

Finish Strong, Nebraska!



Help Stop the Pandemic by Getting Vaccinated!

COVID-19 vaccination is an important tool to help us all get back to normal. Studies show that COVID-19 vaccines are effective at keeping you from getting COVID-19. Experts also think that getting a COVID-19 vaccine may help keep you from getting seriously ill even if you do get COVID-19.

COVID-19 vaccines teach our immune systems how to recognize and fight the virus that causes COVID-19. It typically takes a few weeks after vaccination for the body to build protection (immunity) against the virus that causes COVID-19. That means it is possible a person could still get COVID-19 just after vaccination. This is because the vaccine has not had enough time to provide protection.

There are steps you can take to protect yourself until you can get vaccinated. Even after you get vaccinated it's important to continue using all the tools available to help stop this pandemic as we learn more about how COVID-19 vaccines work in real-world conditions. Even after vaccination, take steps to protect yourself and others by staying six feet away from people who don't live in your household, wearing a mask outside the home, washing hands often, avoiding crowds and avoiding poorly ventilated spaces.

Frequently asked questions about COVID-19 shots

Q: How can I sign up to receive my COVID-19 shot?

A: Register at the state's portal vaccinate.ne.gov or with your local health department. When you register, you will be asked a series of questions that will confirm which group you fit into. You will be notified when it is your turn to receive the vaccine. If you do not have internet access, you can also register via the Nebraska Vaccination Information Line at 531-249-1873 or 833-998-2275. Relay calls for deaf and hard of hearing access and Language Line for those needing translation services are available.

Q: How many shots do I need to get and how far apart do I need to get them?

A: Two vaccines, one produced by Pfizer-BioNTech and the other by Moderna, are authorized and recommended to prevent COVID-19 in the United States. Each requires two doses. For the Pfizer-BioNTech vaccine, the second dose is administered 21 days after the first shot. For the Moderna vaccine, the second dose is administered 28 days after the first shot.

Other COVID-19 vaccine candidates are in development, and clinical trials are being conducted at the same time as large-scale manufacturing.

Q: What side effects might I have after my shots?

A: You may have pain and swelling on the arm where you got the shot, and you may have a fever, chills, tiredness and a headache.

Q: Which lasts longer, immunity after getting COVID-19 or protection from COVID-19 vaccines?

A: The protection someone gains from having an infection (called “natural immunity”) varies depending on the disease, and it varies from person to person. Because this virus is new, we don’t know how long natural immunity might last. Current evidence suggests that getting the virus again (reinfection) is uncommon in the 90 days after the first infection with the virus that causes COVID-19.

We won’t know how long immunity lasts after vaccination until we have more data on how well COVID-19 vaccines work in real-world conditions. Experts are working to learn more about both natural immunity and vaccine-induced immunity. CDC will keep the public informed as new evidence becomes available.

Q: Who is paying for the COVID-19 vaccines?

A: Vaccine doses purchased with U.S. taxpayer dollars will be given to the American people at no cost. However, vaccination providers can charge an administration fee for giving someone the shot. Vaccination providers can be reimbursed for this by the patient’s public or private insurance company or, for uninsured patients, by the Health Resources and Services Administration’s Provider Relief Fund. No one can be denied a vaccine if they are unable to pay the vaccine administration fee.

Q: If I have already had COVID-19 and recovered, do I still need to get vaccinated?

A: Yes. Due to the severe health risks associated with COVID-19 and the fact that reinfection with COVID-19 is possible, you should be vaccinated regardless of whether you already had COVID-19 infection. If you were treated for COVID-19 symptoms with monoclonal antibodies or convalescent plasma, you should wait 90 days before getting a COVID-19 vaccine. Talk to your doctor if you are unsure what treatments you received or if you have more questions about getting a COVID-19 vaccine.

Experts do not yet 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. It is rare for someone who has had COVID-19 to get infected again. It also is uncommon for people who do get COVID-19 again to get it within 90 days of when they recovered from their first infection. We won’t know how long immunity produced by vaccination lasts until we have more data on how well the vaccines work.

Both natural immunity and vaccine-induced immunity are important aspects of COVID-19 that experts are working to learn more about, and CDC will keep the public informed as new evidence becomes available.

Q: Do I need to wear a mask and avoid close contact with others if I have gotten two doses of the vaccine?

A: Yes. Not enough information is currently available to say if or when CDC will stop recommending that people wear masks and avoid close contact with others to help prevent the spread of the virus that causes COVID-19.

Experts need to understand more about the protection that COVID-19 vaccines provide in real-world conditions before making that decision. Other factors, including how many people get vaccinated and how

the virus is spreading in communities, will also affect this decision. We also don't yet know whether getting a COVID-19 vaccine will prevent you from spreading the virus that causes COVID-19 to other people, even if you don't get sick yourself. While experts learn more about the protection that COVID-19 vaccines provide under real-life conditions, it will be important for everyone to continue using all the tools available to help stop this pandemic.

Q: Will I be required to get vaccinated for work?

A: The federal government does not mandate (require) vaccination for individuals. For some healthcare workers or essential employees, a state or local government or employer, for example, may require or mandate that workers be vaccinated as a matter of state or other law. Check with your employer to see if they have any rules that apply to you.

Q: What is being done to distribute COVID-19 vaccines?

A: The federal government oversees a centralized system to order, distribute, and track COVID-19 vaccines. All vaccines are ordered through CDC. Vaccination providers receive vaccines from CDC's centralized distributor or directly from a vaccine manufacturer.

CDC has worked with state, tribal, territorial, and local jurisdictions, private partners (such as chains and networks of independent pharmacies) on the development of COVID-19 vaccination plans for their respective areas. The CDC is working with pharmacies to offer on-site COVID-19 vaccination services for residents in long-term care settings, such as skilled nursing facilities, nursing homes, and assisted living facilities, where most residents are over 65 years of age.

The implementation of COVID-19 vaccine distribution involved detailed planning focusing on every step of the process, including:

- Establishing and testing logistical plans with manufacturers and commercial partners that are part of CDC's centralized COVID-19 vaccine delivery system
- Coordinating the distribution of vaccines and needed supplies from centralized locations
- Developing processes for ordering additional doses of the vaccine after the first supply has been shipped
- Receiving, storing, and handling vaccines properly at very specific temperatures
- Deciding who should receive a vaccine first, based on national recommendations, if there are not enough doses of the vaccine for everyone
- Giving the vaccines safely during an ongoing pandemic
- Reporting on vaccine inventory, administration, and safety using a variety of new and enhanced data systems
- Expanding safety surveillance through new systems and additional information sources, as well as scaling up existing safety monitoring systems
- Developing plans to assess vaccine effectiveness, which means how well the vaccines protect against COVID-19 under real-life conditions
- Making sure the public, healthcare providers, state and local health departments and others receive timely, credible, clear communication about all aspects of the vaccination program

A safe and effective COVID-19 vaccine is a critical component of the U.S. strategy to reduce COVID-19-related illnesses, hospitalizations, and deaths. The U.S. government's goal is to have enough COVID-19 vaccine doses for all people in the United States who choose to be vaccinated.

Q: How is the CDC making sure people can make informed decisions about getting vaccinated when COVID-19 vaccines are widely distributed and available?

CDC is working with partners across the country to make sure people have the information they need to make informed decisions and be confident in deciding to get vaccinated. CDC's key priorities are:

- Regularly sharing clear and accurate information with people to make sure they understand the risks and benefits of getting vaccinated and can make informed decisions
- Helping healthcare personnel feel confident in their decision to get a COVID-19 vaccine
- Helping healthcare providers answer their patients' questions about the vaccine
- Engaging communities and individuals equitably and inclusively to ensure that people have opportunities to ask questions and get clear, accurate information about COVID-19 vaccines

Easy access to COVID-19 vaccines is critically important. That's why CDC is working with public health, healthcare providers, and other partners to make sure people can easily get a COVID-19 vaccine and that cost is not a barrier.

Q: Is it safe for me to get a COVID-19 vaccine if I am pregnant or breastfeeding?

A: People who are pregnant and part of a group recommended to receive the COVID-19 vaccine may choose to be vaccinated. If you have questions about getting vaccinated, talking with a healthcare provider may help you make an informed decision. While breastfeeding is an important consideration, it is rarely a safety concern with vaccines.

No data are available yet on the safety of COVID-19 vaccines in lactating women or on the effects of mRNA vaccines on breastfed infants or on milk production/excretion. mRNA vaccines are not thought to be a risk to breastfeeding infants. People who are breastfeeding and are part of a group recommended to receive a COVID-19 vaccine, such as healthcare personnel, may choose to be vaccinated.

To make sure that more information is gathered regarding the safety of these vaccines when administered during pregnancy, pregnant people are encouraged to enroll in v-safe, CDC's new smartphone-based tool being used to check-in on people's health after they receive a COVID-19 vaccine. If pregnant people report health events through v-safe after vaccination, someone from CDC may call to check on them and get more information. Additionally, pregnant people enrolled in v-safe will be contacted by CDC and asked to participate in a pregnancy registry that will monitor them through pregnancy and the first 3 months of infancy.

Q: Is it safe for me to get a vaccine if I have an underlying health condition?

A: People with underlying medical conditions can receive the FDA-authorized COVID-19 vaccines provided they have not had an immediate or severe allergic reaction to a COVID-19 vaccine or to any of the ingredients in the vaccine. Vaccination is an important consideration for adults of any age with certain underlying medical conditions because they are at increased risk for severe illness from the virus that causes COVID-19.

Q: Is there a risk of a severe allergic reaction if I receive the vaccine?

A: Serious problems from vaccination can happen, but they are rare. CDC has learned of reports that some people have experienced severe allergic reactions—also known as anaphylaxis—after getting a COVID-19 vaccine. As an example, an allergic reaction is considered severe when a person needs to be treated with epinephrine or EpiPen or if they must go to the hospital.

Q: How do I report it if I have a problem or bad reaction after getting a COVID-19 vaccine?

A: If you get a COVID-19 vaccine and you think you might be having a severe allergic reaction after leaving the vaccination site, seek immediate medical care by calling 911.

You can report side effects and reactions using either V-safe or the Vaccine Adverse Event Reporting System (VAERS.)

V-safe is a new smartphone-based, after-vaccination health checker for people who receive COVID-19 vaccines. V-safe uses text messaging and web surveys from CDC to check in with vaccine recipients following COVID-19 vaccination. V-safe also provides second vaccine dose reminders if needed, and telephone follow up to anyone who reports medically significant (important) adverse events.

Vaccine Adverse Event Reporting System (VAERS) is the national system that collects reports from healthcare professionals, vaccine manufacturers, and the public of adverse events that happen after vaccination; reports of adverse events that are unexpected, appear to happen more often than expected, or have unusual patterns are followed up with specific studies. Reports to VAERS help CDC monitor the safety of vaccines. If experts detect an unexpected adverse event, they quickly study it further to assess whether it is a true safety concern. Experts then decide whether changes are needed in U.S. vaccine recommendations. This monitoring is critical to help ensure that the benefits continue to outweigh the risks for people who receive vaccines.

Healthcare providers will be required to report certain adverse events following vaccination to VAERS. Healthcare providers also have to adhere to any revised safety reporting requirements according to FDA's conditions of authorized use throughout the duration of any Emergency Use Authorization.

Information provided by DHHS and CDC