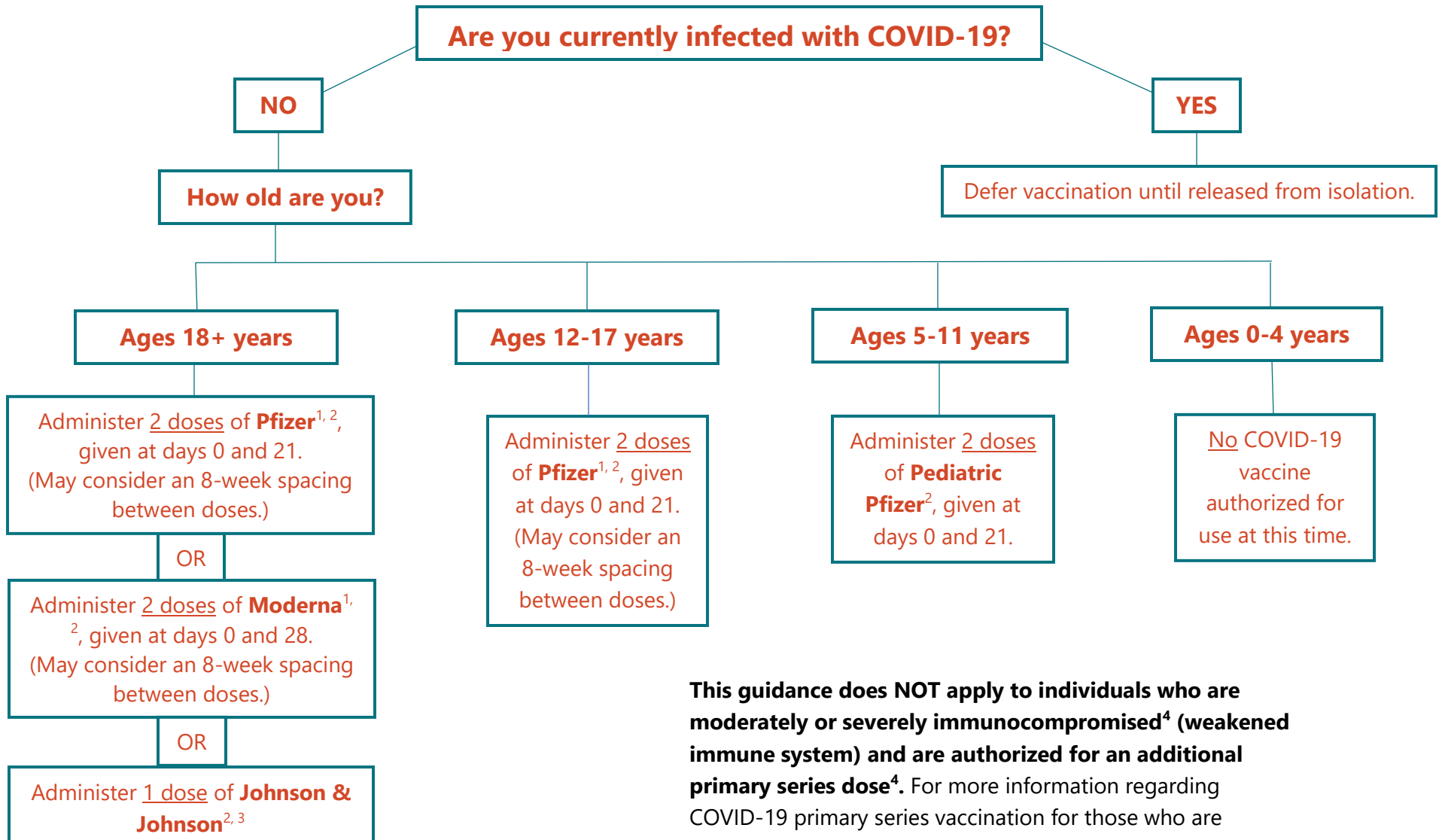


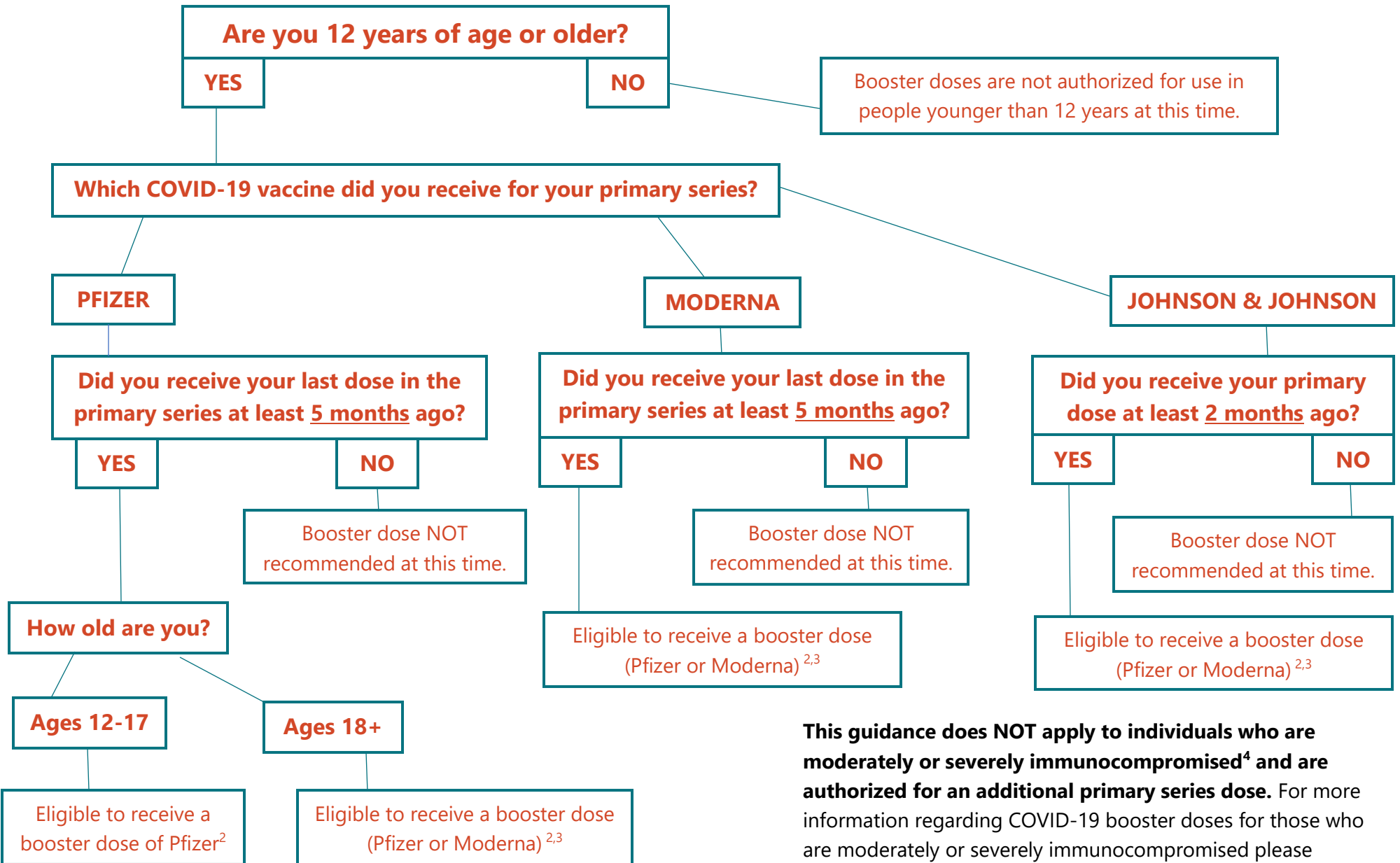
# COVID-19 Vaccine Decision Tree

## Primary Series for the General Public



**This guidance does NOT apply to individuals who are moderately or severely immunocompromised<sup>4</sup> (weakened immune system) and are authorized for an additional primary series dose<sup>4</sup>.** For more information regarding COVID-19 primary series vaccination for those who are moderately or severely immunocompromised please reference the COVID-19 Vaccine Decision Tree: Primary Series for those who are Immunocompromised below or visit the [CDC's COVID-19 vaccine clinical considerations for those who are moderately to severely immunocompromised](#) website.

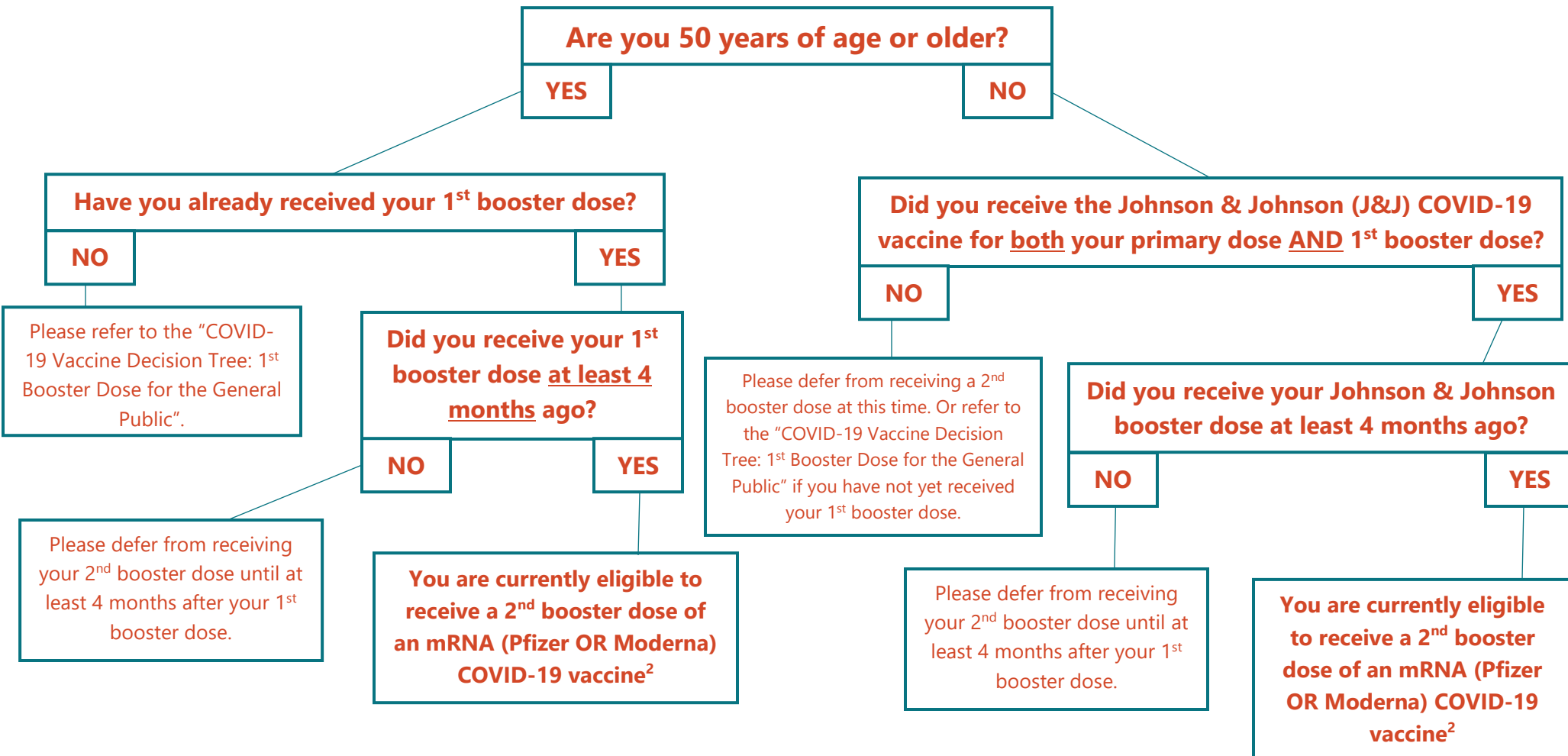
## COVID-19 Vaccine Decision Tree: 1<sup>st</sup> Booster Dose for the General Public



**This guidance does NOT apply to individuals who are moderately or severely immunocompromised<sup>4</sup> and are authorized for an additional primary series dose.** For more information regarding COVID-19 booster doses for those who are moderately or severely immunocompromised please reference the COVID-19 Vaccine Decision Tree: Booster Dose for those who are Immunocompromised below or visit the [CDC's COVID-19 vaccine clinical considerations for those who are moderately to severely immunocompromised.](#)

## COVID-19 Vaccine Decision Tree: 2<sup>nd</sup> Booster Dose\* for the General Public

**IMPORTANT:** As of March 29<sup>th</sup>, 2022, the FDA has authorized, and the CDC has expanded their recommendations to include a 2<sup>nd</sup> booster doses for select populations. Please find more information [here](#).



**\*Only the use of an mRNA (Pfizer OR Moderna) COVID-19 vaccine has been authorized and recommended for use as a 2<sup>nd</sup> booster dose at this time. Do not administer the Johnson & Johnson COVID-19 vaccine to those who are requesting and are eligible for a 2<sup>nd</sup> booster dose.**

<sup>1</sup>On 2/22/22 the CDC updated their Interim Clinical Considerations for COVID-19 Vaccination Guidance with additional information to help vaccine providers determine if an individual patient's optimal interval between their 1st mRNA dose and 2nd mRNA dose in a primary series should be 8 weeks rather than the previously recommended 3-week (Pfizer-BioNTech) or 4-week (Moderna) interval. Some **people ages 12 through 64 years – and especially males ages 12 through 39 years** – may benefit from getting their second mRNA COVID-19 vaccine dose 8 weeks after receiving their first dose. Please talk to your healthcare or vaccine provider about the timing of the second dose that is right for you.

**IMPORTANT:** A shorter interval (3 weeks for Pfizer-BioNTech; 4 weeks for Moderna) between the first and second doses remains the recommended interval for people who are...

- moderately or severely immunocompromised;
- adults ages 65 years and older;
- and in situations in which there is increased concern about [COVID-19 community levels](#) or
- when an individual is at higher risk for severe disease due to COVID-19.

<sup>2</sup>Primary series dose volumes are as follows:

- Pediatric Pfizer (ages 5-11) 0.2mL
- Pfizer (ages 12+) 0.3mL
- Moderna (ages 18+) 0.5mL
- In certain situations, some individuals may choose to receive a booster dose of Johnson & Johnson (ages 18+) 0.5mL

Booster dose volumes are as follows:

- Pfizer (ages 12+) 0.3mL
- Moderna (ages 18+) 0.25mL
- In certain situations, some individuals may choose to receive a booster dose of Johnson & Johnson (ages 18+) 0.5mL

<sup>3</sup>All individuals are recommended to receive a primary vaccination series, booster dose, and/or additional dose of an mRNA COVID-19 vaccine (Pfizer or Moderna) over the use of the Janssen (Johnson & Johnson) COVID-19 vaccine. This change in guidance comes after reviewing data finding an increased risk of Thrombosis with Thrombocytopenia associated with those who have received the Janssen COVID-19 vaccine.

<sup>4</sup>The CDC defines moderately or severely immunocompromised as individuals who have:

- Been receiving active cancer treatment for tumors or cancers of the blood
- Received an organ transplant and are taking medicine to suppress the immune system
- Received a stem cell transplant within the last 2 years or are taking medicine to suppress the immune system
- Moderate or severe primary immunodeficiency (such as DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids or other drugs that may suppress your immune response