

# KPHC COVID- 19 Vaccination Info and FAQ

For Covid-19 information in Native Hawaiian and Pacific Islander languages, please check here: [IN-LANGUAGE RESOURCES | NHPI COVID-19 Resources \(nhpicovidhawaii.net\)](#)

For more translated Covid-19 information, including vaccination, check the following:

[Resources – Hawai'i DOH: Info & Resources for Managing COVID-19 \(hawaiicovid19.com\)](#)

[Vaccines for COVID-19 | CDC](#)

## Can my family and I get the Covid-19 vaccine at KPHC?

- **Yes! KPHC is currently administering the following Covid-19 vaccines:**
  - **Pfizer** primary and booster bivalent vaccine for all patients 6 months and older
  - **Novavax** primary vaccine for all patients 12 and older and 18 and older as a first booster dose
- **Note that as of April 18, 2023, all Pfizer and Moderna vaccines available in the U.S. are bivalent, targeting both the original strains of Covid-19 virus and Omicron strains. Current J&J and Novavax vaccines are not bivalent and target the original Covid-19 viral strains.**
- We are currently administering vaccines by appointment only for established and new KPHC patients. We are usually able to accommodate same day appointments and walk-ins. **Call us at 843-7282 or 792-4513 to schedule vaccination or to check on same-day access.**
- If you have questions about Covid-19 vaccination or other covid-19-related questions or to schedule for Covid testing, call our Covid nurse line at 381-7009
- If you are not a KPHC patient, please speak with your PCP or go to [www.hawaiicovid19.com](http://www.hawaiicovid19.com) for more information on where to get the vaccine
- **If you do not have a primary care provider or medical clinic**, call us at 848-1438 (915 N. King St), 843-7552 (710 N. King St.) or 792-5560 (89 S. King St., Downtown Honolulu) to set up a visit with a primary care provider.

## **I'm still undecided about getting vaccinated or vaccinating my children.**

- Being vaccinated is the most effective way to keep you and those who are close to you or who work with you from getting infected and especially from being hospitalized, placed on a ventilator or dying from Covid-19.
- Covid-19 is constantly changing and new variants will be spreading. Getting your updated bivalent booster gives you the best available protection against the most common variants currently in Hawai'i.
- If you have questions about the vaccines, please contact us and we will do our best to answer your questions and give you the information you might need to make the best decision for yourself and your family.

## **Is there a difference between the Pfizer, Moderna, Novavax and Johnson&Johnson vaccines? Can I choose which one I want?**

- **The Pfizer and Moderna vaccines are the same type of vaccine and are very similar in their effectiveness and potential adverse events.** They both use small pieces of RNA that instructs the cells in the area of the vaccination to make a protein that stimulates our immune system to prevent or weaken future covid infections. Both vaccines are effective in preventing Covid-19 infections and especially effective in preventing hospitalizations and deaths due to Covid-19. Both vaccines have a very low risk of a condition called myocarditis that may occur more often (but still very

rarely) in teens and young adults after vaccination. This condition is a usually mild and temporary inflammation of the heart muscle. **Note that as of April 18, 2023, all Pfizer and Moderna vaccines available in the U.S. are bivalent, targeting both the original strains of Covid-19 virus and Omicron strains.**

- **The Novavax vaccine is a different type of vaccine.** The Novavax vaccine uses lab-made proteins and a naturally-found substance called an adjuvant to stimulate our immune system to prevent and weaken future infections. This vaccine is also effective and safe. The technology for the Novavax vaccine is not new and is safely used for other established vaccines. It may also have a low risk of a condition called myocarditis. This condition is usually mild and is a temporary inflammation of the heart muscle. The current Novavax vaccine does not target the current Omicron strains like the bivalent Moderna or Pfizer vaccines.
- **The Johnson&Johnson/Janssen vaccine** is no longer available in the U.S.
- **If you are undecided, we recommend to discuss which vaccine may be best for you with your healthcare provider.** All three available vaccines provide excellent protection against severe Covid-19. The Moderna and Pfizer vaccines are the only ones with improved effectiveness against the current Omicron variants. Novavax is available for persons who are unable to take the mRNA vaccines due to allergies or adverse events or for those who would otherwise prefer to not get the mRNA vaccines.
- **KPHC currently has the Pfizer and Novavax vaccines available.**

- If you prefer the Moderna, please check with [www.hawaiiicovid19.com](http://www.hawaiiicovid19.com) for more information on where the Moderna vaccine may be available.

### I've not been vaccinated to Covid yet, how many doses of vaccine are recommended for me or my kids?

- **0-5 months old**
  - No covid vaccine is recommended at this time
- **6 months to 4 years old**
  - 3 doses of Pfizer or 2 doses of Moderna vaccines
    - The vaccines for small children are a much lower dose than for older kids and adults
- **5 years old**
  - 1 dose of Pfizer or 2 doses of Moderna
- **6 years old or older**
  - 1 dose of Pfizer or 1 dose of Moderna
  - **12 and older** may choose 1 dose of Pfizer, 1 dose of Moderna or 2 doses of Novavax
  - **18 and older** may choose 1dose of Pfizer, 1 dose of Moderna or 2 doses of Novavax
    - (the J&J/Janssen vaccine is no longer available in the U.S.)

### I've been vaccinated but not boosted. Should I get a booster dose?

- **6 months to 4 years old**

- Children who received only the monovalent doses of Pfizer or Moderna for their primary series are recommended to receive a **single dose** of the updated bivalent vaccine at least 2 months after their last vaccine
- Children who received a combination of monovalent and bivalent or all bivalent doses for their primary series are not recommended to receive any additional booster doses at this time
- **5 to 64 years old**
  - Children and adults who have been vaccinated with only the original monovalent vaccine or booster are recommended to receive a **single dose** of Bivalent vaccine booster
  - If you received at least 1 dose of bivalent Pfizer or Moderna vaccine, no additional doses or boosters are recommended at this time, unless you have a moderate to severe immunocompromising condition
- **65 years old or older**
  - All adults 65 or older who have received a bivalent booster can receive an **additional bivalent booster dose** at least 4 months after their last bivalent dose.
- Immunocompromised children and adults may receive additional booster doses of bivalent Pfizer or Moderna after discussion with your health care provider.

**I've already been infected with Covid-19, do I still need to get vaccinated?**

- **Yes, vaccination is still recommended.** Natural immunity after a covid infection will begin to fade after a few months. Studies show that multiple Covid-19 infections can increase your risk of organ damage and death compared to those with fewer prior infections. Vaccination can significantly reduce your risk of reinfection and especially severe illness and death.
- **We recommend waiting about 3 months after your infection before getting your next dose of Covid vaccine.** Waiting for 3 months after your covid infection allows your immune system to sort itself out to provide for an optimal immune response to your vaccine. If you are at high risk for covid-19 complications or if you live or work with high risk people, it is probably best to NOT wait 3 months for your next vaccine dose.
- **If you had heart inflammation due to your Covid-19 infection, check with your medical care provider before getting vaccinated.**

### **I had a bad reaction to a vaccine before, am I still able to get vaccinated against Covid-19?**

- If your reaction was mild to moderate, you can still get vaccinated. If you had a serious allergic (anaphylactic) reaction to a vaccine or to one of the ingredients in the vaccines, discuss with your doctor or nurse before you get vaccinated or before your second dose. You may not be able to get vaccinated at this time, or you may be advised to wait until other covid-19 vaccine options are available.

- Before you are vaccinated, you will be asked about any allergies you might have to food or medicines. Please let your nurse or vaccine administrator know about any allergic reactions you have had.
- If you had a serious adverse event or were diagnosed with myocarditis after the first dose of either the Pfizer or Moderna vaccines, let your vaccine provider or **medical care provider know before you get your second dose.**

### **I have bad egg, shrimp, peanut, or bee sting allergies, am I still able to get vaccinated?**

- Yes, your risk of an allergic reaction to the vaccine is low. You will be asked to stay around after vaccination for 30 minutes to monitor for any allergic reactions.

### **I am pregnant, or I think I might be pregnant, or I am breastfeeding, can I still get vaccinated?**

- **Yes, vaccination is STRONGLY recommended for pregnant women.** Studies show that vaccinated pregnant women pass protective antibodies to their infant through their umbilical cord before birth and through their breast milk after birth.
- Studies show that there is no increased risk of miscarriage after Covid-19 vaccination
- Covid-19 INFECTIONS are known to increase the risk of injury to pregnant women and their children. If you think you



might be pregnant, optional pregnancy testing is available at our clinic.

### **I don't have insurance, will I have to pay for vaccination?**

- **No**, there is no charge associated with the vaccine at this time, but this may change at any time. You will not be asked to pay any out-of-pocket costs for the vaccine at this time, whether you have insurance or not. If you are establishing care at KPHC, there may be charges associated with your medical visit. KPHC has staff that can assist you with applying for Quest or for sliding-fee discounts. KPHC will not refuse service to anyone based on their ability to pay.
- If anyone calls, messages or emails you offering you vaccines for sale or asking for any personal financial or credit card information, **DO NOT** give any information. Go to [www.hawaiicovid19.com](http://www.hawaiicovid19.com) for official state vaccine information.

### **I had a transplant or I am on immunosuppression. Is the vaccine available and safe for me?**

- Yes, if you are immunosuppressed, the vaccine is still recommended and there is no evidence of increased adverse events or side-effects after vaccination.
- The Covid-19 vaccines available are not “live” vaccines, so you cannot get or spread Covid-19 after vaccination.

- If you are receiving Methotrexate, Cyclophosphamide or Janus Kinase Inhibitor medication or high dose steroid medications, please contact your care provider or specialist to discuss vaccination recommendations.
- If you have moderate to severe immunocompromising condition, you may be recommended to receive additional Covid-19 vaccine doses. Discuss your vaccine options with your health care provider.

### **Is it possible for the vaccine to give me Covid-19?**

No, the vaccines do not contain the Covid-19 virus and there is no way for your body to create the Covid-19 virus after vaccination.

### **Do the Covid-19 mRNA vaccines affect my DNA?**

- No, the mRNA in the Pfizer and Moderna vaccines does not contact your DNA and cannot alter your DNA. The mRNA is quickly broken down by your cell's normal metabolism.
- The mRNA in the vaccine is similar to a small part of the RNA in the virus that causes Covid-19 and almost all of the vaccine mRNA stays in the muscle area where it is injected.
- A single Covid-19 infection results in far more viral genetic material moving throughout your body. A covid-19 infection can result in from 1 billion to 100 billion individual viral particles in your body, each with a full viral RNA.
- Vaccination will introduce far less RNA into your body than an infection. The vaccine RNA will almost entirely stay in the area of your injection and will be broken down soon after.

## Am I going to feel sick after vaccination?

- Almost all adverse reactions to the vaccines are brief and mild, usually lasting 1-2 days. The current recommendation for a single dose of vaccine for most people is expected to reduce the incidence of adverse events. The booster dose has a slightly lower rate of adverse events.
- **Common side effects for Adults and teenagers**
  - **mRNA vaccine (Pfizer or Moderna)**
    - most people (80-90%) experience soreness at the injection site,
    - about half (50%) of people experience headache and fatigue (feeling tired),
    - about a quarter (25%) had muscle aches, chills and/or joint pain,
    - about 10% or less had fever, nausea, diarrhea and/or swelling at injection site.
    - about 1% or less had lymph node swelling
    - Some people may experience a rash at the injection site several days to a week or more after vaccination.
    - About 1 out of every 500 people who get vaccinated may have an adverse event such as a non-severe allergic reaction or persisting vomiting lasting for 1-2 days
    - About 1 out of every 250,000-500,000 people who get vaccinated may have a severe allergic reaction (anaphylaxis).
  - **Novavax vaccine**
    - Pain at the injection site occurs in most Novavax recipients.

- Fatigue, muscle pain and headache occurred in 20-30% after the first dose and 40-50% after the second dose.
  - There were very low rates of fever after either Novavax dose in the clinical trials
  - There were **no cases of anaphylaxis or thrombosis (blood clots)** reported after vaccination and 1 case of Guillain-Barre in the Novavax clinical trials.
  - There may be a slight increased risk of myocarditis after Novavax vaccination, mostly in young adult males and most commonly after the second dose. The degree of risk, if any, is not yet fully understood
  - The Novavax vaccine was not tested in pregnant women, however for the women who became pregnant after vaccination, there were no signs of increased risk for the mother or fetus.
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- **Teenagers and younger adults** may have a slightly higher incidence of fainting after vaccination. This may be due to anxiety around the vaccine and fainting occurs with other vaccines as well. Make sure you have eaten and are well hydrated before going for vaccination. You should be sitting down when you get vaccinated and during the 15 to 30 minute observation period after vaccination.
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- **Very rare adverse events identified in teens in adults**
    - **Anaphylaxis** occurs in about 1 in every 250,000 to 500,000 doses and occur usually in people who have had other allergic reactions. All of our vaccines are done with trained medical staff on site and we observe all vaccine

recipients for 15 to 30 minutes after their vaccines to monitor for any immediate allergic reactions.

- **Blood clot** events were noted to rarely occur in about 1 per 1,000,000 recipients of the Johnson & Johnson/ Janssen vaccine, especially in young adult women. KPHC does not administer the J&J vaccine and in accordance with the CDC, we recommend other vaccines such as the Pfizer, Moderna or Novavax vaccines as preferable to the J&J vaccine due to this risk. **The J&J vaccine is no longer available in the U.S.**
- **Guillain-Barre Syndrome (GBS)** was found to occur very rarely after the J&J vaccine. There is no increased risk of GBS after the mRNA vaccines (Pfizer or Moderna) and no increased risk was noted in the clinical trials of Novavax. KPHC does not administer the J&J vaccine. GBS can be caused by viruses, bacteria or other inflammatory conditions unrelated to vaccines. **The J&J vaccine is no longer available in the U.S.**
- **Myocarditis** was found to occur rarely after mRNA vaccination, especially in male teenagers and young adults. Episodes are usually mild and resolve on their own but can sometimes require hospitalization and can sometimes cause prolonged or more serious cases. Myocarditis can be caused by viruses (including Covid-19), bacteria, fungi, parasites, autoimmune conditions such as lupus, illicit drugs and some medications. These types of myocarditis

are usually much worse and cause much more disability and higher risk of death compared to the myocarditis associated with the covid-19 vaccines. You are much more likely to get myocarditis from a Covid-19 infection than from vaccination. **As of April 18, 2023 only a single dose of mRNA vaccine is recommended for all vaccine recipients 6 and older. The single dose recommendation significantly reduces the risk of myocarditis.** The risk of myocarditis due to the Novavax vaccine is not yet well understood.

- **Common side effects for children 6 months to 4 years**, the dose of the vaccine is much lower than for older kids and adults. The Pfizer vaccine for 6 month to 4 year old children is only 1/10<sup>th</sup> the dose of the vaccine for older kids and adults and the Moderna vaccine for 6 month to 5 years old is 1/4<sup>th</sup> the adult dose.
  - The most common reactions in small children are pain/fussiness and fever which may last up to 2 to 3 days. The Moderna vaccine has a slightly higher rate of fever and pain compared to the Pfizer vaccine.
  - Some children may feel tired after the vaccine or have a headache, feel achy or have a reduced appetite
  - In the clinical trials for both Moderna and Pfizer in small children, there were no episodes of myocarditis or deaths following vaccination
  - All vaccines and any infections that cause fever can potentially cause febrile seizures, or seizures associated with fever.
- There were no reports of anaphylaxis, no reports of myocarditis and no reports of Bell's Palsy after vaccinations in the 5-11 year old children vaccine trials.

## I heard Covid-19 in kids is mild, do kids really need to get the vaccine?

- **Yes**
  1. **Unvaccinated children are more likely to get covid and to spread covid than vaccinated children.** Children in poorly ventilated spaces such as at home or in classrooms or playgroups without consistent mask use are much more likely to become infected and to spread infection. Vaccinated children are less likely to spread Covid-19 to others in their home and at school.
  2. **Unvaccinated children are more likely than vaccinated children to be hospitalized**
  3. **Unvaccinated children are more likely to die from a Covid infection than vaccinated children**
  4. **Covid-infected children can develop a serious complication after their infection called MIS-C (Multisystem inflammatory Syndrome in Children)**
    - MIS-C is a severe inflammatory condition that can sometimes arise in children about a month after a Covid-19 infection that includes high fevers, rashes, eye and mucus membrane inflammation and potential heart damage and dangerous blood clots.
  5. **Children can have long-haul Covid.** About 7-8% of children who develop Covid-19 infections continue to have symptoms 3 months after their acute infection, including: fatigue, headaches, insomnia, difficulty concentrating, joint pains and cough. Infected children also have a high risk of myocarditis that may last for months and possibly longer.

6. **Vaccination of kids will help reduce the risk and spread of new covid variants.** Every infection allows for millions of new viruses to grow, each new virus has the potential to mutate into a new variant. As we saw with the Delta and Omicron variants, new variants have the potential to change the course of the pandemic.
7. **Compared to the flu,** children hospitalized for Covid-19 are more likely to have a longer hospitalization, more likely to be in the ICU and require mechanical ventilation.

**Wouldn't it be better to just let kids get Covid-19 naturally and develop immunity that way?**

- **No**
  1. **Covid-19 is not a mild disease** and it is not like the flu. Consider that in a typical year before Covid, the flu kills between 40-200 U.S. children every year. Since the start of the pandemic in 2020 through June 2023, the flu has killed about 200 kids in the US, while Covid-19 has killed 1,800, about 9 times as many. There have also been over 9,000 cases of a serious post-covid inflammatory condition in children called MIS-C in the US, 60-70% of these cases have required hospitalization and 79 have died.
  2. **These vaccines are safe** and while there will be very rare serious adverse events, the vaccines will prevent deaths and suffering in this age group.
  3. **It is our responsibility as adults to protect our children,** children have the right to access treatments that can prevent life-threatening illnesses.



## **My child already had Covid, do they still need the vaccine?**

- Yes, vaccination is recommended after recovery from infection. It is recommended (but not required) to wait 3 months after your child was infected to get their next dose of vaccine.
- Milder infections may result in shorter immunity after infection. Vaccination can provide a more substantial and durable immunity.
- We don't know the risks of reinfection. We know that in older adults, each covid infection may increase the risk of organ injury and death within 6 months of each repeat infection. Having a covid infection may provide you with some protection against reinfection, but it may not protect you from severe infections. Most of us have had the flu at some point in our lives, but any time you get the flu, it could develop into a severe illness and cause death. Covid-19 repeat infections could also be deadly.

## **My child had MIS-C, should they get vaccinated?**

- Covid-19 vaccination after MIS-C should be considered in consultation with your child's doctor once all of the following criteria are met
  - Clinically recovered with normal cardiac function
  - At least 90 days since their MIS-C diagnosis
  - The child is in an area of high community spread of Covid-19 or otherwise have a higher risk of exposure or transmission

- MIS-C occurred prior to any Covid-19 vaccination
- Vaccination after MIS-C may be considered without meeting all of the above criteria in specific high-risk situations as long as cardiac function has normalized in consultation with your care provider.

### **Should I check for antibodies first before vaccinating my child?**

- Antibody level testing is not recommended. Antibody levels may not correlate with protection from infection. Antibody tests check for only one part of your immune protection. You may still have excellent protection from infection even though you might have a negative antibody test.
- Other infections can sometimes cause false positive Covid-19 antibody tests.

### **What if my child has a birthday after their first dose but before the second dose and a different vaccine dose is recommended for their age?**

- The dose recommended for the age at the time of vaccination is recommended, though you may choose to follow the schedule they started with. Your vaccine provider will review the recommended vaccine schedule for your child's age and discuss your vaccine options.

## **Is the Covid vaccine required for school?**

- No, the Covid-19 vaccine is not a required vaccination for public schools at this time.

## **Is my child able to get the Covid-19 vaccine at the same time as other vaccines**

- Yes, there is no requirement to separate or delay other vaccines. We recommend getting the flu shot and covid shots together rather than delaying one or the other. There is a slightly higher risk of fever when receiving the flu and covid shots together.

## **I'm concerned about foreign genetic material (mRNA) being injected into my child**

- The mRNA in the Pfizer and Moderna vaccines is a copy of a small portion (about 10%) of RNA of the virus that causes Covid-19. This small piece of mRNA allows your muscle cells at the injection site to make proteins that are identical to one of the proteins in the Covid-19 virus, the spike protein in this case. These proteins cause your body to make an immune response that can stop a future infection before it can cause infection or severe illness. The mRNA in the vaccine is only able to make this one, single protein. The vaccine mRNA does not make any of the other proteins that the Covid-19 virus requires to grow and spread.
- The small amount of mRNA in the vaccine will almost entirely stay in the muscle where it is injected.
- The vaccine mRNA and proteins never enter the nucleus of your cells and do not combine with or change your DNA.

- Just like the mRNA that your body makes naturally, the vaccine mRNA quickly breaks down and becomes inactive.
- By comparison, **an infection with Covid-19 will flood your airway with between 1 billion and 100 billion virus particles and each virus contains much longer and more complex RNA compared to the vaccine. The RNA from the virus makes proteins designed to overwhelm the infected cell with massive amounts of virus.**
- The vaccine will reduce your ability of the Covid-19 virus to replicate and spread in your body and will reduce the overall amount of viral RNA in your body compared to someone who is not vaccinated.

### **I'm immunocompromised, should I get the booster now?**

- If you have not yet received a dose of Bivalent vaccine, you should receive a dose at least 2 months after your last monovalent vaccine.
- If you have already received a dose of bivalent vaccine, check with your health care provider if additional doses of vaccine may be recommended.

### **How long do I have to wait to get the booster?**

- **5 or older** can get their updated bivalent booster dose at least 2 months after their last dose of covid vaccine
- **18 and older** who have not yet gotten a booster and who are unable to get the bivalent booster or who refuse to receive a bivalent booster may receive a single dose of Novavax

monovalent vaccine as their booster at least 6 months after their primary series.

- **If you received a vaccine from outside of the US that has not been authorized by the FDA**, as long as the vaccine is approved by the World Health Organization, you are eligible to receive an mRNA booster as above

### **If I got Moderna before, am I able to get Pfizer for my booster or vice versa?**

- **Yes**, it is ok to mix Pfizer or Moderna for your booster shot

### **Do the boosters have different side effects or adverse events?**

- No, in the studies done on boosters, the local (redness, swelling and pain) and systemic (fever, headaches, fatigue) reactions generally occur LESS frequently than they do with the primary vaccination series. And the reactions tend to be less severe.
- The risk of severe events such as myocarditis or thrombotic events is not increased with boosters compared to the primary vaccine series based on current information.

### **Is the booster mandated?**

- No. The booster dose is not mandated at this time.
- Individual employers or private entities may require booster vaccines

### **Will an antibody test tell me if I am still protected?**

- Not really. Antibody tests only measure one part of your immune response to vaccination, called humoral immunity. There is a second type of immune response called cellular immunity that is an important part of your protection and is not easy to measure. Antibody levels do correlate with protection from infection, but cellular immunity also provides significant protection, especially against severe illness. So even if you have no antibodies on an antibody test and a vaccine or infection, you are likely still protected by your cellular immunity.
- Some antibody tests check for antibodies to a different part of the virus than the vaccine triggers, so a positive antibody test may indicate a prior infection, but not vaccine protection.
- Antibody tests also may not be sensitive enough to detect protective antibodies levels, leading to false negative tests or they may detect antibodies for coronaviruses other than Covid-19, leading to false positive results.

### **Will I have to get a booster every year like the flu shot?**

- It isn't clear at this point. The annual flu shot is necessary because protection from the flu shot tends to decrease over the course of a year or so, and because the flu virus changes year to year, so last year's flu shot may not work against this year's flu.
- Covid-19 virus is becoming endemic, meaning that it will be continually circulating through the population causing seasonal spikes. Depending on the circulating strains of Covid and how contagious or severe they are, annual updated annual Covid-19 vaccines are likely to be recommended at least for high-risk individuals and possibly for the general population.

## **Will the booster dose prevent me from getting a breakthrough infection?**

- The booster dose will increase your antibody levels and will reduce your risk of getting infected and your risk of spreading Covid-19 to others. It is still possible to get Covid-19 after vaccination, but the risk of infection will be lower.
- Boosting decreases your risk of hospitalization and severe illness and death due to Covid-19.

## **I'm not at high risk but live with a high risk person, should I get the booster?**

- The most effective protection would be for the high-risk person to receive a booster dose, and for everyone else in the home or social circle to get fully vaccinated and booster doses when they are eligible.

## **I was treated with convalescent plasma or monoclonal antibodies after an exposure or infection. Am I still able to get the booster?**

- Yes, it is no longer recommended that you wait for 90 days after you completed your plasma or antibody treatment before receiving your booster dose. You can receive it at any time that you would normally be eligible.

## **Why is the Johnson&Johnson/J&J/Janssen vaccine no longer available in the U.S., do I need to be worried if I received this vaccine?**

- In February of 2023, J&J stopped production of their Covid-19 vaccine and all doses in the US expired in May of 2023. The

vaccine remains approved for use in the US and the decision by the company was likely economic. Production may restart at some point in the future. Individuals who received the J&J vaccine are still considered vaccinated, though those who have received only the J&J vaccine are recommended to receive a dose of bivalent mRNA vaccine