COVID-19 Vaccine Frequently Asked Questions

Vaccine Basics

Q. What are my options for the COVID-19 vaccine?
A. There are 2 vaccines that have received an Emergency Use Authorization (EUA) by the U.S. Food and Drug Administration (FDA): the Pfizer-BioNTech vaccine and the Moderna vaccine. Both are mRNA (messenger RNA) vaccines. There are more vaccines that are being studied and may eventually become available.

DC Health recommends that you take the first vaccine available to you.

Q. How many doses of the vaccine do I have to get?
A. Two doses of the vaccine are needed. The recommended time period between the first and second doses is 21 days for the Pfizer-BioNTech vaccine and 28 days for the Moderna vaccine. It is important to get both doses of the same vaccine and not to mix-and-match, or the vaccine might not work as well. The first shot helps the immune system recognize the virus, and the second shot strengthens the immune response. You need both to get the best protection.

Q. Are the vaccines effective?
A. Clinical trials have shown both vaccines to be about 95% effective at preventing symptomatic COVID-19.

Q. How long does the COVID-19 vaccine take to start working? Do I get some protection after the first dose?
A. People might get some protection after receiving one dose but full protection is expected about 1 week after receiving the second dose.

Q. What are the side effects of the COVID-19 vaccines?
A. Common side effects of the COVID-19 vaccines are pain at the injection site, fever, feeling tired, headache, chills, muscle aches and joint pains. Most symptoms are mild to medium intensity, appear within 3 days after receiving the vaccine (with most occurring the day after vaccination), and go away within 1 or 2 days. Symptoms may be worse in people younger than age 55 and after the 2nd dose of the vaccine. Having any of these common side effects shows that the vaccine is working as intended and stimulating an immune response from your body.

Q. Are the vaccines safe? I’ve heard the process was rushed and important steps were skipped.
A. While the COVID-19 vaccines were developed in record time, they are still being held to the same safety standards of all vaccines. The vaccines went through the standard phases of clinical trials, and have been tested on tens of thousands of people from different races and ethnicities. While these trials may not uncover rare adverse events (that you may see when millions of people get the vaccine), we can be comfortable that these trials were large enough to detect any major safety concerns. Due to the pandemic, the vaccine was manufactured and planned for mass distribution while the trials were still happening, which usually doesn’t occur as it may result in a significant waste of money if the product doesn’t get approved. This meant that once the data from the trials was reviewed and approved by the Food and Drug Administration (FDA), the vaccines were very quickly ready for use. Clinical trial participants will continue to be monitored to gain more information about the vaccines, including such things as how long immunity lasts.
Q. Do I need to get vaccinated if I've already had COVID-19?
A. Yes. It is not yet certain how long or how well a past COVID-19 infection protects someone from getting infected again. The vaccine can also boost immunity you already have from a past COVID-19 infection.

Q. Can the vaccine give me COVID-19 or cause me to test positive for COVID-19?
A. No. None of the COVID-19 vaccines currently in use or in development in the United States, contain the live virus that causes COVID-19. The vaccines only contain the code for a viral protein, which is enough to stimulate the body’s immune response. However, it typically takes a few weeks for the body to build immunity after vaccination. That means it's possible you could be infected with the virus that causes COVID-19 just before or just after vaccination and get sick. If you develop cough, shortness of breath, runny nose, sore throat, or loss of taste or smell after getting the vaccine, you should not assume these symptoms are from the vaccine, and should take steps to isolate yourself and call your healthcare provider.

Q. How much will the COVID-19 vaccine cost?
A. The vaccine will be free, but doctors will be able to charge an administration fee. (This may be covered by your health insurance.)

Q. Who should NOT get the COVID-19 vaccine?
A.
- Anyone with a previous severe or immediate allergic reaction (e.g. anaphylaxis) to the first COVID-19 mRNA vaccine dose, any of the vaccine ingredients, or polysorbate. For a list of vaccine ingredients see: www.fda.gov/media/144414/download and modernatx.com/covid19vaccine-eua/eua-fact-sheet-recipients.pdf.
- People younger than 16 years old (it has not yet been fully tested on this age group)
- People currently ill with COVID-19 and are isolating, people with symptoms who are isolating, or people who have been exposed to COVID-19 and are quarantining. This is to protect the staff and other patients in the vaccine clinic. You can get your vaccine once your isolation or quarantine is completed.

Q. Why do people get COVID-19 after the first/second dose of the vaccine?
A. The COVID-19 vaccine requires two doses to be fully effective, as it takes time for your body to build immunity (protection against the virus that causes COVID-19) after vaccination. Because of that, it is possible for you to be exposed in the two weeks before your first or between your first and second dose, and become sick with COVID-19 after you received those shots. This is because the vaccine has not had enough time to provide protection.

The currently authorized vaccines in the US do not contain live virus, so the vaccine itself cannot make you sick with COVID-19.
After getting the vaccine

Q. Once I get vaccinated, will I receive any sort of documentation to show that I have received the COVID-19 vaccine?

A. Since both of the COVID-19 vaccines approved so far require two doses, you will receive a COVID-19 Vaccination Record Card once you receive your first dose. It will also remind you of when you will need to return to receive your second dose. You will need to bring the card with you when you return for the second dose so that it can be documented on the card.

Q. Can I stop taking precautions like wearing a mask and social distancing after I get the vaccine?

A. No. Everyone should continue to take COVID-19 precautions until public health officials instruct otherwise. One of the main reasons for this is that the vaccine has been demonstrated to be effective at preventing symptomatic COVID-19 illness, but it is not yet proven to prevent asymptomatic infection. Asymptomatic infection is when a person is carrying the virus but has no symptoms of illness. Asymptomatic infection is known to be a major way the virus that causes COVID-19 spreads. Ongoing vaccine studies will answer this question.

Q. Can I spread COVID-19 to others after getting the vaccine?

A. People who get an mRNA vaccine will not be able to spread the virus as a result of getting the vaccine, as it does not introduce the virus to your body. However, we are still learning if the vaccine prevents someone from showing symptoms because of becoming infected with the virus, or if it prevents infection entirely. If it only prevents someone from showing symptoms, it is possible that someone who has the vaccine may be able to get infected without knowing it and spread the virus to other people. This is why it is important to keep practicing everyday prevention measures even after getting the vaccine until we learn more.

Q. What happens if my second dose gets delayed?

A. You should still get your second dose as soon as you can.

Special considerations

Q. Should residents get tested before they get the vaccine?

A. No, you do not need to get tested before getting the vaccine. If you develop symptoms consistent with COVID-19 before going into your appointment, you should isolate and get tested as per usual recommendations.

Q. Can a person sick with COVID-19 receive the vaccine?

A. No. They should wait to get the vaccine until they are feeling better and have completed their isolation period so that they don’t put healthcare providers and other patients at risk of being exposed.

Q. Can pregnant women get the vaccine?

A. While there have been no specific studies of the vaccine for pregnant women and data are limited, some women in the clinical trials got the vaccine before they knew they were pregnant, and some became pregnant during the study period. In these instances, the vaccine was effective and no negative effects occurred. Pregnant women are known to be at higher risk for complications from COVID-19 such as preterm birth. Vaccine studies in pregnant women are planned. The U.S. Centers for Disease Control and Prevention (CDC) and the American
College of Obstetricians (ACOG) have recommended that pregnant women be vaccinated. Pregnant women should consult with their health care providers regarding vaccination.

Q. Can breastfeeding women get the vaccine?
A. Yes. Although the vaccine has not been specifically studied in breastfeeding women, it is felt to be safe. The COVID-19 virus is not transmitted through breastmilk, so it is expected that vaccination would not be a concern either.

Q. If I’m trying to get pregnant, can I get the vaccine? Should I delay getting pregnant until after I’ve been vaccinated?
A. Yes you can get the vaccine if you are trying to get pregnant. It is not necessary to delay pregnancy until after you have been vaccinated.

Q. Can children get the vaccine?
A. Children under the age of 16 cannot receive the Pfizer-BioNTech vaccine. Children under 18 cannot receive the Moderna vaccine. As the original clinical trials did not include children under 16, it has not yet been proven to be safe and effective in this age group.

Q. Is the vaccine being tested on children now? When will children be able to get the COVID-19 vaccine?
A. Trials studying the vaccine in children are currently in progress. As more information becomes available, the age groups eligible for the COVID-19 vaccine will be adjusted.

Q. Should people with chronic medical conditions get the vaccine?
A. Yes. COVID-19 vaccination is especially important for people with underlying health problems like heart disease, lung disease, diabetes, and obesity. People with these conditions are more likely to get very sick from COVID-19.

Q. Should people who are immunocompromised get the vaccine?
A. CDC currently recommends this group receive the vaccine. There is not much data so far about performance of the vaccine in immunocompromised individuals. It is possible that the vaccine may not be as effective in some individuals with immune compromising conditions. On the other hand, immunocompromised people are at increased risk for severe COVID-19 infection. Immunocompromised people should discuss whether they should get the vaccine with their healthcare provider, but recognize that more needs to be learned about the effectiveness of the vaccine in this group.

Q. Will I need to get a COVID-19 vaccine every year like the flu vaccine?
A. It is still too early to know. Ongoing studies should answer this question.

Q. Can I get a COVID-19 vaccine and flu vaccine at the same time?
A. No, you should not get a COVID-19 vaccine and a flu vaccine at the same time. COVID-19 vaccines should be given alone with at least 14 days either before or after you get any other vaccines, including a flu vaccine. This is because there is currently limited information on the safety and effectiveness of getting other vaccines at the same time as a COVID-19 vaccine. As more information becomes available, this recommendation may change. Your healthcare provider can help you decide the best vaccination schedule for you and your family.
Access to the vaccine

Q. When will the general public be able to get the vaccine?
A. At this moment, vaccination appointments are only available for workers in health care settings and District residents 65 years of age and older. To schedule an appointment, please visit vaccinate.dc.gov or call the District’s call center at 855-363-0333, Monday through Friday from 8 am to 7pm and Saturday from 8 am to 4 pm.

If you do not work in a health care setting or not a District residents 65 years of age and older, submit your email address or mobile phone and you will receive an email or text message when the registry opens to additional populations.

Q. How much will the COVID-19 vaccine cost?
A. The vaccine will be free to you, but doctors will be able to charge an administration fee to your insurance. You will still have access to the vaccine if you do not have insurance.

Science

Q. How do mRNA vaccines work?
A. mRNA vaccine technology has been studied by scientists for more than a decade, but the COVID-19 vaccines are the first vaccines released using this technology. mRNA stands for messenger RNA, which is the blueprint living things (including humans and viruses) use to make proteins. The mRNA in the vaccine contains the code for making the COVID-19 spike protein, which is what the virus uses to gain entry into and infect human cells. The vaccine causes the body to make antibodies against the spike protein. Then, if a person gets exposed to the real COVID-19 virus, the body will release these antibodies to destroy the virus and prevent the person from getting sick.

Q. What is herd immunity and why am I hearing so much about it in relation to COVID-19?
A. Herd immunity occurs when a large enough percentage of a given population is immune to a certain infection such that when someone gets the infection, the microbe has difficulty finding new people to infect. When herd immunity is reached, epidemics die out. The amount of the population that needs to be immune to reach herd immunity varies for every infection. It can vary from 50-90% for viral infections. It is not yet known what percentage of people would need to be immune to COVID-19 to reach herd immunity. Widespread vaccination is the safest and best way to reach herd immunity, to stop the COVID-19 pandemic and to return life to normal.

Q. Will the vaccines work on the mutant strains of COVID-19 that I’m hearing about?
A. Current scientific evidence indicates that the vaccines will work on the mutant strains of COVID-19. All viruses mutate over time. The mutant strains so far are not different enough from the original COVID-19 virus to make the vaccine not work. Scientists are watching and monitoring this issue closely. It may mean that more people will have to be vaccinated to achieve herd immunity.

Other concerns

Q. Can the mRNA vaccines alter my DNA?
A. No, this is not scientifically possible. The mRNA in the vaccine contains the code for making the COVID-19 spike protein, which is what the virus uses to gain entry into and infect human cells. The mRNA is not able to enter the nucleus of human cells where DNA is stored, and
would not be able to change DNA. The mRNA is naturally broken down within the cell after a short period of time.

Q. Are the mRNA vaccines produced using fetal cells?
A. No.

Q. Do the mRNA vaccines contain preservatives, like thimerosal?
A. No.

Q. I'm not eligible to get the vaccine right now, what can I do until it's my turn?
A. Continue to help slow the spread of COVID-19: Wear a mask, wash your hands often, stay 6 feet away from other people, and stay home if you are sick. Doing all of these things will help keep people healthy until a vaccine is widely available.

You can also get a flu vaccine. Flu vaccines save lives and prevent more flu during the COVID-19 pandemic. People need to do everything they can to stay healthy and not overwhelm our health care system this fall and winter. To find where you can get a flu vaccine, visit VaccineFinder and dchealth.dc.gov/flu.

This FAQ will continue to be updated. Please visit coronavirus.dc.gov for the most updated information.