



COVID-19 vaccines are available in North Carolina to everyone ages 12 and older.

- The vaccine is free everywhere in North Carolina.
- No government ID or insurance is required.
- Depending on where you get your vaccine, you may need to make an appointment.
- Everyone can be vaccinated, regardless of their immigration status. Getting vaccinated will not affect your immigration status.

To find a vaccine provider near you, visit [MySpot.nc.gov](https://www.myspot.nc.gov).

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GETTING YOUR VACCINE

What kind of identification will be required to be vaccinated?

North Carolina does not require that people have a government-issued identification card, like a driver's license, to be vaccinated. Instead, vaccine providers are encouraged to use other ways to confirm that they are vaccinating the right person. Vaccine providers may ask people to pre-register, to fill out a form on-site with their name, address and date of birth, or ask for a bill or other document with your name and address on it. Vaccine providers may ask people for their insurance information, which may include asking for a photo ID, but vaccine providers should not withhold vaccinations or appointments for vaccinations because you cannot present identification.

Can you get a vaccine in a county you don't live in?

Yes. To protect the health of North Carolinians and promote equity in vaccine distribution, people who spend significant time in North Carolina and are able to spread the virus in North Carolina should be vaccinated when and where they have access to a vaccine. Vaccine providers should vaccinate North Carolinians no matter what county they live in.

Can non-US Citizens get the vaccine?

The COVID-19 vaccine will be available to everyone for free, whether or not they have health insurance and regardless of their immigration status. Information is kept confidential and won't be shared with ICE for immigration enforcement. Getting the vaccine does not have a negative impact on people's chances of adjusting their immigration status. The Department of Homeland Security released a statement on equal access to COVID-19 vaccines and vaccine distribution sites. [Read more information.](#)

Video: https://www.youtube.com/watch?v=_wtxWwelppk

How much will the vaccines cost?

The vaccines are free to everyone, even if you don't have health insurance. The federal government is covering the cost of the vaccine. Administration fees should be covered by all health insurance companies and will also be covered for those who are uninsured. No vaccine provider should be charging anyone to receive the vaccine. Patients who get the vaccine while having an appointment for another reason, such as a medical check-up, may be charged for the check-up depending on their insurance.

Providers administering the vaccine to people without health insurance, or whose insurance does not provide coverage of the vaccine, can request reimbursement for the administration of the COVID-19 vaccine through the Provider Relief Fund. See www.hrsa.gov/CovidUninsuredClaim_for_more_information.

Through August 31st, to help offset the personal cost of time and transportation to a vaccine appointment, a limited number of vaccine locations in several counties are offering \$100 Summer Cards to North Carolinians that get their COVID-19 vaccine, and a \$25 Summer Card to those who drive the person to their appointment. Read more information.

Video: <https://www.youtube.com/watch?v=Uy0QvDNOnd0>

Are children able to get the vaccine?

The Pfizer vaccine can be given to teenagers aged 12 and up. Children below the age of 12 are not yet eligible to receive the vaccines as the FDA has not authorized their use in that age group. However, clinical trials are underway to ensure the vaccines are safe and work to prevent COVID-19 illness in younger children. Updates on each of those clinical trials are below:

On May 10, 2021, the Pfizer vaccine was authorized by the FDA for children 12 to 15 years old based on results from a clinical trial that included 2,260 children aged 12 to 15 that showed very high levels of effectiveness. More than 279,000 youth ages 12-17 have already received their vaccine in NC. Everyone ages 12 and older can receive a free Pfizer COVID-19 vaccine, even if they don't have insurance and regardless of their immigration status. Pfizer is now conducting a clinical trial in children down to age 6 months.

Moderna, whose vaccine is currently only approved for people 18 and older, began clinical trials in adolescents in December 2020. In June, Moderna requested authorization from the Food and Drug Administration to include individuals ages 12 to 17. Moderna reported that none of the adolescents in the trial got sick with COVID-19 after being fully vaccinated, and there were no significant safety concerns. On March 17th, 2021, they also began clinical trials in children from ages 6 months to 11 years old.

Johnson & Johnson, whose vaccine is also only approved for people 18 and older, is currently conducting a clinical trial in adolescents ages 12 to 17.

Video: <https://www.youtube.com/watch?v=0dyIITpMAmU>

Why should I get my teenager vaccinated?

There is good news for helping our children get back to the fuller lives they had before the pandemic. The tested, safe and effective Pfizer COVID-19 vaccine is available for ages 12 and up. This helps us ensure our kids are safely back in school this year. But that will only be possible if the large majority of North Carolinians are vaccinated.

Young people are vulnerable to the virus, just like everyone else. Getting them vaccinated is the best way to protect them, prevent the spread of COVID-19, and protect others. In North Carolina, more than 1,000 children 0 to 17 years old have tested positive for COVID-19 and the percent of COVID-19 cases in children 17 and under has been increasing.

Everyone ages 12 and older can receive a free Pfizer COVID-19 vaccine, even if they don't have insurance and regardless of their immigration status. Millions of people have already received this vaccine. It is safe and effective in stopping the spread of COVID-19 and preventing serious illness, hospitalization and death.

Video: https://www.youtube.com/watch?v=o_5ld6bEqpo

Is the vaccine safe for teenagers?

Millions of adolescents and tens of millions of adults in the United States have received COVID-19 vaccines under the most intense safety monitoring in U.S. history.

Adolescents, like adults, may have some temporary reactions, such as a sore arm, feeling tired or achy for a day or two, headache or fever. These are normal and good signs that their body is building protection, and they should go away in a few days.

Parents/caregivers can enroll their adolescent in [v-safe](#), a free, smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins. Through v-safe, you can report any side effects your teenager may have after vaccination.

There have been no safety data to suggest that the COVID-19 vaccines impact teens' development or their ability to get pregnant in the future.

Teens can get other vaccines at the same time, or around the same time, as the COVID-19 vaccine.

The NC Pediatric Society, along with The North Carolina Medical Society (NCMS) and the North Carolina Academy of Family Physicians, strongly encourage all families to ensure adolescents ages 12 and older are vaccinated as soon as possible against COVID-19. Read more from these organizations [here](#).

Where can I find more guidance about back-to-school safety?

The updated StrongSchoolsNC: Public Health Toolkit reflects the expertise of the CDC, the American Academy of Pediatrics and our public health experts on how to keep our students in-person and safe in schools with layered prevention strategies. It is important to note that the need for additional statewide action and changes to the toolkit may be needed over time based on new data, our COVID trends, and as vaccinations become available for children under the age of 12.

Can people under the age of 18 get a COVID-19 vaccine without parental consent?

A new state law requires that a parent or legal guardian provide written consent for anyone under 18 to receive a vaccine that has emergency use authorization from the Food and Drug Administration (FDA). Once a vaccine is fully approved by the FDA written consent is no longer required, however it is expected that for most teens, information about vaccination with parents and guardians and parental/guardian consent will be obtained for COVID-19 vaccination. North Carolina law also gives people under the age of 18 the ability to make certain health decisions, including the choice to get a COVID-19 vaccine, if they show the decisional capacity to do so. Decisional capacity is a person's ability to understand their health and health care needs and options, and to make decisions about them. As part of normal development most children are able to make these kinds of decisions like an adult at some point before the age of 18. There is no one age at which this always occurs; it varies from child to child.

On August 23, 2021, the FDA approved the Pfizer vaccine (now marketed as Comirnaty) for anyone 16 and older. Therefore, written consent from parent or a legal guardian is required for teens ages 12 to 15 year. Approval for this age group is expected at a later date as Pfizer was authorized for teens ages 12 to 15 years, six months after it was authorized for people 16 and older.

How can I get my entire family vaccinated at once?

There are many ways to get your family vaccinated together.

Most vaccine providers allow you to sign up for vaccine appointments, and you can schedule appointments for all members of your family who would like to get vaccinated together. More vaccine providers are also now offering walk-in vaccinations, so eligible people in a family can show up together for these walk-in clinics.

If you have children who are ages 12 to 17, they are currently only eligible to receive the Pfizer vaccine, so it is important to check that the vaccine provider has the Pfizer vaccine available for them. Currently, COVID-19 vaccines are not authorized for children under age 12.

Go to [MySpot.nc.gov](https://www.myspot.nc.gov) to find vaccine provider locations and contact information. Enter your ZIP code or current location to find nearby vaccine providers. Contact vaccine providers directly to see if they have vaccines and schedule appointments.

How can I avoid missing work to get my vaccine?

With vaccines now widely available, people can look for vaccination appointments on the weekends or in the evenings. In addition, many places allow walk-ins. Temporary reactions after getting vaccinated, like a sore arm, fatigue, fever, or feeling achy for a day or two, can be normal and show that the vaccine is working to give your body protection against COVID-19. NC DHHS is encouraging employers to provide paid time-off for employees to get a vaccine or for the temporary reactions after being vaccinated. [New federal tax credits](#) are available for reimbursing small and medium-sized employers for providing paid leave for vaccination. For people without paid time-off or for whom it is difficult to miss work, we encourage getting vaccinated prior to a day off.

Can I get a ride to my vaccine visit?

Yes, there are multiple free transportation options to get vaccinated:

- Call your local transit authority for a free ride to your vaccine appointment. You may need to call in advance to schedule a ride.
- Call 1-844-771-RIDE to schedule free roundtrip rides to COVID-19 through [Ride United NC](#).
- Ask your vaccine provider about transportation options. Some have partnered with public transportation or community-based organizations who can provide free rides to vaccine appointments.

What if I need to be vaccinated at home because of limited mobility?

People who have limited mobility can be vaccinated against COVID-19 in their home. To find a vaccine provider in your area who is providing vaccinations to individuals in their home, call the At-Home Vaccination Hotline at 1-866-303-0026, or fill out a [registration form](#). For more information on at-home vaccination, visit www.ptrc.org/covid.

WHY YOU SHOULD GET A COVID-19 VACCINE

What can you start doing differently after you are fully vaccinated against COVID-19?

Fully vaccinated people can participate in many of the activities that they did before the pandemic; for some of these activities, they should wear a mask. Although infections happen in only a small proportion of people who are fully vaccinated, even with the Delta variant, preliminary evidence suggests that fully vaccinated people who do become infected with the Delta variant can spread the virus to others. People who are fully vaccinated should:

- Wear a mask in all indoor public spaces if you live in area of high or substantial levels transmission as defined by the [CDC](#) until more people are vaccinated and viral transmission decreases.
- Wear a face covering in all K-12 schools, child care, indoor settings with a large number of children or child-focused activities (e.g., children's museums), public transportation, healthcare settings, high density congregate settings (e.g., correction and detention facilities, homeless shelters, migrant farm camps), and large crowded indoor venues (e.g., arenas, stadiums).
- [Get tested](#) if you have any [symptoms](#) of COVID-19. After an exposure to COVID-19, you should get tested 3-5 days after exposure and wear a mask around others until you get a negative test result.
- More information can be found from the CDC [here](#).

Why do I need to get a vaccine if I can practice other things like social distancing to prevent the COVID-19 virus from spreading?

Vaccines work to prepare your body to fight the virus if you are exposed to it. Other steps, like the 3Ws—wear a mask, wait 6 feet apart and wash your hands—help reduce your chance of being exposed to the virus or spreading it to others. Getting the COVID-19 vaccine and following the 3Ws is everyone’s best protection from getting and spreading COVID-19.

If everyone else is getting the vaccine, do I need to?

Yes. It is incredibly important that everyone in North Carolina do their part to help get as many people vaccinated as possible. This is especially important now with the highly contagious Delta variant, increasing cases and hospitalizations. The more people who are vaccinated, the faster we will end the pandemic and the more confident each one of us can be that we and our loved ones are protected as we get back to the people and places we love. To protect those who cannot be vaccinated due to age or medical conditions, we need everyone who can safely get vaccinated to do so.

Do people who have had COVID-19 still need to be vaccinated?

Yes, you should get vaccinated if you already had COVID-19. People who have been infected with COVID-19 and recovered have some protection against the virus, called natural immunity. Natural immunity can be strong and long-lasting for some people, but weaker and shorter-lasting for others. There is a chance of getting infected again if you have had COVID-19, and it’s hard to predict who will have stronger natural immunity. A recent [study](#) showed that among individuals infected with COVID-19, unvaccinated individuals were more likely to get reinfected than those who were fully vaccinated. People can be confident that the protection they get from the vaccine is very strong and that it lasts for at least six months, and likely longer as scientists continue to monitor the vaccines. Vaccines may also better protect you against certain variants of the COVID-19 virus. Getting vaccinated against COVID-19 is the best way to protect yourself and those around you from getting COVID-19.

If you were treated for COVID-19 symptoms with monoclonal antibodies or convalescent plasma, you should wait 90 days before getting a COVID-19 vaccine. Talk to your doctor if you are unsure what treatments you received or if you have more questions about getting a COVID-19 vaccine. Additional information can be found [here](#).

Should I get vaccinated against COVID-19 if I am currently sick with COVID-19?

No. People who are actively sick with COVID-19 should wait until they have recovered and can no longer spread the virus before getting their vaccine. This guidance also applies to people who get COVID-19 between their first and second dose of a two-dose vaccine. For two-dose vaccines, the second dose can be given up to 6 weeks after the first dose and still be very effective (see [“What happens if you don’t get your second dose on the right day?”](#)), so do not worry if you have to reschedule your appointment for a later date. Once you have recovered, it is safe to get vaccinated with any COVID-19 vaccine if you have been infected in the past.

Can women who are pregnant, breastfeeding or want to become pregnant be vaccinated?

COVID-19 vaccination is recommended for all people 12 years of age and older, including people who are pregnant, breastfeeding, trying to get pregnant now, or might become pregnant in the future. More than 148,000 pregnant women [have](#) chosen to receive at least one dose of a COVID-19 vaccine in the United States. There is no need to wait or avoid getting pregnant if you are planning to get vaccinated. Those seeking fertility treatment can also get vaccinated. There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men. Recent reports have shown that breastfeeding women who have received COVID-19 mRNA vaccines have antibodies in their breastmilk, which could help protect their babies.

[Growing evidence](#) shows that COVID-19 vaccination during pregnancy is safe and effective and the benefits of getting a vaccine far outweigh the risks. The risks of COVID-19 virus are greater for pregnant women compared to people who are not pregnant. Pregnant women with COVID-19 have a higher risk of being hospitalized and needing care in the ICU. Pregnant women with COVID-19 are at increased risk for preterm birth (delivering the baby earlier than 37 weeks) and might be at increased risk for other poor outcomes related to pregnancy compared to pregnant people without COVID-19 such as pregnancy loss.

Vaccination for those who are pregnant or wanting to become pregnant is recommended by [the American College of Obstetricians and Gynecologists \(ACOG\)](#), the [Society for Maternal-Fetal Medicine \(SMFM\)](#), the [American Society for Reproductive Medicine \(ASRM\)](#), and the [Society for Male Reproduction and Urology](#).

Additionally, infants of vaccinated women may also get [some protection](#) from vaccination because the antibodies from the vaccines can be transferred from mother to child. This means that you and your baby may both be protected against COVID-19.

There are many options available to you to learn more about the vaccines and their safety for pregnant women and those who want to become pregnant. Along with your own physician, you can also consult [MotherToBaby](#) or call 1-866-626-6847.

If you are pregnant and have received a COVID-19 vaccine, we encourage you to enroll in [v-safe](#). V-safe is CDC's smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after vaccination. A [v-safe pregnancy registry](#) has been established to gather information on the health of pregnant people who have received a COVID-19 vaccine.

Video: <https://www.youtube.com/watch?v=cvU8fmfOvb0>

Can I get the COVID-19 vaccine if I just got another vaccine for something else?

You can get the COVID-19 vaccine at the same time as other vaccines and regardless of the timing of other vaccines.

What can I do to protect myself from COVID-19 while I am waiting to be vaccinated?

North Carolinians should continue to practice the 3Ws—wear a mask indoors, wait 6 feet apart, and wash their hands—while they wait to get vaccinated. Go to [MySpot.nc.gov](#) to find a vaccine provider and schedule your appointment or find walk-in locations today!

Who should NOT get a COVID-19 vaccine?

All North Carolinians who are able to receive the COVID-19 vaccine should get the vaccine to protect themselves and our communities. There are very few reasons why someone may NOT be able to get the vaccine. The only medical reason to not get vaccinated is if you have had a severe allergic reaction (i.e., anaphylaxis) or an immediate allergic reaction after a first dose or to a component of the COVID-19 vaccine. Children under 12 years of age are not able to receive COVID-19 vaccine at this point until it is authorized, unless the child is enrolled as part of a clinical trial.

COVID-19 vaccines may be administered to most people with underlying medical conditions, including people who are immunocompromised (i.e., weakened immune systems), have food allergies, autoimmune conditions, and have previously had Guillain-Barre syndrome (GBS) or Bell's palsy. Please talk with your health care provider if you think you might have a medical reason for not getting the COVID-19 vaccine. Your health care provider can discuss your options with you. North Carolina has no plan to require people to be vaccinated against COVID-19, but it is possible that some employers or schools may require vaccines for their employees or students. If you are not able to receive the COVID-19 vaccine but are being asked to show proof of vaccination, check with the school or employer on what documentation is needed. Your provider can work with you to provide appropriate documentation if you are medically exempt from vaccination.

ONE-DOSE VERSUS TWO-DOSE VACCINES

Will I be able to choose which vaccine I get?

We strongly recommend people take the first vaccine that is available to them. All currently recommended vaccines are very effective in preventing hospitalization and death caused by COVID-19. The Pfizer vaccine is authorized for people ages 12 and older, while the Moderna and Johnson & Johnson vaccines are authorized for adults 18 and older.

What are the differences between the one-dose and two-dose vaccines?

The two-dose vaccines use mRNA to give your body temporary instructions to make a protein that teaches your body to make germ-fighting antibodies against the COVID-19 virus. Instead of mRNA, the one-dose vaccine (made by Johnson & Johnson/Janssen) uses DNA to give your body the same type of temporary instructions. The DNA is carried into the body on a harmless version of the virus called adenovirus. Your body naturally breaks down everything in the vaccine. All of the vaccines are very effective in preventing COVID-19 illness as well as preventing hospitalization and death. None of the clinical trials showed serious safety concerns. There is no COVID-19 virus in the vaccine and none of the vaccines can change your DNA.

People who receive the one-dose vaccine do not need to return for a second vaccination. The temporary reactions are similar among all vaccines, although people receiving the one-dose vaccine may only experience temporary reactions once. Temporary reactions may include a sore arm, headache, fever, or feeling tired and achy for a day or two after receiving the vaccine. None of the vaccines can give you COVID-19.

Additionally, the one-dose vaccine also can be stored in a regular refrigerator for up to three months.

What happens if you don't get your second dose on the right day?

You should get the second vaccine dose as close to the recommended time as possible—3 weeks apart for Pfizer-BioNTech or 4 weeks apart for Moderna. Both Pfizer-BioNTech and Moderna COVID-19 vaccines may be scheduled up to 6 weeks (42 days) after the first dose. If you do not get your second dose within 6 weeks, you do not need to start again at the first dose. Currently, there are not much data on if the vaccines work well if given after this window. The vaccine can be given up to 4 days early and still count. If you get the second dose early, you should not get a third dose.

Do I need to go back to the same provider for my second dose?

With increased vaccine supply across North Carolina, you no longer have to receive the second dose at the same site that you received the first dose. If you go to a different provider for the second dose, make sure you go to a provider with the same brand of vaccine (e.g., Pfizer or Moderna) that you received for your first dose and bring your vaccination card with you so the provider can confirm which vaccine you received and when.

If two shots are necessary for some vaccines, how will people know when to get their second shot?

North Carolina uses a secure data system called the COVID-19 Vaccine Management System (CVMS) to make sure you get your second shot at the right time. When a person gets the first shot, they are asked to make a second appointment. People will also be given a vaccination card with information about which vaccine they got for their first dose and the date of that shot. Keep the card in a safe spot and take a picture of it just in case it gets misplaced. People will receive an email notification with a reminder for the second shot.

Individuals who choose to use v-safe, a CDC tool to provide personalized health check-ins after their shot, will receive text reminders for their second dose. The provider who gave the first vaccine may also help with reminders for the second shot. State and federal privacy laws make sure none of your private information will be shared. The shot you take and when you need the second is confidential health information that is carefully managed to protect your privacy.

Do I need an additional dose?

Individuals who are **moderately to severely immunocompromised** and **received the Moderna and Pfizer vaccines** are now recommended to receive an additional dose to better protect themselves from COVID-19. On August 12, the U.S. Food and Drug Administration [amended](#) the emergency use authorizations for both vaccines to allow for the use of an additional dose in some people with weakened immune systems, which was then recommended by the CDC's Advisory Committee on Immunization Practices (ACIP) on August 13. A full list of conditions can be found on the [CDC's website](#). [According to the CDC](#), emerging data suggest some people with moderately to severely compromised immune systems do not always build the same level of

protection after vaccination compared to people who are not immunocompromised. In addition, in small studies, fully vaccinated immunocompromised people have accounted for a large proportion of hospitalized post-vaccination cases.

An additional dose of the same brand of vaccine is recommended for moderately to severely immunocompromised people at least 28 days after they've completed their initial two-dose series to help increase the body's immune response. The same vaccine brand should be used unless unavailable, in which case either Pfizer or Moderna vaccine can be used. The Moderna vaccine is available to those 18 and older, while the Pfizer vaccine is available to those 12 and older. There is not enough data at this time on the safety and effectiveness of an additional dose following Johnson & Johnson vaccine for it to be authorized.

At this time, an *additional dose* is authorized only for people with a weakened immune system, which is another dose because the immune response to the primary series is likely to be decreased in these individuals. The need for and timing of a COVID-19 *booster dose* has not been established and **no booster doses or additional doses are recommended for any other population at this time**. A booster dose is an additional dose of vaccine when the initial immune response was sufficient after the first vaccine series but is likely to have waned over time. Boosters will likely be available beginning the end of September, pending full review and recommendations by the FDA and CDC. People who received the Pfizer or Moderna vaccines will likely be eligible, starting 8 months after their second dose. Research is still underway regarding boosters for Johnson & Johnson.

VACCINE SAFETY

Are there vaccines that are safe and work in preventing COVID-19?

Yes. The currently recommended vaccines have proven to provide significant protection against COVID-19 and protect against virus-related hospitalization and death, with no serious safety concerns in the clinical trials.

Who makes sure the vaccines are safe and can prevent COVID-19?

The U.S. Food and Drug Administration (FDA) makes sure all food and drugs are safe. The COVID-19 vaccines must pass clinical trials like other drugs and vaccines. The FDA checks the work and authorizes vaccines only if they are safe and effective. Because vaccines are given to millions of healthy people to prevent serious diseases, they're held to very high safety standards.

The FDA can get vaccines to people faster through an Emergency Use Authorization (EUA). After the FDA has authorized a vaccine, the Centers for Disease Control and Prevention's (CDC) independent advisory committee reviews the data before advising the CDC on recommending a vaccine for use among the general public. Like all vaccines, the FDA keeps checking safety through the [Vaccine Adverse Events Reporting System \(VAERS\)](#). Health care providers are required to report serious side effects, or if someone gets seriously ill with COVID-19. There is also a smartphone app called [v-safe](#) that uses text messaging and web surveys to do health check-ins after people receive a COVID-19 vaccination. People can report any problems they may have with a vaccine through v-safe.

Which vaccines have received FDA approval?

The U.S. Food and Drug Administration (FDA) approved the Pfizer-BioNTech COVID-19 vaccine, which Pfizer is calling Comirnaty, for the prevention of COVID-19 disease in individuals 16 years of age and older. The Pfizer vaccine will continue to be available under emergency use authorization for teens 12 to 15 and for the administration of a third dose in certain immunocompromised individuals. FDA approval for these populations will require additional time as the vaccine was not authorized for such use until more recently. All available vaccines in the United States have been under an EUA. Rigorous clinical trials among thousands of people have proven that vaccines are safe and effective. Almost 200 million Americans have been safely vaccinated against COVID-19.

Are the vaccines a new technology?

Scientists had a head start in developing all of the vaccines. They are built on decades of research. Both mRNA and viral-vector vaccines technology benefit from over 30 years of scientific work and development. With more recent developments in vaccine technology over the last decade and immense investment, these two technologies were able to be used to help us fight COVID-19 without skipping any steps in development, testing, or clinical trials.

Can the vaccine give me COVID-19?

No, the vaccine does not contain any virus that is living that could make you sick with COVID-19. Instead, vaccines imitate COVID-19 without giving it to you. After you get the vaccine, the vaccine gives your body instructions to make a protein that safely teaches your body to make germ-fighting antibodies to fight the real COVID-19. Your body naturally breaks down or destroys the instructions from the vaccine.

What are the side effects from the vaccines?

No serious side effects were reported in clinical trials. Temporary reactions after receiving the vaccine may include a sore arm, headache, feeling tired and achy for a day or two or, in some cases, fever. These temporary reactions were more common after the second dose in a two-dose vaccine. Younger people are more likely to have reactions than older people.

In most cases, these temporary reactions are good signs that your body is building protection. You can take medicines like Tylenol or ibuprofen after receiving your shot to help with these temporary reactions. While extremely rare, there have been a few cases of severe allergic reaction to the Pfizer vaccine outside of the clinical trials, and vaccine providers are prepared with medicines if they need to treat these rare allergic reactions.

While it is extremely rare, there have also been few cases of blood clots associated with the Johnson and Johnson vaccine. If you develop shortness of breath, chest pain, leg swelling, persistent abdominal pain, severe or persistent headaches or blurred vision, easy bruising or tiny blood spots under the skin beyond the site of injection within 30 days of vaccination with the Johnson & Johnson vaccine, seek medical attention right away.

The FDA reported that there have been very rare cases of Guillain-Barre Syndrome after receiving the Johnson & Johnson COVID-19 vaccine with 100 preliminary cases out of more than 12.8 million (mostly in males, many aged 50 years and older). GBS is a neurological disorder usually triggered by a respiratory or gastrointestinal infection that most people fully recover from. The body's immune system damages nerve cells, causing muscle weakness and sometimes paralysis in severe cases. With nearly all COVID-19 hospitalizations and deaths occurring in unvaccinated people, the risk of COVID-19 infection is greater than the extremely low risk of a severe adverse events after COVID-19 vaccination and everyone eligible is recommended to receive a COVID-19 vaccine.

What is the risk of an allergic reaction from the vaccine?

Severe allergic reactions to the vaccines have been very rare and mostly occurred in people who have had previous severe allergic reactions. People who have had severe allergic reactions, also called anaphylaxis, to any ingredient in the [Pfizer](#), [Moderna](#) or [Johnson & Johnson](#) vaccines should not receive that vaccine. People who have had this type of severe allergic reaction to any vaccine or treatment that is injected should talk with their health care provider about the risks and benefits of vaccination. People with allergies to foods, animals, environmental triggers (such as pollen), latex or medications taken by mouth or who have family members with past severe allergic reactions, can be vaccinated with any of the COVID-19 vaccines. You will be screened prior to receiving the vaccine to determine if you are at an increased risk for an allergic reaction. If you are, your health care provider may decide that you should not receive the vaccine. As most reactions occur within a few minutes to one hour after vaccination, you will be asked to stay at the place where you received your vaccine for a short time (15-30 minutes) for monitoring to ensure your safety. Additional information can be found [here](#) for the Pfizer, Moderna, and Johnson & Johnson vaccines.

If you had a severe or immediate allergic reaction after getting the first dose of the mRNA COVID-19 vaccine (Moderna or Pfizer), you should NOT get a second dose of either of the mRNA COVID-19 vaccines. Talk to your provider about getting a different type of vaccine after an allergic reaction. More information for people with COVID-19 vaccine allergies can be found [here](#).

How do I report an adverse reaction caused by the COVID-19 vaccine?

CDC and FDA encourage the public to report possible side effects (called adverse events) to the [Vaccine Adverse Event Reporting System \(VAERS\)](#). This national system collects data to look for adverse events that are unexpected, appear to happen more often than expected or have unusual patterns of occurrence. Reports to VAERS help the CDC monitor the safety of vaccines. Safety is a top priority.

The CDC also implemented a new smartphone-based tool called [v-safe](#) to check-in on people's health after they receive a COVID-19 vaccine. When you receive your vaccine, you should also receive a v-safe information sheet telling you how to enroll in v-safe. If you enroll, you will receive regular text messages directing you to surveys where you can report any problems or adverse reactions you have after receiving a COVID-19 vaccine.

What temporary reactions from the vaccine should be reported to a doctor?

In most cases, temporary reactions are normal and good signs that your body is building protection. Taking over-the-counter medicine, such as ibuprofen or Tylenol, drinking lots of fluids, or placing a cool washcloth on your forehead can help with these temporary reactions.

If you have a history of allergic reactions to any vaccine or treatment that is injected, you should talk with your health care provider about the risks and benefits of vaccination before getting the shot. Although very rare, if you experience a severe allergic reaction to the vaccine seek immediate medical care by calling 911. Signs of a severe allergic reaction can include difficulty breathing, swelling of your face and throat, a fast heartbeat, a bad rash all over your body and dizziness and weakness.

Contact your doctor if any redness or tenderness where you got the shot increases after 24 hours, if your temporary reactions are worrying you, or if they do not seem to be going away after a few days. While it is extremely rare that you would have a serious adverse reaction, if you develop severe headache, backache, severe abdominal pain, new neurologic symptoms (like changes in vision, changed mental status or numbness), leg pain or swelling, shortness of breath, tiny red spots on your skin (called petechiae), or new or easy bruising within three weeks after vaccination, contact your health care provider or seek medical care.

What do we know about the vaccine's long-term safety?

Since most of the vaccine trials began in the summer of 2020, we have months, not years, of follow-up data. Fortunately, we have decades of vaccine safety data from other vaccines, and we know that long-term side effects are quite rare. The CDC is actively collecting safety data via the [Vaccine Adverse Event Reporting System](#), which has been tracking safety on all vaccines since 1990. Learn more about all the ways that vaccine safety is being monitored [here](#).

Why was there a pause in using the Johnson & Johnson's (Janssen) COVID-19 vaccine and what was the result of the pause?

In mid-April, a brief pause was recommended after six reported cases of a rare type of blood clot were seen in individuals after receiving the Johnson & Johnson COVID-19 vaccine. After careful investigation during the pause, the CDC and FDA determined that blood clotting with low platelets (called thrombosis with thrombocytopenia syndrome – TTS) from the Johnson & Johnson vaccine is extremely rare and that the benefits of the vaccine in preventing serious illness, hospitalization and death far outweighed the risk. Therefore, they recommended resuming the use of the Johnson & Johnson vaccine. Following this guidance, NC DHHS has recommended that North Carolina vaccine providers resume the use of Johnson & Johnson vaccines now that their safety has been reaffirmed. The pause and investigation show that our safety system is working—and that people can be confident in the safety and effectiveness of the approved vaccines. [Read more information.](#)

Is myocarditis, or heart inflammation, a side effect of COVID-19 vaccines?

There have been rare reports of myocarditis occurring after COVID-19 vaccination with Moderna or Pfizer vaccines in the United States and Europe. Myocarditis is the inflammation of the heart muscle and pericarditis is the inflammation of the lining outside the heart. In both cases, the body's immune system is

causing inflammation because of an infection or some other trigger. While myocarditis can be serious, it is frequently mild and gets better without any treatment. Symptoms can include abnormal heart rhythms, difficulty breathing, or chest pain. The risk for both myocarditis and pericarditis are much higher from becoming infected with COVID-19 than from the vaccines.

The Center for Disease Control (CDC) has been closely monitoring these reports in the systems set up to detect safety concerns with vaccines and will continue to evaluate reports of myocarditis and pericarditis that happen after COVID-19 vaccination. The CDC Advisory Committee on Immunization Practices has also reviewed the data. The CDC, American Academy of Pediatrics, and multiple medical and public health groups released a [statement](#) recommending COVID-19 vaccination, stating that this is an extremely rare side effect with mostly mild cases with individuals recovering often on their own or with minimal treatment compared to more risks with COVID-19 *infection*.

What should I do if I received a vaccine in another country that is not currently authorized in the United States?

The following are the recommendations for you. It is important to note that currently, we do not have data on the safety or effectiveness of getting more than one type of COVID-19 vaccine.

- I received a COVID-19 vaccine not authorized by FDA, but the vaccine is authorized for emergency use by World Health Organization.
 - People who are fully vaccinated with a COVID-19 vaccine that has been authorized for emergency use by the World Health Organization (WHO) **do not need** any additional doses with an FDA-authorized COVID-19 vaccine.
 - People who are partially vaccinated with a COVID-19 vaccine that has been authorized for emergency use by WHO may choose to receive an FDA-authorized COVID-19 vaccine.
- I received a COVID-19 vaccine that is not authorized by FDA and not authorized for emergency use by World Health Organization.
 - People who have been fully or partially vaccinated with a COVID-19 vaccine that is not authorized by FDA and not authorized for emergency use by WHO may choose to receive an FDA-authorized COVID-19 vaccine series.

You must wait a **minimum of 28 days** between administration of the two different COVID-19 vaccines. Additional information about these recommendations can be found [here](#) and a list of vaccines and their authorizations can be found [here](#).

What other COVID-19 vaccines are being developed and considered?

It is difficult to say when other vaccines will be available. As of March 2021, Phase 3 clinical trials (the last phase) are in progress, being planned or completed in the United States for the following COVID-19 vaccines:

- AstraZeneca's COVID-19 vaccine
- Novavax's COVID-19 vaccine

You cannot get COVID-19 from any of these vaccines in development. All of the above vaccines teach your body to make germ-fighting antibodies against the COVID-19 virus. These germ-fighting antibodies are then ready to fight off the real COVID-19 if it ever tries to attack you.

How can someone enroll in a clinical trial for a vaccine?

Over 100 vaccines for COVID-19 are under development and many are in clinical trials that are recruiting participants. People interested in enrolling in a COVID-19 vaccine trial may visit the following

AFTER YOUR VACCINATION

Will people be provided with documentation that they have had the vaccine?

Yes. You should receive a vaccination card that tells you what COVID-19 vaccine you received, the date you received it and where you received it. Keep the card in a safe spot and take a picture of it just in case it gets misplaced. Some people with access to email will also receive an email with proof of vaccination. Many North Carolinians can also access their COVID-19 vaccine information in the [North Carolina COVID-19 Vaccine Portal](#), if they received the COVID-19 vaccine from a North Carolina provider and provided an email address to the provider. If you received your vaccine from a pharmacy (e.g., CVS or Walgreens) or from another federal vaccine provider (such as the US Department of Defense), you will need to get your vaccine information directly from that provider or the CDC vaccination card provided as it is not available in the North Carolina COVID-19 Vaccine Portal.

If people lose their vaccine card or have questions about accessing their vaccine records, they should contact their vaccine provider.

Can I stop wearing a mask after I'm vaccinated?

After you are fully vaccinated, you can get back to many activities you enjoyed before the pandemic, but for some activities you should still wear a mask. If you are fully vaccinated, you should:

- Wear a mask in all indoor public spaces if you live in an area of high or substantial levels of transmission as defined by the [CDC](#) until more people are vaccinated and viral spread decreases. Some people may choose to wear a mask regardless of level of transmission.
- Wear a face covering in all K-12 schools, child care, indoor settings with a large number of children or child-focused activities (e.g., children's museums), public transportation, healthcare settings, high density congregate settings (e.g., correction and detention facilities, homeless shelters, migrant farm camps), and large crowded indoor venues (e.g., arenas, stadiums).
- Get tested if you have any symptoms of COVID-19. After an exposure to COVID-19, you should get tested 3-5 days after exposure and wear a mask around others until you get a negative test result.

Receiving the COVID-19 shot and following the 3 Ws is everyone's best protection from getting and spreading COVID-19. For more information about what to do after being vaccinated, see [NC DHHS's guidance](#).

When am I considered fully vaccinated against COVID-19?

You are considered fully vaccinated if it has been at least two weeks after your single dose vaccine or at least two weeks after the second dose of a two-dose vaccine.

Video (Español): <https://www.youtube.com/watch?v=xkMRA4kwYx0>

For how long will the vaccine protect me against COVID-19?

Data so far shows that there is still very high protection levels for at least 6 months after the vaccine. Because of the high level of protection at 6 months, the protection will likely last longer. We'll know even more about how long the immunity from the vaccines lasts as people have been vaccinated for a longer period of time.

Will I need to get a booster shot in the future?

Booster doses of COVID-19 vaccines are not currently recommended. Both Moderna and Pfizer are developing booster shots as scientists continue to study how long the vaccines stay effective. Although vaccination provides highly effective protection against hospitalizations and severe illness, we are seeing a decrease in vaccine effectiveness against mild to moderate infection—people getting sick but not severely ill and needing hospitalization. The U.S. Department of Health and Human Services announced planning is underway to support booster shots for the general population. Boosters will likely be available beginning the end of September, pending full review and recommendations by the FDA and CDC. People who received the Pfizer or Moderna vaccines will likely be eligible, starting 8 months after their second dose. Research is still underway regarding boosters for Johnson & Johnson.

An additional dose of Pfizer or Moderna is authorized only for moderately or severely immunocompromised individuals after their initial Pfizer or Moderna 2-dose series, which is another dose because the immune

response to the primary series is likely to be decreased in these individuals. See “Do I need an additional dose.”

Do I need a booster shot if I received an antibody test after getting the vaccine and antibodies were not detected?

CDC **does not** recommend antibody testing before or after getting the COVID-19 vaccine to check if a person is protected. According to the FDA, currently authorized SARS-CoV-2 antibody tests are helpful in identifying individuals with previous infection with the virus, but these tests **have not** been used to decide if the vaccine worked.

For more information, see the [FDA's statement on antibody testing](#).

Will the vaccine affect testing for possible COVID-19 infection?

Getting a COVID-19 vaccine will not affect the most common tests used to test for the COVID-19 virus, which are called PCR or antigen tests. The vaccines do not affect these test results because there is no virus in the vaccines. However, vaccines can affect the results of some COVID-19 antibody tests because of the immune response to the vaccine. More details can be found from the CDC [here](#).

What should I do if I am worried I have COVID-19 after I am vaccinated?

If you develop symptoms of COVID-19 after being vaccinated, you should get tested and isolate from other people. Your health care provider and local health department will report the test results to NC DHHS, including notification of a COVID infection after being vaccinated. Getting COVID-19 is much more likely if you are not vaccinated.

If I do not get the COVID-19 vaccine, how long will I have to wear a mask?

People who are not vaccinated should continue to wear a mask in all indoor public settings and in outdoor settings when they can't maintain six feet of distance. Masks will still be required for everyone in child care centers, schools and camps, as most children are not yet vaccinated or are not eligible to be vaccinated. Everyone, including people who are fully vaccinated, will still be required to wear a mask in certain settings such as public transportation, health care settings like hospitals, doctor's offices and long-term care settings like nursing homes, and certain congregate settings like correctional facilities and homeless shelters. Masks are also strongly recommended for everyone regardless of vaccination status at large crowded indoor or outdoor events, like sporting events and live performances.

NC DHHS recommends we continue to protect one another until more people are vaccinated.

GOVERNMENT DATA AND PRIVACY

Will I need to sign a consent form to get vaccinated?

Individuals 18 and older can provide verbal consent. Written consent is not generally required, but some providers may require or request written consent. For minor's consent, see " **Can people under the age of 18 get a COVID-19 vaccine without parental consent?**"

Does the state require or mandate vaccination?

No. North Carolina has no plan to require people to be vaccinated against COVID-19. It is possible that some employers or schools will require vaccines for their employees or students. Employers may ask if you have been vaccinated but cannot require that you share any other personal medical information.

How will the state know who has been vaccinated?

North Carolina uses the COVID-19 Vaccine Management System (CVMS). CVMS is a free, secure, web-based system accessible to all providers who give COVID-19 vaccinations. It helps vaccine providers know who has been vaccinated and with which vaccine to make sure people get the second dose of the same vaccine at the right time. It also allows the state to manage vaccine supply. Pharmacies, such as CVS and Walgreens, will not use CVMS to give and manage vaccines. These pharmacies will use their own systems.

What data is the state collecting and how will it be shared?

Information about your COVID-19 vaccination is carefully managed to protect your privacy. Your immunization information will not be shared except in accordance with state and federal law. NC CVMS is a system that enables the collection of immunization information for health and safety reasons. The immunization information collected for NC CVMS is similar to the information that is required when you go to the doctor's office or a pharmacy for a vaccination, including your name, address, date of birth, location where vaccine was given, when the vaccine was given, person who administered the vaccine, information about the specific vaccine vial (expiration date, vaccine identifier number, etc.) and how the vaccine was given (e.g., in the muscle of the right arm). NC CVMS also collects information about race and ethnicity, which is necessary to support efforts for equitable vaccine distribution in NC. To meet federal requirements established by the U.S. Centers for Disease Control and Prevention (CDC) and in accordance with NC state law, NC does not submit any identifiable information to CDC. Instead, NC submits the following information to the CDC: the vaccine recipient's year of birth (not date of birth), the first 3 digits of the vaccine recipient's zip code of residence (if the underlying population in that zip code includes more than 20,000 people) and the date of submission of the vaccination record. More information about federal CDC data requirements is available at: <https://www.cdc.gov/vaccines/covid-19/reporting/requirements/index.html>.

What data about vaccinations will be available to the public?

North Carolina has an online [public dashboard](#) to share data on vaccinations. The data in the dashboard is updated Monday through Friday.

THE SCIENCE BEHIND THE VACCINES

How do the vaccines work?

You cannot get COVID-19 from the vaccines. All of the currently authorized vaccines give your body temporary instructions to make a protein. The two-dose vaccines use mRNA technology, while the one-dose vaccine uses DNA technology to provide these instructions. This protein safely teaches your body to make germ-fighting antibodies against the COVID-19 virus. These germ-fighting antibodies are then ready to fight off the real COVID-19 virus if it ever tries to attack you. Your body naturally breaks down everything in the vaccine. There is no COVID-19 virus in the vaccine, and none of the vaccines can change your DNA.

What are the ingredients in the COVID-19 vaccines?

The COVID-19 vaccines give the cells in your body the instructions to make a protein that safely teaches your body how to make antibodies (germ-fighting cells) to fight the real COVID-19. Your body naturally destroys the instructions and gets rid of them. None of the vaccine ingredients remain in your system, nor do they alter any DNA in your body. The three COVID-19 vaccines currently available in the United States do not contain eggs, preservatives, fetal tissue, stem cells, mercury or latex. For a full list of ingredients, please see each vaccine's Fact Sheet for Recipients and Caregivers:

- [Pfizer-BioNTech COVID-19 vaccine](#)
- [Moderna COVID-19 vaccine](#)
- [Johnson & Johnson COVID-19 vaccine](#)

Will the vaccines work against new variants of the COVID-19 virus?

All viruses change over time, and these changes (or variants) are expected. Scientists are working to learn more about new COVID-19 variants and their effects on vaccines. There continues to be good evidence that the authorized COVID-19 vaccines provide protection against the variants circulating in the United States, including the

highly contagious Delta variant. Not only does vaccination prevent severe illness, hospitalization, and death, but also reduces the spread of the virus and helps prevent new variants from emerging.

We do know that some of the new variants spread more easily, which may lead to more cases of COVID-19. Therefore, it is important to keep practicing the 3Ws: washing your hands, waiting six feet apart and wearing a mask around people you don't live with. More information can be found on the [CDC website](#).

Why are two vaccine shots necessary for some vaccines?

The Pfizer and Moderna vaccines require two shots—the Pfizer doses are given 3 weeks apart and the Moderna vaccine is 4 weeks between shots. You need two doses to build up strong immunity against COVID-19. The goal of the first vaccine dose is to “prime” the immune response, which means that it gets your body ready to have the best protection. The second dose “boosts” the immune response to be fully protected. It is important to get two doses of the same vaccine.

While other countries may take a different approach to vaccinations, the FDA and CDC continue to recommend that everyone get two shots for the Moderna and Pfizer vaccines. Currently there are not enough data to suggest that one shot of the Moderna and Pfizer vaccines offers enough protection against COVID-19.

Additional COVID-19 vaccines are in Phase 3 clinical trials. Learn more about the [different COVID-19 vaccines](#).

Are there fetal cells or fetal tissues in the vaccine?

None of the vaccines contain fetal cells or fetal tissues. Fetal cells were used in research to develop all three vaccines. Vaccines commonly use fetal cells in development. The Pfizer and Moderna vaccines do not require the use of any fetal cells to produce the vaccines. In order to produce the vaccine, the Johnson and Johnson vaccine uses fetal cells that were isolated over 30 years ago.

Couldn't find the answer you were looking for?

Call the COVID-19 vaccine help line at 888-675-4567 Monday through Friday from 7 a.m. until 7 p.m., and on Saturday and Sunday from 8 a.m. until 4 p.m.