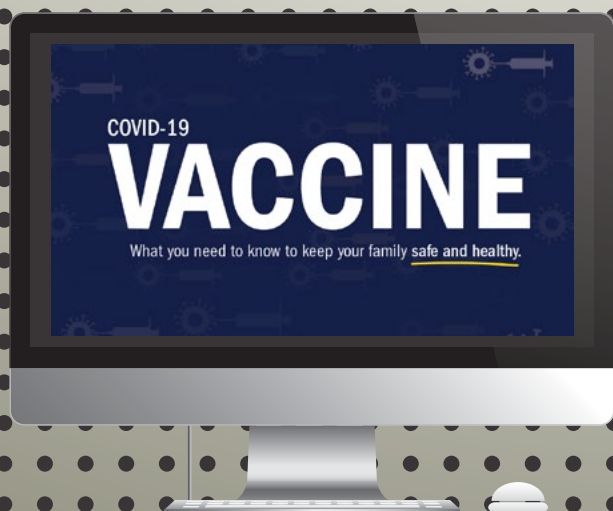
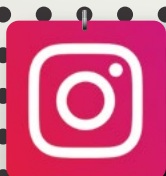


Military Health System Communications Toolkit

Getting the COVID-19 Vaccine

Topics and Resources For Communicators



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Background

Vaccines are among the most important accomplishments in medicine. They have saved more lives around the world than any other medical invention, including antibiotics or surgery. Only clean water has saved more lives than vaccines. Disease threats are everywhere, throughout life – from birth, to daycare and school entry, to military recruit training, to adult life, to deployment, and into retirement. Diseases can spread person-to-person, through consuming contaminated food or water, from the bite of an infected mosquito, and other ways. Vaccines provide a safe and effective means of countering the threats to personal health and military readiness.

Key Themes

- Taking the vaccine **protects** yourself, your community, and nation.
- Confidence in the **safety** and **efficacy** of vaccine(s) and **transparency** in the latest vaccine(s) information.
- **Confidence** in the vaccine(s) distribution plan and understanding the need for flexibility.
- Maintain COVID-19 **safety procedures** to prevent complacency in COVID-19 mitigation efforts.

COVID-19 Overview

Coronavirus disease 2019 (COVID-19) is caused by a novel coronavirus first identified in December 2019, that has since spread around the world. Although most people who have COVID-19 have mild symptoms, COVID-19 can also cause severe illness and even death. Some groups, including older adults and people who have certain underlying medical conditions, are at increased risk of severe illness or death. The U.S. effort to develop COVID-19 vaccines, called Operation Warp Speed, aims to deliver safe and effective vaccines with the first supply expected to become available before the end of 2020. Supplies will increase over time, and all adults should be able to get vaccinated later in 2021. A COVID-19 vaccine for children may not be available until more study data are completed.

Communications Goals

This toolkit provides communicators across the Military Health System (MHS) with important information about the COVID-19 prevention and vaccination from the CDC to share with patients and health care professionals.

Explain to key audiences DoD/MHS/DHA's actions to support the COVID-19 whole-of-government vaccination development, distribution, and administration efforts.

Educate beneficiaries, civilians, contractors, volunteers, and MHS and Department of Defense health care providers and staff on the availability and importance of COVID-19 vaccines.

Encourage getting the vaccine by explaining and providing credible health and safety data and benefits.

Equip MHS and DOD health care providers and staff with information and resources needed to direct the successful distribution of the COVID-19 vaccine.

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The COVID-19 Vaccine

- It is projected that early COVID-19 vaccines will be given in a two-dose series separated by 21 or 28 days, depending on the product. Vaccines from different manufacturers will NOT be interchangeable. The vaccinee must receive the same vaccine for both doses. Talk to your provider to ensure you get the right dose at the right time.
- All vaccine recipients will be provided a copy of the CDC COVID-19 Vaccination Record Card after receipt of the vaccine. It is recommended that the second-dose appointment be made at the time of initial vaccinations, or instructions provided on procedures for second dose follow-up.
- The details for the administration of each will depend on the language contained in the EUA or EAP. After reviewing the information and terms of any eventual EUA or EAP, the Department will determine whether administration of the vaccine will be voluntary for all DoD personnel.
- If you are in need of other immunizations or have recently received other vaccines, be sure to tell your provider so they can determine when you can safely receive the COVID-19 vaccine.

Vaccine safety

- The Food and Drug Administration (FDA) under Emergency Use Authorization has authorized the use of a COVID-19 vaccine after careful and rigorous testing and trials.
- None of the factors that contributed to the accelerated development of a COVID-19 vaccine imply that safety, scientific or ethical integrity are compromised, or that short-cuts have been made.
- DoD has full confidence in the safety, and efficacy of vaccine(s) and transparency in the latest vaccine(s) information.

Emergency Use Authorizations

- Drugs and vaccines have to be approved by the Food and Drug Administration (FDA) to ensure that only safe and effective products are available to the American public. During public health emergencies, when there is good scientific reason to believe that a product is safe and is likely to treat or prevent disease, the FDA may authorize its use through an Emergency Use Authorization (EUA), even if definitive proof of the effectiveness of the drug or vaccine is not known. FDA pre-licensure approval is considered for treatment or prevention of diseases that are very serious.
- In public health emergencies, such as a pandemic, the vaccine development process may be atypical. For example, during the COVID-19 pandemic, investments and partnerships by the U.S. government have prioritized development and distribution of the most promising vaccines that have met the FDA's rigorous and science-based standards for quality, safety, and effectiveness.
- COVID-19 vaccines are rigorously tested for safety and efficacy during the development process. The FDA then undertakes a comprehensive review of all accumulated safety and manufacturing data from the manufacturer to determine if it adequately ensures product quality and consistency before authorizing its use.

Source: FDA. *Emergency Use Authorization for Vaccines Explained*. <https://www.fda.gov/vaccines-blood-biologics/vaccines/emergency-use-authorization-vaccines-explained>

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Who should get vaccinated against COVID-19?

- Adults are encouraged to get vaccinated as it becomes available at your location. Talk to your provider or local MTF about vaccine availability.
- When a COVID-19 vaccine is authorized by FDA and recommended by the Advisory Committee on Immunization Practices (ACIP), health care personnel and residents of long-term care facilities should be offered vaccination in the Limited Distribution/Controlled Pilot phase of the COVID-19 vaccination program.

Source: Advisory Committee on Immunization Practices. Phased Allocation of COVID-19 Vaccines. <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/COVID-02-Dooling.pdf>.

Vaccinating those who have had COVID-19 disease

- Because the duration of immunity from natural infection with COVID-19 is unknown, vaccine may have value in protecting people who have already had the disease. Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this. Talk with your provider if you have been previously infected with COVID-19.

COVID-19 vaccine availability in DoD

- The Department of Defense (DoD) is expecting to receive enough vaccine for all 11.1 million Active Duty and their dependents (to include Coast Guard), Retirees, Reserve Components, all DoD employees and contractors, and Public Health Service.
- The DoD initially expects a limited quantity of COVID-19 vaccine before the end of 2020, and rolling delivery to MTFs and other health care facilities after the Food and Drug Administration approves the vaccine for use.
- When the vaccine becomes available, DoD will follow the CDC's prioritization guidelines (framework) for distribution. Talk to your provider or local MTF for more details about when vaccine will become available.



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Combating Misinformation Through Vaccine Confidence

- Confidence in the safety and effectiveness of vaccines is important to the success of a vaccine campaign. However, when misleading information circulates, vaccination coverage can fall and increase the risk for outbreaks of vaccine-preventable diseases.
- Traditional vaccination rates remain strong nationally, but pockets of under-vaccination persist in some locations, putting communities at risk for outbreaks.
- Trust in vaccines is built through conversations between doctors, nurses, pharmacists, community members, and religious leaders.
- To stop misinformation from eroding public trust in vaccines, trusted messengers can improve confidence in vaccines among at-risk groups; and provide clear information about vaccination and the critical role it plays in protecting the public.

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Prevention of COVID-19

Follow these common practices:

- COVID-19 spreads easily from person to person, mainly between people who are in close contact with one another (within 6 feet) and through respiratory droplets produced when an infected person coughs, sneezes, breathes, sings or talks.
- Stopping a pandemic requires using all the tools available. Vaccines work with your immune system so your body will be ready to fight the virus if you are exposed. Other steps, like masks and social distancing, help reduce your chance of being exposed to the virus or spreading it to others. Together, COVID-19 vaccination and following CDC's recommendations to protect yourself and others will offer the best protection from COVID-19.
- Mass immunization events may be required due to greater demand and participation in a COVID-19 vaccine program. This will be determined by the leadership at individual MTFs.
- Wearing a mask that covers the nose and mouth is recommended whenever you are in contact with others outside your household, when in healthcare facilities, and when receiving any vaccine, including a COVID-19 vaccine.
- If you or your child are unable to wear masks due to age or medical conditions, call ahead to your local MTF for information on alternatives to mass immunization events or other safety precautions you can take in order to safely get vaccinated.
- Masks and physical distancing will still be necessary until a large proportion of the population is vaccinated and the vaccine is proven to provide long-term protection.
- Global and national public health authorities are expected to continue to recommend wearing masks and practicing physical distancing, for everyone, until pandemic risk of COVID-19 is substantially reduced.
- Good health habits, wearing a mask and practicing social distancing can help prevent the spread of COVID-19. Remember, some people without symptoms may be able to spread the virus. Follow these common practices:
 - Wash your hands often, especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
 - If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.
 - Avoid touching your eyes, nose, and mouth with unwashed hands.
 - Always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow and do not spit.
 - Clean AND disinfect frequently touched surfaces daily.

COVID-19 Symptoms

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches

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- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea
- If someone is showing any of these warning signs for COVID-19, seek emergency medical care immediately:
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion
 - Inability to wake or stay awake
 - Bluish lips or face
- Call 911 or call ahead to your local emergency facility to notify them that you are seeking care for someone who has or may have COVID-19. Talk to your provider for any other symptoms that are severe or concerning to you.

Resources:

- Health.mil – <https://www.health.mil/Coronavirus>
- Source: DHA Immunization Healthcare Division. Vaccine-Preventable Diseases. <https://health.mil/VPD>
- CDC. About COVID-19. <https://www.cdc.gov/coronavirus/2019-ncov/cdcresponse/about-COVID-19.html>
- CDC. Frequently Asked Questions about COVID-19 Vaccination. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>
- MHS Communications Plan. COVID-19 (SARS-COV-2) Prevention – Vaccination Questions and Answers.
- DHA-IHD. DoD COVID-19 Vaccine Implementation Planning Update Newsletter. 4 November 2020.
- COVID-19 Vaccine Webinar. DHA-IHD. 2 Nov 2020.
- CDC. Vaccinate with Confidence. <https://www.cdc.gov/vaccines/partners/vaccinate-with-confidence.html>
- CDC. How COVID-19 Spreads. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html>
- CDC. Understanding How COVID-19 Vaccines Work. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/about-vaccines/how-they-work.html>
- CDC. How to Protect Yourself & Others. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>
- CDC. Symptoms of Coronavirus. <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

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Q1: When is a COVID-19 vaccine going to be available?

A1: The DoD initially expects a limited quantity of COVID-19 vaccine before the end of 2020, and rolling delivery to MTFs and other health care facilities after the Food and Drug Administration (FDA) approves the vaccine for use. When the vaccine becomes available, DoD will follow the CDC's prioritization guidelines (framework) for distribution. Talk to your provider or local MTF for more details about when vaccine will become available.

Source: DHA-IHD. DoD COVID-19 Vaccine Implementation Planning Update Newsletter. 4 November 2020.

Q2: What is an Emergency Use Authorization?

A2: Drugs and vaccines have to be approved by the Food and Drug Administration (FDA) to ensure that only safe and effective products are available to the American public. During public health emergencies, when there is good scientific reason to believe that a product is safe and is likely to treat or prevent disease, the FDA may authorize its use through an Emergency Use Authorization (EUA), even if definitive proof of the effectiveness of the drug or vaccine is not known. FDA pre-licensure approval is considered for treatment or prevention of diseases that are very serious.

Source: MHS Communications Plan. COVID-19 (SARS-COV-2) Prevention – Vaccination Questions and Answers.

Q3: What kind of information will be available to me before I receive the vaccine?

A3: Each potential recipient of COVID-19 vaccine will receive a vaccine-specific Emergency Use Authorization (EUA) Fact Sheet for Recipients from the FDA, which will provide the following information:

- Basic information on COVID-19, symptoms, and what to discuss with a health care provider before vaccination
- Who should and should not receive the vaccine
- That recipients have the choice to receive the vaccine
- Dosage and vaccine series information
- Risks and benefits of the vaccine
- An explanation of what an EUA is and why it is issued
- Any approved available alternatives for preventing COVID-19
- Additional resources

Source: CDC. COVID-19 Vaccine Training Modules. <https://www2.cdc.gov/vaccines/ed/covid19/SHVA/10080.asp>

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Q4: How many doses of vaccine will I need?

A4: Early COVID-19 vaccines will be given in a two-dose series separated by 21 or 28 days, depending on the product. Vaccines from different manufacturers will NOT be interchangeable. The vaccinee must receive the same vaccine for both doses.

Source: DHA-IHD. DoD COVID-19 Vaccine Implementation Planning Update Newsletter. 4 November 2020.

Q5: How will I be able to keep track of what vaccine I got and when I need to get a second dose?

A5: All vaccine recipients will be provided a copy of the CDC COVID-19 Vaccination Record Card after receipt of the vaccine. It is recommended that the second-dose appointment be made at the time of initial vaccinations, or instructions provided on procedures for second dose follow-up. If a vaccine recipient has a smartphone, it is recommended that they take a photo of the vaccination record card as a back-up copy and set a calendar reminder for receipt of the second dose.

Source: Draft DHA-IPM 20-xxx . DoD Coronavirus Disease (COVID)-19 Vaccination Program (CVP) Implementation.

Q6: If I've already recovered from COVID-19 infection, do I need to be vaccinated?

A6: Because the duration of immunity from natural infection with COVID-19 is unknown, vaccine may have value in protecting people who have already had the disease. Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this. Talk with your provider if you have been previously infected with COVID-19.

Source: CDC. Frequently Asked Questions about COVID-19 Vaccination. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>

Q7: If I get vaccinated, do I still need to wear a mask and practice social distancing?

A7: Masks and physical distancing will still be necessary until a large proportion of the population is vaccinated and the vaccine is proven to provide long-term protection. Global and national public health authorities are expected to continue to recommend wearing masks and practicing physical distancing, for everyone, until pandemic risk of COVID-19 is substantially reduced.

Source: MHS Communications Plan. COVID-19 (SARS-COV-2) Prevention – Vaccination Questions and Answers.

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Q8: Are there certain people at increased risk for severe illness from COVID-19?

A8: The risk for severe illness and death from COVID-19 increases with age, with the greatest risk among those aged 85 or older. Adults of any age with the following conditions are also at increased risk of severe illness: Cancer; chronic kidney disease, COPD; heart disease; weakened immune system; obesity; pregnancy; sickle cell disease; smoking; and type 2 diabetes mellitus. COVID-19 is a new disease. Currently there are limited data and information about the impact of many underlying medical conditions and whether they increase risk. Talk with your provider about your individual risk factors and appropriate precautions.

Sources: CDC. Older Adults. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/older-adults.html>

CDC. People with Certain Medical Conditions. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

Q9: How do we know if the vaccine is safe? How will you monitor and track vaccine side effects?

A9: DoD is confident in the stringent regulatory process and requirements of the FDA. Manufacturers are required to submit their raw data for the FDA to review. Safety, immune response, and efficacy data from the trial stages are submitted to the FDA before they are authorized for use and distribution. Per FDA requirements, DoD will be monitoring and tracking vaccine reports of vaccine side effects through various surveillance activities both internal and external to the DoD.

Q10: Will DoD provide vaccines for civilian employees and contractor staff working in military hospitals or clinics? How about working on installation or in depots and arsenals?

A10: The DoD will offer vaccine to civilian and contractor staff with direct patient care and to those who normally receive vaccine for occupational health purposes, as authorized in accordance with DoD regulation. This may include some of those working on installations or depots or arsenals, and we are continuing to refine these populations in preparation for the additional vaccination efforts following vaccination of healthcare workers.

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Q11: Will TRICARE beneficiaries including military retirees have access to the vaccine?

A11: Yes, based on DoD prioritization. While there is limited vaccine availability, vaccination distribution prioritization will focus on those providing direct medical care, maintaining essential national security and installation functions, deploying forces, and those beneficiaries at the highest risk for developing severe illness from COVID-19. TRICARE beneficiaries empaneled at a DoD Military Treatment Facility (MTF) are eligible to receive the vaccine at a DoD MTF. TRICARE beneficiaries who receive care at DoD MTFs on a space-available basis can alternately receive vaccine through the local civilian jurisdiction.

Q12: Where should I be vaccinated?

A12: To the greatest extent possible, beneficiaries in priority groups who are enrolled at Military Treatment Facilities (MTF) should come to the MTF to be vaccinated. This will ensure the maximum number of vaccine opportunities allocated to jurisdictions other than DoD are available for the non-DoD population. TRICARE beneficiaries who receive care at DoD MTFs on a space-available basis can alternately receive vaccine through the local civilian jurisdiction.

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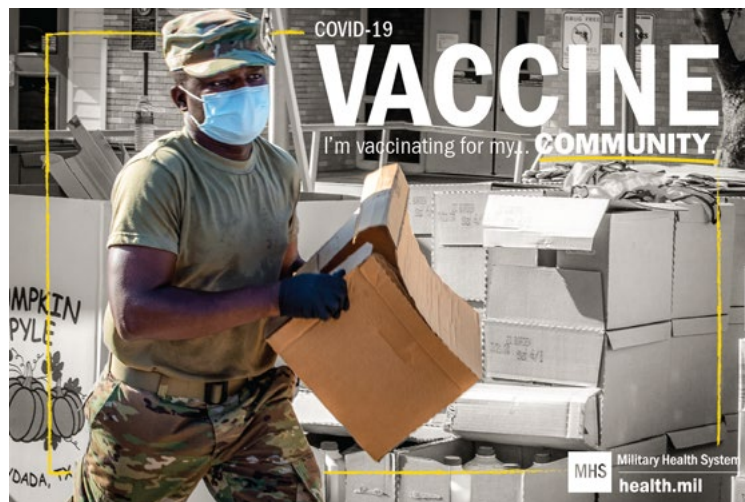
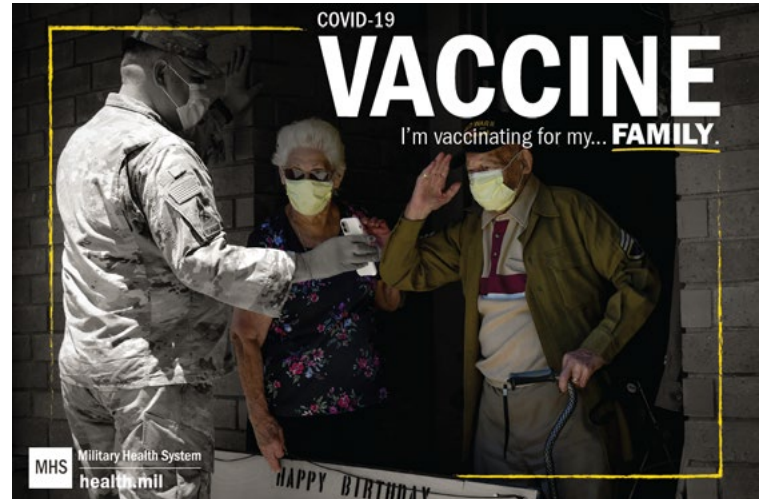
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How a new vaccine is developed, approved and manufactured

The Food and Drug Administration (FDA) sets rules for the three phases of clinical trials to ensure the safety of the volunteers. Researchers test vaccines with adults first.

PHASE 1



20-100
healthy volunteers

- Is this vaccine safe?
- Does this vaccine seem to work?
- Are there any serious side effects?
- How is the size of the dose related to side effects?

PHASE 2



several hundred
volunteers

- What are the most common short-term side effects?
- How are the volunteers' immune systems responding to the vaccine?

PHASE 3



hundreds or thousands
of volunteers

- How do people who get the vaccine and people who do not get the vaccine compare?
- Is the vaccine safe?
- Is the vaccine effective?
- What are the most common side effects?

FDA licenses the vaccine only if:

- It's safe and effective
- Benefits outweigh risks

Vaccines are made in batches called lots.



Manufacturers must test all lots to make sure they are safe, pure and potent. The lots can only be released once FDA reviews their safety and quality.

The FDA inspects manufacturing facilities regularly to ensure quality and safety.



FOR MORE INFORMATION, VISIT [HTTPS://WWW.FDA.GOV/CBER](https://www.fda.gov/cber)

How a vaccine's safety continues to be monitored



FDA and CDC closely monitor vaccine safety after the public begins using the vaccine.

The purpose of monitoring is to watch for adverse events (possible side effects). Monitoring a vaccine after it is licensed helps ensure that possible risks associated with the vaccine are identified.

Vaccine Adverse Event Reporting System (VAERS)

VAERS collects and analyzes reports of adverse events that happen after vaccination. Anyone can submit a report, including parents, patients and healthcare professionals.

Vaccine Safety Datalink (VSD) and Post-Licensure Rapid Immunization Safety Monitoring (PRISM)

Two networks of healthcare organizations across the U.S.

- VSD can analyze healthcare information from over 24 million people.

- PRISM can analyze healthcare information from over 190 million people.



Scientists use these systems to actively monitor vaccine safety.

Clinical Immunization Safety Assessment Project (CISA)

CISA is a collaboration between CDC and 7 medical research centers.

- Vaccine safety experts assist U.S. healthcare providers with complex vaccine safety questions about their patients.

- CISA conducts clinical research studies to better understand vaccine safety and identify prevention strategies for adverse events following immunization.

Vaccine recommendations may change if safety monitoring reveals new information on vaccine risks (like if scientists detect a new serious side effect).

FOR MORE INFORMATION, VISIT [HTTPS://WWW.CDC.GOV/VACCINESAFETY](https://www.cdc.gov/vaccinesafety)

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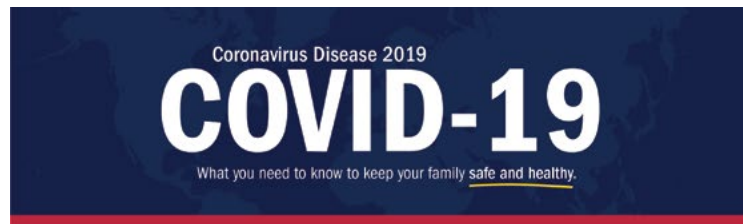
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Graphics



Prevention & Treatment

PREVENTION

Continue taking everyday actions to prevent the spread of germs.

- Avoid touching your eyes, nose, and mouth.
- Cover your cough or sneeze with a tissue and immediately throw it away.
- Sick? Stay home!
- Avoid close contact with people who are sick.
- Wash your hands often with soap and warm water for at least 20 seconds.
- Follow CDC's recommendations for using a facemask.



Remember: Routinely clean and disinfect frequently touched objects and surfaces.



TREATMENT

There is no specific treatment for COVID-19.

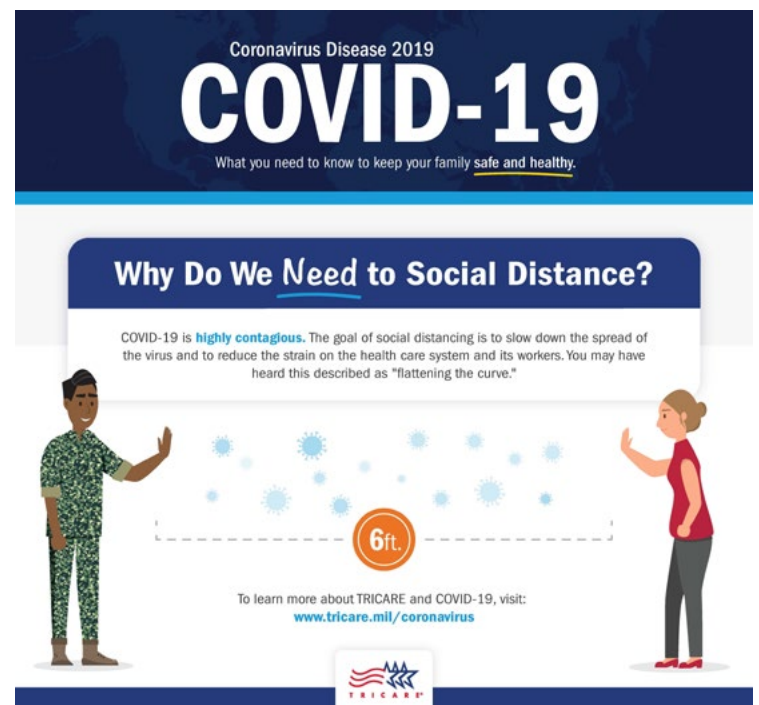
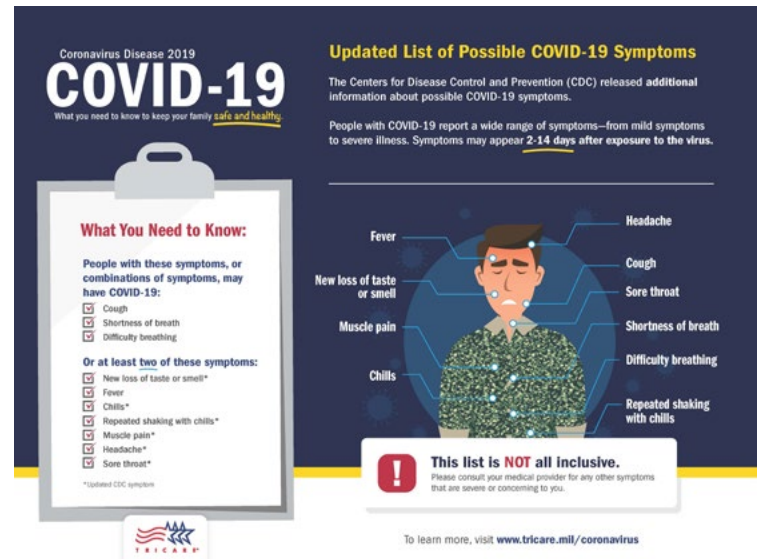
If you feel you or a loved one may be exposed, call your health care provider or contact the Military Health System Nurse Advice Line.

Call the MHS Nurse Advice Line



Visit [MHSNurseAdviceLine.com](https://www.MHSNurseAdviceLine.com) to find your country-specific phone number.

To learn more about COVID-19, visit:
www.tricare.mil/Coronavirus



Current as of March 10, 2020

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Prevention

Coronavirus Disease 2019

COVID-19

What you need to know to keep your family safe and healthy.

How Do You Practice Social Distancing?

According to the CDC, the virus is thought to spread mainly from person-to-person. It's important to stay "two carts apart" or "one car far" from others when in public areas to reduce the spread of COVID-19.

To learn more about TRICARE and COVID-19, visit:
www.tricare.mil/coronavirus

6ft. "One Car Far" 6ft. "Two Carts Apart"

TRICARE

Coronavirus Disease 2019

COVID-19

What you need to know to keep your family safe and healthy.

CONTINUE TAKING EVERYDAY ACTIONS TO PREVENT THE SPREAD OF GERMS.

- Wash your hands often with soap and warm water for at least 20 seconds.
- Cover your cough or sneeze with a tissue and immediately throw it away.
- Avoid touching your eyes, nose, and mouth.
- Avoid close contact with people who are sick.

Remember: Routinely clean and disinfect frequently touched objects and surfaces.

To learn more about COVID-19, visit: www.tricare.mil/Coronavirus

TRICARE

Current as of: March 10, 2020

Coronavirus Disease 2019

COVID-19

What you need to know to keep your family safe and healthy.

With all the news about COVID-19, you've probably heard the term:

SOCIAL DISTANCING

But What Does That Mean?

Social distancing, also referred to as physical distancing, means making changes to your everyday routine to minimize close contact with others.

The Centers for Disease Control and Prevention (CDC) defines social or physical distancing as:

- avoiding groups of more than 10 people
- maintaining a distance of 6 feet or more from others when possible

6ft. 6ft.

Why Do We Need to Social Distance?

COVID-19 is **highly contagious**. The goal of social distancing is to slow down the spread of the virus and to reduce the strain on the health care system and its workers. You may have heard this described as "flattening the curve."

6ft. 6ft.

How Do You Practice Social Distancing?

6ft. "Two Carts Apart" 6ft. "One Car Far"

Other Ways to Practice Social Distancing

- Greet others with a wave
- Stay home as much as possible, and work from home if possible
- Shop online to avoid going to the store
- Use technology to keep in touch with friends and family

Person-to-Person Spread

According to the CDC, the virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

To learn more about TRICARE and COVID-19, visit:
www.tricare.mil/coronavirus

TRICARE