



Pfizer COVID-19 Vaccine FAQ

Children 6 months to 11 years old

Updated 6/21/2022



The Pfizer COVID-19 vaccine has received Emergency Use Authorization (EUA) by the Food & Drug Administration (FDA) and CDC approval for use in children 6 months and older.

GENERAL VACCINE INFORMATION

1. Tell me about the vaccine.

On Aug. 23, 2021, the FDA approved the two-dose Pfizer vaccine series (COMIRNATY) for the prevention of COVID-19 in individuals 16 years of age and older.

The Pfizer vaccine is FDA-authorized under EUA for the prevention of COVID-19 in individuals 6 months through 15 years of age. The primary vaccine series consists of 3 doses for individuals 6 months through 4 years of age and 2 doses for individuals 5 years and older. Additionally, a third dose may be given to individuals 5 years of age and older who have been determined to have certain conditions that weaken their immune systems. A single booster dose may be given to individuals 5 through 11 years of age who have completed a primary series with the Pfizer vaccine, and to individuals 12 years and older who have completed a primary series with the Pfizer vaccine or another authorized or approved COVID-19 vaccine. A second booster dose may be given to individuals 50 years and older who have received a first booster dose of any authorized or approved COVID-19 vaccine, and to individuals 12 years of age and older with certain conditions that weaken their immune systems and who have received a first booster dose of any authorized or approved COVID-19 vaccine.

COMIRNATY and the Pfizer vaccine have the same formulation for individuals 12 years of age and older and can be used interchangeably. The Pfizer vaccine for individuals 6 months through 11 years is a smaller dose. For more details, see the table below:

Type of vaccine	<p>Uses mRNA (messenger RNA) technology</p> <ul style="list-style-type: none"> • does NOT contain any part of the virus (live or inactive) • is NOT grown in eggs (it is OK to take if you have egg allergies)
Side effects (short-term)	<p>Most common side effects in individuals 6 through 23 months of age:</p> <ul style="list-style-type: none"> • irritability • decreased appetite • fever and pain • pain, redness and swelling at the injection site <p>Most common side effects in individuals 2 years and older include those listed above as well as:</p> <ul style="list-style-type: none"> • headache • fever • chills <p>Most are mild-to-moderate and are a sign that the vaccine is making antibodies to help fight off COVID-19 infections</p>
Side effects (long-term)	<p>Side effects generally happen within six weeks of receiving a vaccine dose. Long-term side effects are rare with the mRNA COVID-19 vaccines. There have been cases of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the tissue around the heart) reported after receiving the Pfizer vaccine, particularly in male adolescents and young adults:</p> <ul style="list-style-type: none"> • 12-15 years (70.7 cases per one million doses of Pfizer vaccine) • 16-17 years (105.9 cases per one million doses of Pfizer vaccine) • 18-24 years (52.4 cases per one million doses of Pfizer vaccine)
Effectiveness	~80% effective in people 6 months to 4 years of age

	<p>~ 60.1% effective in people 5 to 11 years of age</p> <p>~ 71.1% effective in people 12 to 15 years of age</p> <p>~ 62.8% effective in people 16 years of age and older</p>
Dosing	<p>Ages 6 months – 4 years:</p> <ul style="list-style-type: none"> • Requires 3 intramuscular injections • The initial 2 doses are administered three weeks apart followed by a third dose administered at least eight weeks after the second dose • The dose for people 6 months to 4 years of age is 3 micrograms, which is <i>less</i> than the dose for people 5 to 11 years of age (10 micrograms) and 12 years of age and older (30 micrograms) (<i>see question 6 below for more details</i>) <p>Ages 5 years – 11 years:</p> <ul style="list-style-type: none"> • Requires 2 intramuscular injections • The doses are administered approximately three weeks apart • The dose for people 5 to 11 years of age is 10 micrograms, which is <i>less</i> than the dose for people 12 years of age and older (30 micrograms) (<i>see question 6 below for more details</i>)
Age	<p>FDA-approved for individuals 16 and older</p> <p>FDA-authorized under EUA for individuals 6 months through 15 years of age</p>
Pregnancy and lactation	<p>COVID-19 vaccination is recommended for all people 12 and older, including those who are pregnant, breastfeeding, trying to get pregnant now, or might become pregnant in the future</p>

2. Was the vaccine rushed? What can you tell me about mRNA-developed vaccines?

The Pfizer vaccine was developed using mRNA technology. Even though these are the first vaccines released using this approach, this technology has been studied in research labs within the U.S. for more than three decades. Also, the vaccine process is happening faster because vaccine research and development, clinical trials, manufacturing, and plans for distribution are occurring at the same time. This method has eliminated delays that occur when the processes are carried out one after the other.

3. Do young children need to be vaccinated against COVID-19?

The CDC recommends children 6 months to 11 years of age receive the COVID-19 vaccine. Although COVID-19 is a mild illness for most children, some have developed a serious but rare complication of COVID-19 known as multisystem inflammatory syndrome (MIS-C). Children who have been diagnosed with MIS-C have exhibited long-term complications similar to those of adults infected with COVID-19 (persistent fatigue, muscle and joint pain, headache, insomnia, respiratory problems, and heart palpitations). Additionally, there is evidence that children over the age of 10 can spread the virus just as easily as infected adults. This means vaccinating younger children will also help control the spread of the virus.

4. Is the COVID-19 vaccine safe for children 6 months to 11 years of age? Will it affect my child’s growth?

Millions of people in the United States have received COVID-19 vaccines, and these vaccines have undergone and continue to undergo the most intensive safety monitoring in U.S. history. No serious safety concerns have been seen with follow up monitoring for people 6 months to 11 years of age. The ingredients of the COVID-19 vaccine begin to break down after about six hours and are completely gone in 48 hours. During this time, your child’s body will recognize the vaccine and start creating antibodies to it. These are the same kind of antibodies your child would make during a natural COVID-19 infection. Based on this information, it is not expected to affect your child’s growth, but it is expected to prepare your child’s immune system to fight the actual COVID-19 virus if he/she encounters it in the future.

5. Are the vaccine ingredients the same for children 6 months to 11 years of age as they are in the vaccine for people 12 older?

The mRNA ingredients are the same in the vaccine for children 6 months to 11 years of age and people 12 and older. The buffer formulation is different in the vaccine for children 6 months to 11 years of age. A buffer helps maintain a vaccine’s pH (a measure of how acidic or basic a solution is) and stability. The buffer in the vaccine for children 6 months to 11 years of age is called “Tris buffer” and is commonly used in a variety of other FDA-approved vaccines used in children. The new buffer improves the stability of the vaccine and does not affect outcomes dealing with effectiveness or safety.

6. Why is the COVID-19 vaccine dose for children 6 months to 4 years and 5 years to 11 years of age different from the dose for people 12 and older?

The dose of the vaccine does not depend on the size of the child but rather the child's immune response, which weakens with age. Younger children, such as those 6 months to 11 years of age, have a more robust immune response and are able to produce the same protection against COVID-19 with less vaccine.

7. If my child is about to turn 5 years old, should I wait to get him/her vaccinated with the larger dose?

It is recommended to get the COVID-19 vaccine as soon as possible since delaying vaccine administration puts the child at risk of catching the virus.

8. If my child is expected to turn 5 years old before the COVID-19 vaccine series for children 6 months to 4 years of age can be completed, should he/she receive the larger dose series of COVID-19 vaccine for children 5 years to 11 years of age?

If a child is expected to turn 5 years old before the COVID-19 vaccine series for children 6 months to 4 years can be completed, the child may receive either two doses of the larger dose of vaccine (10 micrograms) for children 5 years to 11 years of age or three doses of the smaller dose of vaccine (3 micrograms).

9. If my child is about to turn 12 years old, should I wait to get him/her vaccinated with the larger dose?

It is recommended to get the COVID-19 vaccine as soon as possible since delaying vaccine administration puts the child at risk of catching the virus.

10. If my child turns 12 years old before the second dose is due, should he/she receive the larger dose of COVID-19 vaccine?

If a child turns 12 years old in-between the time for dose 1 and dose 2 of the COVID-19 vaccine series, it is preferred that the child receives the larger dose of vaccine (30 micrograms) for dose 2. However, vaccination with the smaller dose of vaccine is also acceptable.

11. How do the side effects in children compare to the side effects in adults?

Overall, children experience fewer side effects from the COVID-19 vaccine. However, when children do have side effects, they're typically similar to the ones experienced by adults and usually occur after the second dose.

12. What is myocarditis and pericarditis? Should I be concerned about these if my child gets the COVID-19 vaccine?

Myocarditis is inflammation of the heart muscle, and pericarditis is inflammation of the tissue around the heart. These are rare conditions that have occurred following vaccination with the Pfizer COVID-19 vaccine, particularly following the second dose, with the observed risk highest in males 12 through 17. Myocarditis and pericarditis may also occur following natural infection with COVID-19. The FDA continues to monitor cases of myocarditis and pericarditis and believes the benefit of receiving the COVID-19 vaccine outweighs the risk of these conditions.

13. Is there a risk of infertility with the COVID-19 vaccine?

There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men. Additionally, hundreds of women who participated in the clinical trials subsequently became pregnant with no significant safety issues.

14. Should children with a history of multisystem inflammatory syndrome in children (MIS-C) receive the COVID-19 vaccine?

Currently, there is no data on the safety and efficacy of COVID-19 vaccines in people with a history of MIS-C. It is not known if people with a history of MIS-C are at risk of recurrence of the same immune response following reinfection with COVID or in response to the vaccine. A conversation with your health care provider may assist with decisions about receiving the COVID-19 vaccine. If someone has been diagnosed with MIS-C, they should consider delaying vaccination until they have recovered from their illness and for 90 days after the date of diagnosis of MIS-C.

VACCINE PROCESS

15. Is a single shot of the Pfizer vaccine still protective?

No, one or two follow-up injections is required depending on the individual's age.

16. When does my child receive the second dose?

The second dose is recommended three weeks after the first dose is administered. The second dose should be administered as close to the recommended interval as possible. However, if your child is not able to receive the second dose as recommended, it may be administered as soon as possible. It is not recommended to start the two-dose series over again.

17. When does my child (6 months to 4 years of age) receive the third dose?

The third dose is recommended eight weeks after the second dose is administered. The third dose should be administered as close to the recommended interval as possible. However, if your child is not able to receive the third dose as recommended, it may be administered as soon as possible. It is not recommended to start the three-dose series over again.

18. How will I be reminded of my child's next dose?

You will receive a reminder card after your child receives his/her first dose (make sure you get one before you leave the vaccination clinic!). We recommend that you take a picture of the reminder card as a back-up AND add the date to your calendar.

19. What happens if my child misses a shot?

Three shots are needed for children 6 months to 4 years of age. Two shots are needed for children 5 years to 11 years of age. If your child misses the recommended dose window, he/she should receive the follow-up dose(s) as soon as possible.

20. What is a supplemental dose? Does my child need to receive a supplemental dose?

A supplemental dose is given in addition to the first two doses of the Pfizer COVID-19 vaccine. This would count as a 3rd dose. A supplemental dose gives the body extra protection against the virus. However, not everyone needs the extra protection. At this time, it is authorized for children 5 to 11 years of age who have undergone solid organ transplant or who have similar medical conditions that may affect their response to the vaccine.

21. How do I show my child is eligible to get a supplemental dose?

You will be asked to sign a consent form. You do not need to complete a vaccine attestation form or have a physician's order to show eligibility.

22. When should my child get a supplemental dose if eligible?

The supplemental dose (3rd dose) should be given at least 28 days after receiving the 2nd dose of Pfizer COVID-19 vaccine in children 5 to 11 years of age who qualify for the supplemental dose.

23. Does it matter which vaccine my child gets as a supplemental dose?

Yes. Only the Pfizer COVID-19 vaccine is authorized as a supplemental dose in children 5-11 years of age.

24. Is the supplemental dose the same dosage as the normal Pfizer series?

Yes. The Pfizer supplemental dose is the same as the initial series.

25. What are the risks of getting a supplemental dose?

There is limited information about the risks of getting an additional dose of vaccine. So far, reactions reported after the 3rd vaccine were similar to that of the other vaccines: fatigue and pain at injection site were the most commonly reported side effects, and overall, most symptoms were mild to moderate.

26. What is a booster dose? Does my child need to receive a booster dose?

A booster dose is given when a patient's strong protection to the virus has decreased or gone away. An example of a vaccine that requires a "booster dose" is the tetanus shot, and that is because over time (10 years for the tetanus shot) a person's protection is expected to decrease. At this time, it is recommended for children 5 years and older to receive a booster dose of the COVID-19 vaccine.

IMMUNITY

27. How long does it take immunity to develop fully after vaccination?

The FDA considers an individual fully protected 14 days after the second dose of the Pfizer COVID-19 vaccine. That means it is possible a person could be infected with the virus that causes COVID-19 and get sick just before or just after vaccination. This is because the vaccine has not had enough time to provide protection.

28. If my child has already had COVID-19, how long does the immunity last?

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 (from having COVID-19) may not last very long.

COVID-19 TIMING

29. If my child has already had COVID-19 and recovered, do I still need to get my child vaccinated?

Yes. Since natural immunity from having COVID-19 may not last very long, you should still get your child the COVID-19 vaccine.

30. How long does my child need to wait between having COVID-19 and taking the COVID-19 vaccine to decrease the possibility of getting it again?

Your child should wait to be vaccinated until after he/she has completed his/her isolation period (at least 5 full days from the first day of symptom onset or the date of the day of his/her positive COVID-19 test). Additionally, you *may* consider delaying your child's next vaccine by 3 months from when his/her symptoms started or, if he/she had no symptoms, when he/she received a positive test.

31. If my child has other symptoms of being ill now, how long should I wait before getting my child the vaccine?

It is recommended to be symptom free before taking the COVID-19 vaccine.

32. How many days do I have to wait between having my child vaccinated with a routine vaccine and the COVID-19 vaccine?

COVID-19 vaccines and other vaccines may be administered without regard to timing. This includes simultaneous administration of the COVID-19 vaccine and other vaccines, including a flu vaccine, at the same visit.

33. My child has received the first dose of the Pfizer vaccine series and now has tested positive. Should my child go ahead and receive the second dose on schedule?

No, you need to reschedule your child's appointment for after his/her isolation period is complete (at least 5 full days from the first day of symptom onset). If asymptomatic, reschedule his/her appointment for at least 5 full days from the date of the day of his/her positive COVID-19 test.

34. Can my child take the vaccine if he/she has pre-existing conditions such as diabetes, cancer or hepatitis?

Yes.

MISCELLANEOUS

35. Can I give my child acetaminophen or ibuprofen before or at the time of the vaccine?

It is recommended NOT to use fever medications (acetaminophen, ibuprofen, etc.) before or at the time of vaccination. After the 15-30 minute vaccination observation period, if your child begins to experience mild-to-moderate injection-related effects (pain at site of injection, muscle/joint pain, moderate fever, etc.), you may give your child the medicine(s) you'd normally give for this type of symptom relief.