



COVID-19 Vaccinator FAQs

For more information and other helpful resources, please visit the [State's vaccinator resource hub](#).

General Questions About the Vaccines

1. How does the Moderna vaccine differ from the Pfizer vaccine? **In six important ways.**
 - The Moderna vaccine is for individuals 18 years and older whereas the Pfizer vaccine can be given to individuals 16 years and older.
 - While the second dose for the Pfizer vaccine should be administered 17-21 days after the first vaccine, the second dose of the Moderna vaccine should be administered 24-28 days after the first dose.
 - The Moderna vaccine does not need to be stored at ultra-low temperatures like the Pfizer vaccine, and it does not need to be diluted.
 - Each vial of the Pfizer vaccine contains at least 5 doses, sometimes more. Each vial of the Moderna vaccine contains only 10 doses.
 - The minimum order request for the Moderna vaccine is 100 doses while the minimum order request for the Pfizer vaccine is 975.
 - The Pfizer vaccine should be administered in doses of 0.3mL. The Moderna dosage is 0.5mL.
2. Is the Moderna vaccine shipped as 100 vials or 100 doses? **100 doses.**
3. Is the Moderna vaccine a live vaccine? **No, it is a messenger RNA (mRNA) vaccine, so it does not contain live ingredients.**
4. How long does the first dose of vaccine take to become effective? **Dose 1 of either vaccine takes one to two weeks to become effective, but you should stress to people the importance of receiving the second dose. They are not considered fully immunized until after the second dose.**
5. If a person receives a vaccine and then comes into contact with a positive case, should they quarantine? **Yes, because it takes between 1 and 2 weeks for the vaccine to be effective.**
6. Can a person still be infected with COVID-19 after receiving the vaccination? **It is possible that people who are vaccinated could still get infected without developing symptoms and could then transmit the virus to others.**
7. Do we know how long the vaccines will protect the population until they need another 2-shot series? **There is no definitive data on how long immunity will last with a vaccine. A COVID-19 vaccine will trigger an immune system response to develop active immunity. Active immunity results when exposure to a disease organism triggers the immune system to produce antibodies to that disease. If an immune person comes into contact with that disease in the future, their immune system will recognize it and immediately produce the antibodies needed to fight it. Although we don't know exactly how long immunity will last for the specific vaccines in trial, active immunity can be long-lasting. <https://covidvaccine.mo.gov/facts/>**

8. Since this is multi-dosing, is there a preservative or Thimerosal in the vials? **There is no preservative or Thimerosal in the Pfizer or Moderna vaccine vials.**
9. Is there an estimate of when vaccine will be available for people in Group 1B? **Vaccinating Phase 1 may take a few months or more as there will be limited supplies. [Vaccinator Enrollment Guide and Considerations.pdf \(morx.com\)](#)**
10. Is it true the second dose is when we could see some of the worst reactions? **It depends on the individual, but remember to tell patients about the possible side effects. If you are a hospital or health system and you are worried about staff, you could stagger who gets the vaccine and give it to them at the end of their last 12-hour shift so they will have a couple of days at home to recover if they have side effects.**
11. Are the two vaccines interchangeable? **No. The Pfizer and Moderna vaccines are not interchangeable.**
12. Can other vaccines be given with the COVID vaccine? **Do not administer the Pfizer-BioNTech COVID-19 vaccine with any other vaccines: wait at least 14 days.**
13. What are the side effects of the vaccines? **Side effects that have been reported with both vaccines include:**
 - injection site pain
 - injection site swelling or redness
 - fatigue
 - headache
 - muscle pain
 - chills
 - joint pain
 - fever
 - nausea
 - feeling unwell
 - rarely, swollen lymph nodes (lymphadenopathy)

Side effects typically last one to two days. There is a remote chance that both vaccines could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of vaccine. Signs of a severe allergic reaction can include:

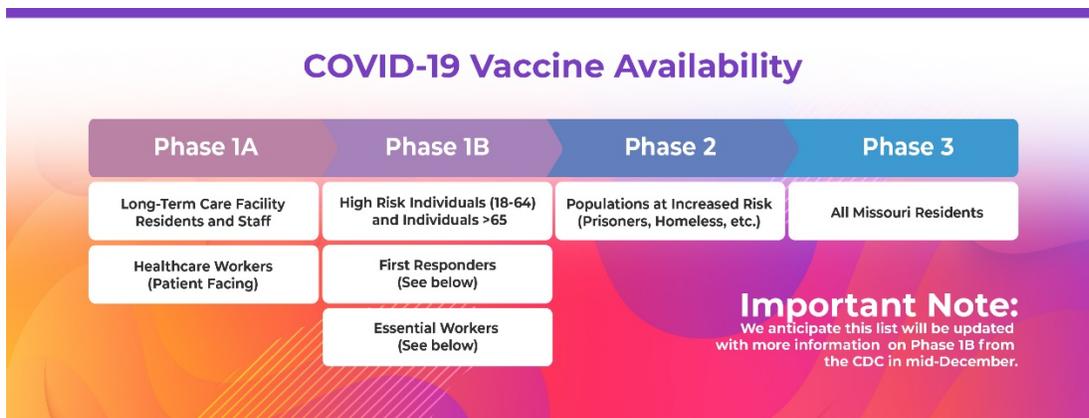
- Sensation of throat closing, stridor (high-pitched sound while breathing), shortness of breath, wheezing, cough
- Nausea, vomiting, diarrhea, abdominal pain
- Dizziness, faintness, tachycardia, hypotension
- Hives, itching, or swelling of lips, face, or throat

These may not be all the possible side effects. Other serious and unexpected side effects may occur.

14. How many cases of anaphylaxis have been reported in the U.S.? **As of December 18, six cases have been reported. One person had a history of anaphylaxis after a rabies vaccine. All affected individuals recovered.**

Vaccine Prioritization

1. Is there any new guidance on the vaccination priority groups? When do we anticipate hearing about the final definition of the priority groups? **The timeline for phases and the priority groups beyond Phase 1A will be determined once future allotment information is provided to us by Operation Warp Speed. Definitions of the groups will be announced by Jan. 15 and will be posted at www.mostopscovid.com.**



2. What organizations are considered Phase 1A providers? **Hospitals, health systems/clinics, pharmacies, and public health agencies.**
3. Will LPHAs receive vaccine before pharmacies that are enrolled through the state's vaccine distribution program? **When it comes to prioritizing who gets vaccine first, we are prioritizing health systems and hospitals, LPHAs, and pharmacies as a group. Order requests from these groups are being processed the same way.**
4. Is the state doing anything to ensure/monitor that the right people are getting vaccinated within the correct phases? **After the vaccine is given to the providers, it is difficult for the state to track where it goes. We are relying on the vaccinators to give it to the right people in the right phase.**
5. What is the target audience for giving the vaccine through an LPHA? **Examples include home health workers, rural health clinic staff, dentists, optometrists, health agency staff, etc.**
6. Will everyone that gets a first dose get the second dose before the next phase starts to ensure enough locally? **Vaccine delivery/administration cannot be held up to ensure this, so it is important to sign up for the recall program ahead of time. It's important to schedule people for their second dose as soon as they receive their first dose, or let them know when they should come back for their**

second dose. There are also postcards that can be sent as reminders, and some electronic health records have a reminder feature.

7. Since pharmacists have been contracted to immunize LTCF residents, will those pharmacists be vaccinated first? According to our federal partners, pharmacies may use their allotted vaccine that has not been used or is slotted to be used in the LTCF may be used for pharmacy staff vaccination.
8. If our SNF does not have its clinic date yet, is it true that we shouldn't expect to have any clinics at that SNF until the end of January? Please have your SNF contact us if your SNF has not been contacted at Lana.hudanick@health.mo.gov
9. Is there a way to find out the pharmacies in our county who will vaccinate? This information will be available later in January.
10. Can healthcare workers can go to another county to get their COVID vaccine? Yes. The vaccines are not county-based.
11. Are school nurses considered to be in Phase 1A? Is that up to us to use our best judgment? Yes, if they are "patient-facing." Use your best judgement.
12. If a private pediatric office is not given permission for providing vaccine since their patient population is not authorized to receive the vaccine, do the employees (HCW) still qualify for a vaccine and how do they get it administered? The HCW in pediatric offices are still considered for Phase 1A.
13. Why was it decided that long-term care facilities receive all of the Moderna through January? Missouri was required to choose one consistent vaccine for the federal long term care program to use, and Moderna was chosen for this purpose for a variety of reasons.

Vaccine Planning

1. Why is the number of doses of Pfizer and Moderna vaccines currently expected different from the original estimates? The number of doses original estimated were for planning purposes. As vaccine supply varies, allocations are set.
2. Do we know how many doses of Pfizer vaccine will be available in January? We receive allocation amounts on Tuesdays for the upcoming week. Until vaccine supply levels out, we will continue to receive our allocations weekly.
3. Will we know in advance how many doses we are allowed so that we can make preparations to ensure that all doses will be administered within 10 days? Yes. You will know the number of doses you will be allocated.

4. Since in short supply of vaccine, should we modify how we give the vaccine and use the first shipment for both the first and second shot? **No, do not hold back doses of vaccine. Second doses have already been held back at the federal level.**
5. How much vaccine will be allocated to LTCFs vs. healthcare delivery partners over the next few weeks? **Missouri will be allocating 45% of vaccine to LTCFs and 55% to our healthcare delivery partners outside of the federal LTCF participation program.**
6. If the pharmacies have ultra cold storage capability, why was it decided to allocate Moderna and not Pfizer to this program? **The federal Long-Term Care Pharmacy Partnership Program required states to select in advance which vaccine would be used for the entire program. We can't mix and match. Not all pharmacies have ultra cold storage.**
7. If we get an order this week, when is the soonest time we can order again? **Due to the fluctuation of allocation numbers, it is difficult to estimate how often a provider can receive an order. You can place an order each week, however the State's ability to fill vaccine order requests is contingent on vaccine supply. The submission of an order request does not guarantee an order will be filled.**
8. The Missouri plan suggests that MO DMAT and SEMA have 10 mobile storage system that can be used for transport and cold storage. Is that something that is accessible to vaccinators? **These resources are available but may not be able to hold vaccine at ultra cold temperatures. These were envisioned for reservation during later phases when we needed to vaccinate at scale.**
9. Is there anything we can do, as providers, to make the information coming from the federal government more accurate so we can plan accordingly? **Yes, you can contact federal authorities to help ensure they understand that importance of providing solid, good, baseline data from which states can operate. Not at a one-week or two-week tempo, but 4-6 weeks out so we can plan and provide transparent and clear information for everyone in the process.**

Requesting Vaccine

1. If we are not approved yet, or still pending approval, we will not be able to order the vaccine until approval correct? **Correct.**
2. Is the initial order only for the pre-position sites? **No. All providers registered and approved in ShowMeVax to administer COVID-19 vaccine can order vaccine.**
3. What is the process for submitting an application to be a vaccination site? **Instructions for enrolling in the COVID-19 Vaccinator program can be found on our website at <https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/vaccine-enrollment.php>**
4. Will independently owned pharmacies be allowed to register and give COVID vaccine as they now do for flu and other vaccines? **Independently owned pharmacies can enroll in the COVID-19 Vaccinator program. Enrollment instructions can be found on the COVID-19 Vaccinator Enrollment website at**

<https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/vaccine-enrollment.php>

5. We just received our approval. How do we request vaccine? **Enrolled providers who would like to submit an order request should email CovidVaccineOrders@health.mo.gov with the facility name, facility PIN and amount requested.**

Providers will receive an automated response that the order request has been received. An email confirmation will be sent if an order is placed on the providers behalf. Please do not send multiple order requests.

6. How will providers know that their application to receive vaccine has been accepted? **Providers should check the enrollment status in ShowMeVax routinely to view their status.**
7. Will local pharmacies (Hy-Vee) get vaccine at the same time or rate as CVS or Walgreen? **The only way a pharmacy will receive vaccine at the same time is if they are targeting a 1A population.**
8. If you do not accept vaccine on the first offer will the offer to receive the vaccine be offered again in the next week? **Yes**
9. Will the same number of second (booster) doses be automatically sent to providers that ordered primary doses? **At this time, the State will submit your second dose order on your behalf. You will receive an email confirmation when the second dose order is placed with an estimated delivery date. Second dose orders will typically arrive on Thursdays.**
10. Since it's possible to get 6 or even 7 doses of the Pfizer vaccine out of a vial, how do we ensure that we will receive enough vaccine for the second dose? Is the federal government holding back second doses based on each vial containing 5 doses? **Each dose administered should be reported just like any other vaccine. The number of doses being held back for the second dose is based on how many doses were administered, not the number of vials that were used.**
11. I represent a pharmacy school at a university and lead the immunization training and protocol. We have storage capacity, garage space, and student capacity to help with vaccinating. We want to help in the best way we can. Should we sign up to receive vaccine for Phase 1A, Phase 1b or 2/3? **This is the School of Pharmacy's choice. They can sign up for any of the Phases.**
12. Will the vaccine be shipped to providers directly or will they need to pick it up at one of the 10 prepositioned sites? **The vaccine will be shipped directly to providers.**
13. What ancillary items will come with the vaccine? **Pfizer Vaccine Ancillary Kit will come from Pfizer along with the vaccine will contain the diluent needed for the vaccine enough for 100 doses. Dosing syringes with needles, vaccination documentation cards, Face Mask (not a lot). One additional kit initially will contain PPE for handling dry ice and one recharge of dry ice provided by Operation Warp Speed.**

Moderna Vaccine Ancillary Kit will contain needles, syringes, a vaccine information sheet (VIS), alcohol prep pads, bandages, consent forms, and vaccination record cards.

Each ancillary kit shipped has an inventory of what is in the kit. Make sure you compare the inventory list to the actual items in the kit.

14. When will ancillary kits be sent with the Moderna vaccine? **The kits should arrive at the same time as the vaccine.**
15. If we only want to receive the Moderna vaccine, when should we request vaccine? **Yes, but this is not guaranteed that you will receive this vaccine.**
16. Can a dentist's office register as a provider? **Not at this time.**
17. Will rural hospital/clinics receive the Moderna vaccine versus the Pfizer vaccine? **Rural hospitals/clinics are not precluded from receiving the Pfizer vaccine, but it is assumed that their ability to maintain vaccine at ultra cold temperatures will be limited, therefore, the Moderna vaccine may be more appropriate.**

Vaccine Storage

1. How long does it take to thaw the Pfizer vaccine to use? **30 minutes at room temperature, 3 hours if thawed in a refrigerator.**
2. How should we handle the Moderna vaccine when it arrives?
 - **The vaccine will be shipped frozen.**
 - **Keep the vaccine in its original packaging until ready to use because it is light-sensitive.**
 - **Place the vaccine in either a freezer (-25°C to -15°C/-13°F to 5°F) or a refrigerator (2°C to 8°C/35°F to 46°F).**
 - **The vaccine can be stored in a refrigerator for up to 30 days, and in a frozen state for up to 6 months. However, we want you to use the vaccine as soon as possible.**
 - **Do not refreeze the vaccine after it is thawed!**
 - **Vaccine vials that are intact (meaning the vaccine bottle has not been punctured) may be stored at room temperature (2°C to 25°C/46°F to 77°F for 12 hours).**
 - **After the vaccine vial's cap is removed and the stopper is punctured, you must use the vaccine within 6 hours. Any doses left after 6 hours must be wasted.**
 - **Document the date and time on the vial.**
 - **Avoid exposure to direct sunlight and ultraviolet light.**
3. Should the Moderna vaccine be stored in a refrigerator/freezer unit or a standalone freezer? **Combination units (refrigerator/freezer) are not recommended for use; however they are allowed as long as the unit can maintain required temperatures at all times.**
4. Is there a vaccine expiration data tracker that we can download? **An expiration date tracker for the Moderna vaccine can be found at <https://www.modernatx.com/covid19vaccine-eua/providers/vial->**

[lookup](#) and you'll be able to see the exact expiration dates based on the lot numbers printed on the vials. Pfizer product lists the expiration date on the vial.

5. What amount and size of dry ice blocks are needed for the Pfizer recharges? **Unless a provider opts out, dry ice will be delivered within 24 hours of vaccine delivery to refill thermal shipping containers for the first re-ice only.** Afterwards, dry ice pellets (9 mm to 16 mm) should be added to the containers every 5 days or as needed to maintain temperatures. (www.pfizer.com).
6. Can products other than vaccine be stored in the freezer? **Vaccine storage units should not store food or beverage products; however, other vaccines can be stored in the same unit.**
7. What is the approximate cubic foot storage for one minimum shipment of Pfizer vaccine? **Storage size needed is comparable to a small size pizza box which contains 195 vials.**

Vaccine Administration

1. Do providers need to verify a person is eligible to receive the vaccine in Phase 1A (i.e., do providers need documented proof that a person is a Phase 1A healthcare worker)? **This is not required. For Phase 1A, this determination is made at the provider level. For Phases 1B and beyond, guidance will be provided for verification.**
2. Will the second dose of vaccine be required to come from the same provider as the initial dose? **Yes**
3. Are we allowed to pull more than 10 doses out each vial? **Some Moderna vials will give the provider an 11th dose if precise technique is used. This should not be occurring regularly according to the manufacturer. Also you should not take partial doses from multiple vials to make a full dose.**
4. Can we vaccinate with other vaccines at before the COVID vaccine? We know no other vaccines for 14 days after, but what about before? **It is recommended that no vaccines be given 14 days before or after the administration of the COVID-19 vaccine.**
5. Should we order enough vaccine (if we have storage capacity) to cover both doses for everyone we intend to immunize? **Each week you request primary doses of vaccine, you should order one dose for everyone you expect to vaccinate. The week before these individuals are scheduled to receive their booster vaccine (17-21 days after the first dose of the Pfizer vaccine and 28 days after the Moderna vaccine), you should order one booster dose for everyone who received a primary dose.**
6. What "documented training" is needed for nurses to administer the vaccine that was mentioned in the standing order? **It can be any training they have had, but a very good training course is available in the COVID Vaccine Provider Toolkit. <https://www.cdc.gov/vaccines/covid-19/toolkits/index.html>**
7. How should my facility be prepared to handle an anaphylaxis emergency?

- Observe anyone with a history of anaphylaxis (for any reason) for 30 minutes.
- Observe everyone for at least 15 minutes.
- Have the following emergency supplies on hand:
 - At least three doses of pre-filled epinephrine syringes or auto injectors (adult)
 - H1 antihistamine (e.g., diphenhydramine)
 - Blood pressure cuff
 - Stethoscope
 - Timing device to assess pulse
- If possible, have the following on hand:
 - Pulse oximeter
 - Oxygen
 - Bronchodilator (e.g., albuterol)
 - Intravenous fluids
 - Intubation kit

8. Will anaphylactic kits be provided? **No. Approved vaccine providers should already have these kits.**
9. Do you know of a source to purchase EpiPens at an affordable price? **R&S Northeast has it for auto injector 0.3mg/.3ml for .04 per carton of 2; 340 b venders; McKesson or Medline also have epi pens.**
10. Where can we receive training on the use of Epi pens/epinephrine?
<https://www.youtube.com/watch?v=uBvdO9a9NTQ> This is a free video on how to use an epi pen. If you prefer written instructions you may find that here:
https://www.med.unc.edu/pediatrics/files/2018/05/How_to_Use_EpiPen_Autoinjector.pdf
11. What is the maximum amount of time after the first dose that the second dose can be given? If someone misses the window do they have to start over? **If they miss the second dose timeline, they should get the second dose as soon as possible. They do not need to start over with a first dose.**
12. What are the expectations for short distance/time transfer (e.g., within a hospital)? What type of container/cooler must be used? **Cartons of Pfizer-BioNTech COVID-19 Vaccine Multiple Dose Vials arrive in thermal containers with dry ice. Once received, remove the vial cartons immediately from the thermal container and store in an ultra-low temperature freezer between -80°C to -60°C (-112°F to -76°F). Vials must be kept frozen between -80°C to -60°C (-112°F to -76°F) and protected from light until ready to use.**
- a. **If an ultra-low temperature freezer is not available, the thermal container in which the Pfizer-BioNTech COVID-19 Vaccine arrives may be used as temporary storage when consistently re-filled to the top of the container with dry ice. Refer to the re-icing guidelines packed in the original thermal container for instructions regarding the use of the thermal container for temporary storage. The thermal container maintains a temperature range of -90°C to -60°C (-130°F to -76°F). Storage within this temperature range is not considered an excursion from the recommended storage condition.**
13. What should we do with empty vaccine shipping containers? **Return them to the vaccine manufacturer (Pfizer or Moderna).**

14. How do we prepare the Moderna vaccine for administration?

- Thaw prior to administration in a refrigerator for 2 hours and 30 minutes, or at room temperature for 1 hour.
- Allow the vaccine to come to room temperature for 15 minutes before administering the vaccine.
- Gently swirl the vial (do not shake) before the first dose and between each dose.
- After the vaccine vial's cap is removed and the stopper is punctured, you must use the vaccine within 6 hours.
- Document the date and time on the vial.
- Avoid exposure to direct sunlight and ultra violet light.

15. How long can I hold a Moderna vaccine vial at room temperature? Intact vials can be stored at room temperature (8°C to 25°C/46°F to 77°F) for 12 hours. Once you remove the cap on the vial and puncture the stopper, you must use the vaccine within 6 hours. We suggest that you document the date and time on the vial, and avoid exposing the vial to direct sunlight or ultraviolet light.

16. How can we tell if a Moderna vaccine vial has been contaminated or otherwise should not be used? The vial contents should be white/off-white/opaque. There can be dissolvable particles in it which is why you gently swirl it to help dissolve these particles. If it is discolored in any way (e.g., brown, grey) do not use it.

17. When should we discontinue using a vial of Moderna? Discard the vial after 10 doses have been withdrawn or 6 hours have lapsed, whichever is first.

18. Is there any information on the appointment system that is supposed to be available? Tentatively, this should roll out before Phase 1B. More information will be available later in January.

19. What items are shipped with the vaccine? Each vaccine shipment will be accompanied by an ancillary kit from Operation Warp speed. Ancillary kits are automatically provided, and they are kitted for 100 doses at a time

- a. Pfizer ancillary kit includes: dosing syringes, alcohol swabs, needles, vaccination cards for documentation, diluent for the vaccine and minimal amount of PPE such as face mask and gloves. Pfizer and Operation Warp Speed will provide PPE for dry ice. Operation Warp Speed will also provide the initial recharge of dry ice for the Pfizer ultra-low shipper.
- b. Moderna ancillary kit includes: dosing syringes, needles, alcohol swabs, vaccination cards for documentation, minimal amount of PPE such as face mask and gloves.
- c. In addition, Missouri has ordered the following additional vaccination supplies:
 - i. Alcohol Prep Pads
 - ii. Band aids
 - iii. Gauze
 - iv. 3 ml Syringe with 23g 1" Needle
 - v. 3 ml Syringe with 23g 1.5" Needle

Online ordering information will be shared when supplies are available.

20. Will the kits provide two different sizes of needles? **Yes** the kits contain both 1" and 1 ½" needles. Missouri has ordered an additional supply of 1" and 1.5" needles and will let you know when those shipments come in.
21. Are gowns going to be provided for PPE, or is a gown not necessary for the vaccine? **Gowns will not be included with the vaccine and generally are not needed during vaccine administration.** DHSS will reach out to the State Emergency Management Agency (SEMA) to determine whether gowns are available through them, and will provide more information on what PPE should be used during vaccine administration.
22. Will we need to develop a consent form? **No.** **Here is a link to the consent forms you should use:**
<https://covidvaccine.mo.gov/vaccinators/pfizer/>
<https://covidvaccine.mo.gov/vaccinators/moderna/>
23. Is the consent form available in other languages? **Not at this time, but we are working on this.**
24. If we have our own HIPAA policy, can we use it with the Consent Form? **Yes** the Consent Form is in Microsoft Word format, so you can paste your HIPAA policy right into the document.
25. Where do we get the V Safe flyer to pass out to the clients? **Here is a link to the flyer.**
<https://covidvaccine.mo.gov/vaccinators/pfizer/v-safe-information-sheet-508.pdf>
26. If a person does not have a smart phone will they be able to participate in the V-Safe? **They can use a computer or any type of phone (e.g., flip phone, land line) as long as it is capable of receiving texts.**
27. Can we use our own vaccine reminder cards or will we have to use CDC's? **You may use your own forms.**
28. Is everyone to be monitored post vaccination for a specific time? **Per CDC guidelines, ALL people receiving the vaccine must be monitored for at least 10-15 minutes. Those with history of an anaphylactic reaction or severe reaction following any dose of intramuscular medication should be observed for at least 30 minutes.**
29. Do we need to report adverse reactions in ShowMeVax and VAERS or just VAERS? **Just VAERS. The following must be reported:**
 - Any vaccine administration error (e.g., you diluted it incorrectly)
 - Case of Multisystem Inflammatory Syndrome (MIS) in children and adults
 - Case of COVID-19 after vaccination that results in hospitalization or death
 - Serious Adverse Events:
 - Death
 - Life-threatening adverse event
 - Hospitalization
 - Persistent or significant incapacity or substantial disruption of Activities of Daily Living
 - Congenital anomaly/birth defect

- Medical event that based on appropriate medical judgement may jeopardize the individual and may require medical or surgical intervention to prevent any of the outcomes listed above

30. Must we report to VAERS within a certain timeframe? You are asked to submit a report promptly after an adverse event occurs. <https://vaers.hhs.gov/resources/infoproviders.html>
31. Do we report the "usual" side effects like the sore arm, fatigue etc. in VAERS? It's up to the provider, but make sure you tell patients what to expect in terms of side effects.
32. There has been mention of staggering vaccination of HCW in facilities due to reports of vaccine response that may potentially put someone "out of commission" for a day or two, especially with the second dose. Are you aware of any plans for the pharmacy program to offer more than 3 visits so not all staff are impacted at the same time? It will not be feasible to stagger visits.
33. Do providers on the state line and facilities in MO/KS administer the vaccine to employees/patients based on their work/visit location or based on their state of residency? Also: we are a LTC Pharmacy based in MO with facilities in KS. Can we go vaccinate their employees like we do for flu? Vaccine must stay in Missouri. If a person works in Missouri and the employer offers vaccine that individual is okay for vaccine.
34. What is the maximum amount of time after the first dose that the second dose can be given? If someone misses the window do they have to start over? No, someone who presents for vaccination after the recommended time frame may receive the vaccination. Do not restart the series.
35. Are enrolled vaccinators required to administer all received vaccines within 10 days to Phase 1A individuals? Is there a required number of vaccines that must be administered within a certain timeframe? If your organization/agency has the appropriate vaccine refrigerator and freezer needed to store the vaccine but does not have the capacity to store AND/OR cannot administer 975 doses within a 10-day window, your organization/agency should still enroll. However, you may have to wait until the Moderna vaccine is available OR work with a nearby organization to have vaccine redistributed. (Please note that redistribution requires a separate CDC agreement and will be reviewed on a case-by-case basis). <https://covidvaccine.mo.gov/vaccinators/DHSS-COVID-Vaccine-Helpful-Info.pdf>

Vaccinations at LTCFs

1. There has been mention of staggering vaccination of HCW in facilities due to reports of vaccine response that may potentially put someone "out of commission" for a day or two, especially with the second dose. Are you aware of any plans for the pharmacy program to offer more than 3 visits so not all staff are impacted at the same time? It will not be feasible to stagger visits.
2. Can our LTC pharmacy provide vaccinations during Phase 1 for the LTCFs that we service if they chose us when they were making their selections in October? Or, will they only be able to use CVS or Walgreens? Our staff are approved vaccinators for COVID-19. The LTCF pharmacy partnership is a federal program we did not control enrollment for that program. For Missouri CVS and Walgreens

were chosen by the Federal authorities. If a LTC pharmacy would like to administer vaccine they would need to enroll with the state of Missouri to become a provider of COVID-19 vaccine. At this time we are unable to change this federal program or enrolled LTCF or pharmacy providers assigned,

3. Will LPHAs receive a list of LTCF in our county that are **not** partnered with a pharmacy and that need help in vaccinating residents and/or employees from their local LPHA? **All of the licensed facilities have been partnered with a vaccinator.**
4. What educational materials will be available for staff residents and families? When will they be available and who will provide those to the facility? **CDC now has educational and training materials for the COVID-19 vaccine which may be found here [cdc.gov/vaccines/covid-19/index.html](https://www.cdc.gov/vaccines/covid-19/index.html)**
5. Will it be up to each facility to get consent signatures, or will providers do this before they administer the vaccine? **Yes**
6. Are the three visits to LTCFs by retail pharmacies actually a total of six visits? Three visits for the first dose, and three visits for the second dose? **No, three visits total spaced at least 28 days apart.**

Vaccination Redistribution and Transport

1. Can approved providers redistribute vaccine to another provider? **Yes, but the provider must be approved and redistribution requires an agreement by both enrolled providers and sign-off by the state.**
2. Will one pharmacy (e.g., Walmart) be able to transfer COVID vaccine to another pharmacy (Walmart) in MO? **As long as both facilities are enrolled as COVID providers with the State of Missouri in ShowMeVax they will be able to redistribute.**
3. Where is the Redistribution Form for the vaccine? **[Covidvaccine.mo.gov/vaccinators](https://www.covidvaccine.mo.gov/vaccinators)**
4. What do we do with the Redistribution Agreement once we get it filled out? **Return it to CovidVaccineRedistribution@health.mo.gov.**
5. If we are redistributing the Pfizer vaccine, do we need to send the ancillary kit? **Yes, because it contains the diluent needed to dilute the vaccine.**
6. Does the state require redistribution of vaccine? **No. We are going to establish a process for more robustly assisting and supporting with redistribution and transfer of vaccine across the system. Only through collaboration and coordination throughout the entire system will ensure that we move more quickly from 1A to 1B. We are aware of numerous facilities working to share with other facilities as feasible. We will continue working to facilitate this cooperation moving forward.**
7. We are a pharmacy that has been approved to vaccinate in Phase 1. Can we give the vaccine offsite, like a vaccine clinic? **Yes, as long as you are doing the shipping, storage, and handling correctly. You**

should transport the Pfizer vaccine in the Pfizer shipping container. The Moderna vaccine should be kept frozen during transport, so a Styrofoam or soft-sided cooler that is designed for the transportation of vaccines could be used. Make sure that with the frozen vaccine you have a barrier on the bottom, and then pack it with ice around the vaccine. Remember to place the data logger in with the vaccine, put a barrier above the vaccine to protect it, then put the lid on. Keep an eye on the temperature inside containers as you're moving them around.

8. If a facility receives vaccine as a redistribution from another facility, do they request second doses for their patients or does the provider they received the vaccine from make the request? **The process will work the same way for the second doses. They will be shipped to the original requestor and should be redistributed to your facility.**
9. If a facility is ready to move into Phase 1B vaccination, should they proceed or redistribute to another facility that has Phase 1A staff who need vaccinated. **Please redistribute!**

Technology

1. Does the DDL temperature monitoring device need to be WiFi enabled or can it be USB? Do you have an example of a manufacturer/model # that is acceptable? **The DDL does not have to be WiFi enabled. The Berlinger Fridge-Tag 2L #225-9999-008 is an example of an acceptable DDL**
2. Are data loggers required or can another type of continuous monitoring thermometer be used? **The Centers for Disease Control (CDC) recommends DDL's; however, other continuous monitoring devices are acceptable.**
3. If the freezer has constant monitoring that can be downloadable, is that sufficient? **Yes, this has very recently been clarified.**
4. Will Pfizer's storage units include their own data loggers? **Yes. Once the ultra low shipper arrives, the data logger switches over to Controlant who will automatically monitor temperatures of the shipper. The provider will receive an email to set up to receive temperature readings and excursion alarms. If you do not need this you will need to make sure to respond to the email and cancel the service.**
5. Are electronic data loggers that use a paper wheel acceptable? **Yes.**
6. You might want to clarify that the temperature monitors have to have calibration certificates regardless of if they are continuous downloadable monitors with alarms. **DDL's will come with calibration certificates.**

7. Any recommendations on the size of a freezer? **Combination units are allowed but not recommended.** The size of the freezer must be able to accommodate the vaccine order. The more vaccine you will have, the larger the unit will need to be. Refrigerators less than 16.7 cubic feet are not allowed unless biomedical under counter



UNACCEPTABLE STORAGE UNITS

- Household Combination Units
- Dorm-Style Units
- Bar-Style Units

Do NOT Use!



Vaccination of Special Populations

1. What are the recommendations for vaccinating special populations? **Those with history of an anaphylactic reaction or severe reaction following any dose of intramuscular medication: Due to an ingredient commonly found in these medications you will need to:**

- a. Observe the person for 30 minutes if history of anaphylaxis
- b. Observe for 15 minutes if history of severe reaction

For people who are pregnant, breastfeeding, or immunocompromised, provide special counseling. Counseling should include the lack of data on efficacy in these populations, however the benefits of vaccination outweigh the risk of disease and they are encouraged to talk to their health care providers before vaccination. Individuals need to be monitored for at least 15 minutes following vaccination.

2. Can points of dispensing (PODS) be used for community group vaccination in next phases if special populations need to be monitored? It depends on the site. If there is somewhere at the POD site where these individuals can pull out of the line of traffic after they receive their immunization and someone is there to observe them for 15 minutes, that would be an option.

Contraindications

1. What are the contraindications for the Pfizer and Moderna vaccine? Do not administer the vaccines to individuals with a known history of severe allergic reaction (e.g., anaphylaxis) to any component of the vaccines. Specifically, polyethylene glycol in the vaccine may be a problem for people. See package label or the EUA for a list of ingredients. People with a history of anaphylactic reaction or severe reaction following any dose of intramuscular medication or vaccine should be monitored for 30 minutes after receiving the vaccine.
2. Can individuals who are pregnant, breastfeeding, lactating, or immunocompromised receive the Moderna vaccine? Yes, we encourage these individuals to be vaccinated if they are not allergic to any of the components of the vaccines or other contraindications exist. We want to make sure that pregnant and breastfeeding women understand that there is little data available regarding the safety of either the Pfizer or Moderna vaccine for these groups. But, even with little data on the efficacy and safety for these populations, it is believed that the risk of severe illness outweighs the potential risk.

For immunocompromised individuals, they should be informed that the vaccine may be less effective because of their immunocompromised state, but because they, too, have a higher risk of severe disease, we recommend they receive the vaccine.

3. If someone currently has COVID, should they receive the vaccine? They should wait until the isolation period has ended and symptoms have subsided.
4. If someone already has been infected and recovered should they get the vaccine? Due to the severe health risks associated with COVID-19 and the fact that re-infection with COVID-19 is possible, people may be advised to get a COVID-19 vaccine even if they have been sick with COVID-19 before. At this time, experts do not know how long someone is protected from getting sick again after recovering from COVID-19. The immunity someone gains from having an infection, called natural immunity, varies from person to person. Some early evidence suggests natural immunity may not

last very long. We won't know how long immunity produced by vaccination lasts until we have a vaccine and more data on how well it works. [[Facts about COVID-19 Vaccines \(cdc.gov\)](#)]

5. If someone has had the virus is there any contraindication to the vaccine? If not, should they wait a certain number of days? **Defer vaccination for both symptomatic and asymptomatic COVID-19 patients until they have met criteria to discontinue isolation. Delay vaccination if the individual has had passive antibody therapy for COVID-19 until 90 days have passed from completion of said therapy.**
6. Should we administer the vaccine to people if they feel ill? **The Health History section on the Consent Form asks if people are feeling sick. It is a judgement call, but generally do not delay the vaccine if someone reports mild symptoms like a runny nose, allergies, a little nausea, etc. If the person has a temperature of greater than 101, it is recommended to defer vaccination.**
7. What should we do if someone indicates during the health history screening that they have a bleeding disorder, or are on a blood thinner? **Make sure you apply extra pressure at the injection site to prevent excessive bleeding, and let them know they may see more bruising than normal.**

Regional Implementation Teams

1. Is the RIT in charge of ordering their vaccine or portioning out their vaccine? **No, the LPHAs would need to enroll as providers for COVID-19 to order and receive vaccine.**
2. Is the RIT considered a support to the LPHA? **Yes, these should be considered to support their endeavors.**
3. Would the state work to assist with introductions, and would the state have a presence on the RIT? **Yes, the Bureau of Immunizations will have a liaison on each team and will assist with introductions.**
4. How do we know the RIT contractor will work with us? **It is spelled out as a deliverable in the contract that the contractor will need to include all local health authorities in their meetings.**
5. Do we need to have additional RIT outreach that engages more than just the LPHAs in an awareness campaign? **The RIT contract does have community partners and other health partners in the listed**
6. Will we be getting money for vaccination efforts in our county? **At this time, we do not have additional funds for this. However, the RIT does have a vaccination team built in that may assist your vaccination efforts.**

Reporting

1. Will the vaccine adverse reporting system be used for COVID-19? **Yes. Organization must report moderate and severe adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS) <https://vaers.hhs.gov/reportevent.html>.**

<https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/pdf/covid-vaccination-Program-provider-agreement-profile-form.pdf>

2. Is the facility responsible for reporting side effects of vaccine for staff and residents, or just staff? **All adverse reactions must be reported.**
3. Do patients have to be monitored for adverse reactions after administering the vaccine and for how long? **It is recommended the patient be monitored for 15 minutes after administration.**
4. For a hospital vaccinating employees only, what vaccination data must be submitted? Is this all to be completed in ShowMeVax? **Details of required information for reporting can be found on CDC's website <https://www.cdc.gov/vaccines/programs/iis/index.html> (<https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/pdf/covid-vaccination-Program-provider-agreement-profile-form.pdf>) You can also review the training video at [ShowMeVax Training: Adding Administered and Historical Immunizations - YouTube](#). All doses administered must be documented in ShowMeVax either by manual entry or an HL7 interface.**
5. Do you need a file sent with temperature data and if yes how long of a time period? **No, but temperature data should be kept for three years so they can be analyzed for long-term trends and/or recurring problems. <https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf>**

ShowMeVax

1. What is the website to enroll? <https://showmevax.health.mo.gov/smv/login.aspx>. **Note: Providers cannot use Internet Explorer to access ShowMeVax. ShowMeVax performs best in the Google Chrome browser.**
2. Where do you check on your application in ShowMeVax? **Missouri Vaccine Program (MVP) representatives review requests and either approve or reject them. When requests are approved or rejected, applicants will see a notification(s) in the bell icon on the top ribbon in ShowMeVax.**



In the Change Request History section, providers should also see all requests with either a Completed or Rejected status. Pending indicates the MVP team has not approved nor rejected the request yet.

Once your request has been approved, you will be sent two e-mails. One e-mail contains your username, and the second email contains your temporary password. NOTE: You may need to check your spam or junk folder in your email if you do not receive them.

<https://covidvaccine.mo.gov/vaccinators/>

If an enrollment application is rejected, you can see the reason for the rejection in the Comments section, and we also include the Phase you are in. After you have corrected the issues described in the Comments section, you may resubmit the enrollment.

3. Are new vaccine provider applications still being processed? **Yes.**
4. What is the deadline to complete the vaccinator enrollment? **There is no deadline for enrollment.**
5. How long does it take to receive approval as a vaccinator? I have a couple applications that have been pending for more than one week. **The Bureau of Immunizations Enrollment Review Team are working as quickly as possible to process enrollments.**
6. Will providers be denied enrollment if they do not have ultra cold storage capabilities? **If your organization/agency does not have the appropriate vaccine refrigerator and freezer needed to store the vaccine but has the staffing capabilities to vaccinate, your organization/agency can still enroll. However, you would have to partner with a nearby organization to have the vaccine redistributed but you would have to get vaccine daily. (Please note that redistribution requires a separate CDC agreement and will be reviewed on a case-by-case basis).**
<https://covidvaccine.mo.gov/vaccinators/DHSS-COVID-Vaccine-Helpful-Info.pdf>
7. For facilities that do not have a stand-alone freezer, if that is what is holding up our approval, will we be able to purchase one and then resubmit? We cannot afford to purchase a freezer and risk not being approved. **Stand-alone freezers are not required, but recommended.**
8. If we only want to receive the Moderna vaccine, when should we enroll to be a provider? **You should enroll whenever you are ready.**
9. Do hospitals need to apply for vaccinator application also? **Yes.**
10. Will the local health departments automatically be providers of the COVID vaccine? **No. The CDC requires every COVID-19 vaccinator to complete an enrollment. There are no exceptions.**
11. How are organizations with multiple enrollments being handled? We have several clinic locations and our hospital location. **If you belong to multiple sites, do not register multiple times for a ShowMeVax username. All your sites can be attached to one username. If you are associated with multiple clinics, please make sure you include PINs for each site when completing your ShowMeVax user registration. If your organization has multiple sites, please submit the Immunization Site Demographics Template along with the MOU. (COVID-19 Vaccine Provider Checklist)**
12. Can college campus providers register to be vaccinators? **Yes. They must complete the COVID-19 Vaccinator Enrollment.**
13. Can this be signed by pdf signature methods? **No. When the Chief Medical Officer (Physician Signing Agreement contact type in ShowMeVax) signs in to ShowMeVax and accepts the enrollment agreement, this is considered the electronic signature.**

14. Do you have to have a physician sign an agreement? **The Chief Medical Officer can designate another individual; however, that needs to be provided to the Bureau of Immunizations via email or in writing.**
15. If we signed up with a Federal Pharmacy Partner (CPESN) do we also need to sign up for the state program? **If you have a large population of Phase 1 patients, are rural, near a manufacturer, or someone else you can service in Phase 1, please consider enrolling as a state provider through ShowMeVax. You will not be penalized to enroll with your Federal Partner and ShowMeVax. [Vaccinator Enrollment Guide and Considerations.pdf \(morx.com\)](#)**
16. What is a VFC pin in the ShowMeVax? **It is the Vaccines for Children PIN number.**
17. How do we obtain a VFC Pin? **Vaccines for Children providers are assigned VFC PIN's. COVID only providers are assigned unique PIN's starting with CV.**
18. If the NPI number is required, when entering the Provider's NPI number we receive the error "Unique NPO for this contact" and we are not able to create an account. **This happens when an NPI number is associated with more than one clinic/facility. Providers can enter the NPI in the comments section of the staff change screen as a workaround.**
19. Can a health department administrator or nursing supervisor sign the agreement or does it have to be a medical director? **Our administrator signs our VFC agreement in place of our medical director. Yes. The medical director is entered as the Physician Contact. The LPHA administrator is able to sign as Physician Signing Agreement and CEO/CFO.**
20. Where do we go to update our hours of operation (i.e. for weekends and holidays) to make sure vaccine isn't sent to us on a day we are not open? **Go to your Provider Profile in ShowMeVax to make any changes to your hours of operation.**
21. Can the CEO and the backup person be the same if he is a Pharmacist and the CEO? **Yes.**
22. Is ShowMeVax going to keep a record of COVID vaccines? **Yes**
23. ShowMeVax enrollment is different than COVID vaccine enrollment? **Yes. A user must first have ShowMeVax access to begin the COVID-19 vaccinator enrollment within ShowMeVax.**
24. If you are a hospital and not going to be a vaccinator - do you still need to enroll with ShowMeVax to get the vaccines for our HCW? **No.**
25. If I purchase a new asset to hold more vaccine should I update that in my assets on ShowMeVax? **Yes. DHSS needs to review and approve refrigerator and freezer assets. <https://covidvaccine.mo.gov/vaccinators/>**

26. On the clinic staff change request: is that where you put anyone who will vaccinate or is only for key people? For COVID-19 Enrollment, the roles of primary vaccine coordinator, back-up vaccine coordinator, Physician Contact (prescribers), Physician Signing Agreement, and CEO/CFO are required. Other vaccinators can be added, but not required.
27. What is the system that providers are required to report daily vaccine supply and dispensed? We are asking providers to report this through ShowMeVax, and it will soon be in VaccineFinder as well.
28. There is a statement in SMV that we must enter COVID vaccine inventory into VaccineFinder. Is this in addition to monitoring the inventory in SMV? Yes.
29. What is the e-mail address that we should use to submit vaccine order requests? Requests should be sent to covidvaccineorders@health.mo.gov. Please ensure you are including the facility name, pin number and the number of doses being requested. The Pfizer vaccine comes in increments of 975 doses.
30. If we send in a request for vaccine, will we receive a confirmation that our request was received? If you send a vaccine order request to covidvaccineorders@health.mo.gov, you will receive an automated reply that your request has been received. If an order is placed on the facility's behalf, you will receive an email confirmation indicating the amount of vaccine ordered.
31. Does the state have a process set up for the documentation of wasted or unused COVID vaccine? What form to use, who to send it to, how to report it, etc.? All documentation of supply, wastage/returns, and redistribution will be documented in ShowMeVax by the providers.
32. What is the minimum amount of information that needs to be put into ShowMeVax? First name, last name, date of birth, and sex.
33. What should we do if we are applying to receive vaccine and you have a staff member that has a change pending and therefore can't load any of their training transcripts? Send an email to cvax19enroll@health.mo.gov and they will place a staff person to review those changes.

Legal

1. Is there a VIS for this vaccine? No. Instead of the VIS, you must give patients a copy of the EUA fact sheet.
 - Pfizer: <https://covidvaccine.mo.gov/vaccinators/Pfizer-recipients.pdf>
 - Moderna: <https://www.fda.gov/media/144638/download>

A copy of the EUAs are also included as hyperlinks in the Public Readiness and Emergency Preparedness Act (PREP Act) Section of the Consent Forms.

2. Where can the Standing Orders for vaccines be found?

- Pfizer: <https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/pdf/so-pfizer-standing-order.pdf>
- Moderna: <https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/pdf/so-moderna-vaccine.pdf>

3. We know we must provide the EUA information to patients. This is five pages long. Can we provide a site address or will this be provided with the vaccines? **It is a federal requirement that the patient EUA fact sheet be made available to the patient before vaccination. You may make this available electronically, however we suggest a few hard copies be available.**

- Pfizer patient fact sheet <https://www.fda.gov/media/144414/download>
- Moderna patient fact sheet <https://www.fda.gov/media/144638/download>

Miscellaneous

1. Is there a cost for the vaccinations for the community? **No person can be billed for the COVID-19 vaccine. Vaccination providers may charge an administration fee to insurance, Medicaid or Medicare, if applicable in your situation. Uninsured Missourians will be able to receive the vaccination regardless of their health insurance status.** <https://covidvaccine.mo.gov/facts/>
2. Are you using RedCap for onboarding? **No, HL7 is being used to onboard providers.**

Contacts by topic area:

- ShowMeVax enrollment support: [Cathy Kennon](mailto:Cathy.Kennon@health.mo.gov)
- ShowMeVax troubleshooting: vfc-smvsupport@health.mo.gov
- Reporting Dose Administration assistance: ImmunizationHL7Onboarding@health.mo.gov
- Adverse events/clinical assistance: [Lana Hudanick](mailto:Lana.Hudanick@health.mo.gov)
- Vaccine redistribution: covidvaccineredistribution@health.mo.gov
- Ordering and supply management support: covidvaccineorders@health.mo.gov
- Additional PPE and other equipment: [Jenn Stockman](mailto:Jenn.Stockman@health.mo.gov)
- All other questions: CovidVaccine@health.mo.gov