptoms (which means less days off from school).



### **19. What are potential risks from the vaccine in children?**

Serious health events after COVID-19 vaccination are rare. Vaccines have been around a long time and have an established safety history. Real-world data and clinical trials continue to support that COVID-19 vaccines are very safe and effective. It is important to consider the health risks from COVID-19 infection (both known and unknown risks) versus any potential risks from the vaccine. The risks of not getting the vaccine, which risks COVID-19 infection, can be significant—see question #11.

Vaccines have very comprehensive safety monitoring so that medical experts are alerted to even very rare risks. Like with any medicine, there is a rare possibility of severe allergic reaction that requires treatment (this is why people are monitored for 15-30 minutes after their shot). Very rarely, myocarditis (inflammation of the heart muscle) has been reported after getting the vaccine. Most cases have been mild and gone away with minimal treatment; most occurred in adolescent and young-adult males. Medical experts within the CDC's Advisory Committee on Immunization Practices (pediatricians and medical doctors specialized in public health and infectious diseases) determined the benefit of the vaccine still outweighs this potential risk, but that families should be aware of it. This is why information about myocarditis and symptoms to watch for are given at the appointment. It is important to note that myocarditis can be common in this age group in general and can often be caused by viral infections—including COVID-19. A recent study showed that it was more than 6 times more likely to get myocarditis from a COVID-19 infection than potentially getting it from the vaccine. No myocarditis cases were reported in the clinical trials of 5-11 year olds and myocarditis is generally not common in this age group. More information on it from the American Academy of Pediatrics is [here](#).

These kinds of occurrences are rare and were found because of the intensive safety monitoring in place for vaccines. Talk with your family doctor or pediatrician if your child has a history of life-threatening allergies or if you have other specific concerns about their health.

### **20. Where can I go for more information?**

There is a lot of misinformation on the internet and social media. Use trusted verified sources like those referenced below or talk with your family doctor or your child's pediatrician.

American Academy of Pediatrics – [If My Child Had COVID Already, Do They Need to Get the Vaccine?](#)

American Academy of Pediatrics – [The Science Behind COVID-19 Vaccines: Parent FAQs](#)

California Department of Public Health – [Get the Facts on COVID-19 Vaccines, Boosters, and Additional Doses](#)

California Department of Public Health – [Vaccines: Questions and Answers](#)

Centers for Disease Control – [COVID-19 Vaccines and Children](#)

Centers for Disease Control – [COVID-19 Recommendations for Children](#)

U.S. Food and Drug Administration – [Emergency Use Authorization \(EUA\) on Pediatric Vaccine Factsheet](#)

Valley Children's Healthcare – [Frequently Asked Questions about COVID-19 and COVID-19 Vaccines](#)