COVID-19 VACCINE

Questions & answers for the public and health-care practitioners

Vaccine Products

What vaccines are available and how do they work?
The first COVID-19 vaccines available in Alberta are the Pfizer and Moderna vaccines. Both are mRNA vaccines.

An mRNA vaccine is a new type of vaccine that prepares the body to defend and protect itself against infectious diseases – in this case, COVID-19. The mRNA vaccine teaches your body’s cells to make a viral protein that triggers the immune response. When a person is given the vaccine, their body’s cells will read the instructions from the mRNA and produce the harmless “spike protein” which is the same protein that is normally found on the surface of the COVID-19 virus, but not found in our bodies. The person’s immune system will then treat this spike protein as foreign and produce defenses to fight against it. These defenses are then ready to protect the person against the real COVID-19 virus.

Why does the mRNA vaccine need to be frozen?
The mRNA vaccine is stored in frozen or ultra-frozen temperatures because mRNA is more likely to break down above freezing temperatures. To ensure the vaccine will work the best when it is administered, the vaccine is stored frozen before ready to use. The manufacturers continue to study the stability of the vaccine in various storage conditions and the temperature guidelines for storage may change in the future.

Vaccine Effectiveness

How effective is the vaccine?
The initial Pfizer and Moderna COVID-19 vaccines available for use in Canada have been demonstrated to be over 90% effective in preventing COVID-19 disease in clinical trials.

What is the difference between vaccine efficacy and effectiveness?
‘Vaccine efficacy’ is the term used to describe the percentage reduction of disease in an immunized group of people compared to an unimmunized group in clinical trials where the study conditions are controlled. It does not describe whether an immunized person can still transmit the virus.

‘Vaccine effectiveness’ is the term used to describe how the vaccine works in the real world where conditions cannot be controlled, such as previous exposure to the virus, the immune status of the individual, and if people receive both doses that are required. Vaccine effectiveness will continue to be evaluated as the COVID-19 immunization program is rolled out.
The vaccines are reported to have different efficacy rates against COVID-19. Is a vaccine with a higher reported vaccine efficacy better than a vaccine with a lower efficacy?

It may seem that 90% is better than 80% when looking at vaccine efficacy, however, with vaccines it is not that simple. Efficacy does not mean effectiveness. Efficacy refers to the difference in infection rates between a group that got a vaccine, and a group that did not. If there’s no difference between the two groups, efficacy is zero. Differences in efficacy numbers may be because the vaccines were tested in different locations, at different phases of the pandemic, against different strains and over different schedules (e.g., one vs. two doses over different timeframes). What is important to know is the COVID-19 vaccines are demonstrating a reduction in hospitalizations, deaths and severe disease. Health Canada would not approve a vaccine if they determined it to be insufficient to protect against disease.

Will the vaccine work against the COVID-19 variant strains?

Mutations in the COVID-19 virus over time are expected, and can cause variant strains of COVID-19 to emerge. At this time, there are several variant strains circulating around the world, and vaccine manufacturers are conducting studies to determine whether current vaccines work against these variants. We are watching this information closely.

Pfizer has said its COVID-19 vaccine appears to work against the variants of the coronavirus discovered in the UK and South Africa.

Moderna has announced that its COVID-19 vaccine elicited virus-neutralizing antibodies in trial participants that work against the new coronavirus variants found in the UK and South Africa in the laboratory setting.

A two-dose regimen of the Pfizer and Moderna COVID-19 vaccine is expected to be protective against emerging strains detected to date. Both manufacturers continue to conduct further studies to learn more about this topic.

I have recovered from COVID-19, should I still be immunized?

Yes. The COVID-19 vaccine is recommended for those who have had and recovered from COVID-19 infection as it is unknown how long immunity may last after recovering from COVID-19.

Will the vaccine prevent me from getting COVID-19?

Yes. Vaccines that have been licensed in Canada are demonstrating a high efficacy in preventing COVID-19 disease. For example, the Pfizer and Moderna vaccines have been demonstrated to be over 90% effective. The vaccine is used both for preventing the occurrence of COVID-19 disease and diminishing the severity of the disease.

At this time, based on the evidence submitted to Health Canada, it remains unknown how long the protection will last. The manufacturers are following the participants of clinical trials to assess their protection over time. International jurisdictions, Health Canada and Alberta Health will evaluate the data and promptly update the product information about how long the protection lasts and whether there may be a need for additional doses of the vaccine.
Can immunized people spread the virus to others?
There is limited evidence on whether someone who received the vaccine is able or not able to spread the virus. This will be monitored as more people in the community receive the vaccine. Everyone must continue to follow public health measures, regardless of their COVID-19 immunization status, to protect themselves, their loved ones, as well as people and communities at risk of more severe disease or outcomes from COVID-19.

Can an immunized person get COVID-19?
The currently authorized COVID-19 vaccines have demonstrated safety and high efficacy (over 90%), against symptomatic laboratory-confirmed COVID-19 disease within one to two weeks after receiving the full two-dose series.

As the vaccines are not 100% effective, they may not work for a small percentage of recipients. A 90% vaccine efficacy suggests 10 in 100 immunized people is not protected, even after the two-dose immunization. In addition, people who are exposed to COVID-19 virus before their body mounts an adequate level of protection can also get infected. Vaccine effectiveness will continue to be evaluated as the COVID-19 immunization program is rolled out.

Can I test positive for COVID-19 due to the vaccine?
No. The mRNA vaccine does not contain any virus in it. It has only genetic instructions on how the cell can make one single coronavirus protein - spike protein. Therefore, this vaccine cannot make the virus and then lead to disease. Immunization will not result in a positive PCR test or a rapid molecular or antigen test.

Could the antibodies from the COVID-19 vaccine result in a false positive test result?
There are two kinds of tests currently available for COVID-19:
- A test for active infection (diagnostic) that tells you if you have a current COVID-19 infection. This is done using a swab from your nose or throat, or a saliva sample. These tests are expected to continue to perform accurately in immunized individuals.
- An antibody (serology) test tells you if, at some point, you were exposed to the virus and had a COVID-19 infection. These tests can also identify if a person was immunized. They are done on a blood sample and not used to diagnose a current COVID-19 infection.

When will I receive the second dose of mRNA vaccine?
The second dose of mRNA vaccines that are currently approved for use in Alberta can be administered between 21-28 days after the first dose. The time between doses can be extended up to 42 days for all populations except residents of long term care (LTC) and designated supportive living (DSL) sites.

As part of ongoing efforts to reduce community transmission of COVID-19, Alberta will be offering second doses of the COVID-19 vaccine within 42 days after the first dose. This aligns with the approach recommended by the National Advisory Committee on Immunization (NACI) and the World Health Organization statements on vaccines for COVID-19. This will allow as many Albertans as possible to receive the vaccine in the coming weeks.

If the second dose is not administered within Health Canada’s authorized dosing regimen, should I still receive that second dose?
Yes. If the second dose of a COVID-19 vaccine is delayed, the second dose should still be administered as soon as possible. A COVID-19 vaccine series does not need to be restarted.
How long after getting a vaccine will I be protected against COVID-19? How long does the protection last?

The first two vaccines available show protection starting 12-14 days after the first dose. High efficacy against symptomatic COVID-19 disease is achieved 1-2 weeks after the second dose.

At this time, based on the evidence submitted to Health Canada, it remains unknown how long the protection will last. Health Canada and Alberta Health will evaluate the data and promptly update the product information about how long the protection lasts and whether there may be a need for additional doses of the vaccine.

With everything we do not know about the COVID-19 vaccines, why should I be immunized?

To stop the spread of COVID-19, we all need to be immunized as soon as we are eligible to receive COVID-19 vaccine. The vaccines currently available in Canada protect against hospitalizations and deaths. Delaying or refusing immunization carries serious risks, including hospitalization, ICU admission, and death and may extend the need for public health measures to continue.

Health Canada has completed thorough reviews of the data from the clinical trials and of the manufacturing processes. This review process allowed Health Canada to confirm that there are no significant safety concerns and that the vaccines protect against disease. The review also determined that the benefits of the vaccines outweigh the risks, and that the vaccines are manufactured to high quality standards.

Vaccine Safety

How do we know the vaccine is safe when it was developed so quickly?

The production and approval of COVID-19 vaccines was not rushed. Instead, it was prioritized. Around the world, financial supports, open and transparent sharing of information amongst researchers, and adjustments in regulatory processes led to the relatively fast development of successful COVID-19 vaccines.

Usually Health Canada reviews vaccine submissions after all study results are available; this can take up to a year. An interim order approved by the federal Minister of Health provided the flexibility to expedite the review and authorization of vaccines. This allowed manufacturers to submit study data to Health Canada as it became available, shortening the time needed for the review process.

Review of the data from the clinical trials and of the manufacturing processes allows Health Canada to confirm that there are no significant safety concerns and that the vaccine will protect against disease. The review also assesses whether the benefits of the vaccine outweigh the risks, and whether the vaccine is manufactured to high quality standards. In order to support the independent review process for COVID-19 vaccines, Health Canada, dedicated more resources to the review process than usual and global partnerships have expedited the process.

Can I get the COVID-19 vaccine if I have allergies or had a reaction to a vaccine in the past?

Individuals who have had a serious allergic reaction to another vaccine, drug or food should talk to their health care provider before receiving the vaccine. There are two reasons you cannot get a COVID-19 vaccine (also known as a contraindication):

- Known severe hypersensitivity to any component of the vaccine (like polyethylene glycol - PEG - which is common in laxatives).
• Anaphylaxis to a previous dose of COVID-19 mRNA vaccine.

Most people with allergies (e.g., to food, medication or substances not included in the vaccine) or those who have had a previous adverse reaction following immunization will be able to receive the COVID-19 vaccine.

What are the expected side effects from the vaccine?

Common short-term side effects of the COVID-19 vaccine include:
• Pain at the injection site lasting one to two days
• Fatigue, headache, muscle pain, chills, fever, and joint pain lasting approximately one day

These short-term mild or moderate side effects are very common to many vaccines and may affect more than 10 per cent of people. Some side effects, including fever, are more frequent after the second dose.

It is important to note that the common short-term side effects are not necessarily bad. Your immune system is functioning and building the necessary protections for you against this virus.

Over-the-counter pain or fever medication may be considered for the management of short-term side effects if they occur after immunization.

No serious safety concerns have been identified in clinical trials.

Can an mRNA vaccine affect my DNA?

No. mRNA vaccines do not affect, interact with or alter your DNA in any way. The mRNA in the vaccine is broken down quickly by normal cellular processes after the harmless genetic instructions have been used to make the spike protein. In a cell, DNA is in the nucleolus, and the mRNA works outside of the nucleolus in the cytoplasm. It is not possible for the mRNA to enter the nucleolus, as this process would require many enzymes that the cell or vaccine does not have.

Can I get COVID-19 from an mRNA vaccine?

No. The mRNA vaccine does not contain any virus in it. It has only genetic instructions on how the cell can make one single coronavirus protein (the spike protein). It takes several different coronavirus proteins and other genetic materials to make a coronavirus. Therefore, this vaccine cannot make the virus and then lead to disease. The mRNA does not become a permanent part of your body, as it is naturally broken down after use.

Is it recommended to receive the vaccine while pregnant?

The safety and efficacy of Pfizer BioNTech and the Moderna COVID-19 vaccines in pregnant women has not yet been established. Pregnant individuals were not included in large enough numbers in the initial trials of the COVID-19 vaccines to provide solid information.

COVID-19 vaccines may be offered to individuals in the eligible group who are pregnant if a risk assessment with their doctors determines that the benefits outweigh the potential risks for the woman and fetus. The individual may also be immunized without consulting their doctor following their acknowledgment of the absence of evidence on the use of COVID-19 vaccine in this population.
Is it recommended to receive the vaccine while breastfeeding?

It is unknown whether Pfizer BioNTech and the Moderna COVID-19 vaccines can be present in human milk. A risk to the newborns/infants cannot be determined because there is an absence of evidence on the use of COVID-19 vaccines in breast feeding individuals. These groups were not included in large enough numbers in the initial trials to provide solid information.

COVID-19 vaccines may be offered to individuals in the eligible group who are breastfeeding if a risk assessment with their doctors determines that the benefits outweigh the potential risks for the mother and infant. The individual may also be immunized without consulting their doctor following their acknowledgment of the absence of evidence on the use of COVID-19 vaccine in this population.

Is it recommended to receive the vaccine if I am immunocompromised or have an autoimmune disorder?

At this time, there is an absence of evidence on the use of COVID-19 vaccine in immunocompromised individuals and those with auto-immune disorders. These groups were not included in large enough numbers in the initial trials to provide solid information.

COVID-19 vaccines may be offered to individuals in the eligible group who are immunosuppressed due to disease or treatment and those with an auto-immune disorder if a risk assessment with their doctors determines that the benefits outweigh the potential risks.

Potential risks include:

- Immunocompromised persons may have a diminished immune response to the vaccine
- There is a theoretical concern that mRNA vaccine may elicit an inflammatory response and possibly exacerbate existing autoimmune diseases. However, current applications of mRNA technology for COVID-19 vaccines have been optimized to reduce this risk.

However, with the exception Solid Organ Transplant (SOT) and Haematopoietic Stem Cell Transplant (HSCT) clients, the individual may also be immunized without consulting their doctors following their acknowledgment of the risks mentioned above and the absence of evidence on the use of COVID-19 vaccine in these populations.

Additional resources:

- [Advisory Committee on Immunization Practices (ACIP) interim recommendations for the use of Pfizer-BioNTech and Moderna COVID-19 vaccines](https://www.alberta.ca/acip).

Does Alberta Health track adverse events following immunization?

Alberta has a central reporting system for reporting adverse reactions following immunization (AEFIs) that allows Alberta Health Services and Alberta Health to rapidly assess any potential risks and take immediate action when necessary.

Active surveillance is another component of tracking AEFIs that involves proactively collecting information about adverse events from vaccine recipients. Albertans who receive COVID-19 vaccine may be asked to take part in a surveillance study that is looking to determine how often adverse events occur after receiving a COVID-19 vaccine. For more information visit [https://canvas-covid.ca/](https://canvas-covid.ca/).

Alberta Health will not hesitate to take action if any safety concerns are identified. Emerging information will be communicated promptly to Canadians and Albertans if needed, such as new information on risks, or changes to...
Who can be immunized. The total number of AEFIs reported to-date can be found here: https://www.alberta.ca/covid19-vaccine.aspx.

What ingredients are in the vaccine?

The two vaccines available for use contain ingredients that help the vaccine work in the body and protect the vaccine while frozen. The vaccines do not contain antibiotics or preservatives.

One non-medicinal ingredient in both the Moderna and Pfizer BioNTech vaccines may cause a hypersensitivity reaction. This ingredient is polyethylene glycol (PEG). This ingredient is also found in cosmetics, cough syrup, skin products and some food and drinks. When you are being immunized or offering immunization, potential allergic reactions will be discussed.

Additional ingredient information:

<table>
<thead>
<tr>
<th>Pfizer BioNTech</th>
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<tbody>
<tr>
<td>Lipid nanoparticles (these help the mRNA enter the cell)</td>
</tr>
<tr>
<td>o ALC-0315 = (4-hydroxybutyl) azanediylibis(hexane-6,1-diyl)bis(2-hexyldecanoate)</td>
</tr>
<tr>
<td>o ALC-0159 = 2-[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide</td>
</tr>
<tr>
<td>Other Lipids: (provide structural integrity of the nanoparticles)</td>
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<tr>
<td>o 1,2-distearoyl-sn-glycerol-3-phosphocholine</td>
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<tr>
<td>o cholesterol</td>
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<tr>
<td>Salts: (these help maintain the PH of the vaccine)</td>
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<tr>
<td>o bibasic sodium phosphate dihydrate</td>
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<tr>
<td>o monobasic potassium phosphate</td>
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<tr>
<td>o potassium chloride</td>
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<tr>
<td>o sodium chloride</td>
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<tr>
<td>Other:</td>
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<tr>
<td>o sucrose (this protects the nanoparticles when frozen)</td>
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<td>o water for injection</td>
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<table>
<thead>
<tr>
<th>Moderna</th>
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<tr>
<td>Lipid nanoparticles (these help the mRNA enter the cell):</td>
</tr>
<tr>
<td>o PEG2000-DMG LSM-102, 1,2-dimyrstoyl-rac-glycerol-3-methoxypolyethylene glycol</td>
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<tr>
<td>o 1,2-distearoyl-sn-glycerol-3-phosphocholine (DSPC))</td>
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<tr>
<td>o Cholesterol</td>
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<tr>
<td>o Lipid SM-102</td>
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<tr>
<td>pH stabilizers (help maintain the PH of the vaccine)</td>
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<td>o acetic acid</td>
</tr>
<tr>
<td>o sodium acetate</td>
</tr>
<tr>
<td>o tromethamine</td>
</tr>
<tr>
<td>o tromethamine hydrochloride</td>
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<tr>
<td>Other:</td>
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sucrose (protects the nanoparticles when frozen)

Eligible Populations

Will there be priority groups that receive the vaccine first?

Yes. Alberta receives all vaccines, including the COVID-19 vaccine, through the Government of Canada. The federal government determines on a per-capita basis how many vaccines Alberta receives, and advises us when we expect to receive the vaccines. Every province in the country is in the same situation and experiencing similar challenges regarding limited supply of the vaccines from the federal government at this time.

As these vaccines are in very limited supply, our government is implementing a phased approach to target key populations in the earlier phases of the COVID-19 Immunization Program. The precise timeframes depend on the availability of the vaccine. To determine which groups are included in each phase of the plan, we consider the recommendations from the National Advisory Committee on Immunization and Alberta’s Advisory Committee on Immunization, and focus on Albertans who are at increased risk of severe COVID-19 disease outcomes or who are at increased risk of transmitting infection to those who are most vulnerable.

We recognize and understand that many people want to be immunized immediately. We are moving quickly to make the doses we receive available to those who are eligible, and we will continue to do so going forward. However, it will take time to receive enough COVID-19 vaccine from the federal government to offer immunization to everyone who wants it. We are asking Albertans to please be patient while we all wait for enough vaccine for each of our turns, and to be supportive of those who are in the initial groups that are eligible to be immunized.

More information on vaccine distribution can be found at alberta.ca/covid19-vaccine.aspx. This site will continue to be updated as additional information becomes available.

Vaccine Access

How will I know when I am eligible for vaccine and where to access it?

The Government of Alberta is taking a phased approach to who receives the COVID-19 vaccine first to protect those at high risk of severe illness and death from COVID-19, and health care workers essential to maintaining the pandemic response.

Over time all Albertans, for whom the vaccine is licensed, will be eligible for COVID-19 vaccine. The COVID-19 immunization plan will expand once vaccine supplies increase and are more reliable.

Eligible groups and where to access the vaccine will be communicated using public announcements, the Government of Alberta website or dedicated phone services (i.e. 2-11), Alberta Health Services immunization webpage, COVID-19 updates by Dr. Hinshaw, news media and social media.

When can my child receive the vaccine?

The safety and efficacy of the COVID-19 vaccine in children under 16 years of age has not yet been established. Manufacturers are conducting clinical trials in children, which will help inform recommendations about use in children once more data become available.
Currently, the Pfizer vaccine is licensed for individuals 16 years and older and the Moderna vaccine is licensed for individuals 18 years of age and older. It is too soon to know what ages future vaccine will be licensed for.

When vaccine supply is sufficient, NACI recommends that the Pfizer vaccine may be considered for youth 12 to 15 years of age who are at very high risk of severe outcomes of COVID-19 and are at increased risk of exposure.

The immunization provider must seek informed consent with the individual and the parent or guardian, including information about the lack of evidence on the use of COVID-19 vaccines for children.

**Are international students eligible to receive the vaccine?**

Not at this time. Students are not likely to be eligible until Phase 3, when immunizations are rolled out to the general Alberta population. Subject to vaccine availability, it is anticipated that Phase 3 will begin by the fall of 2021. Once a universal COVID-19 immunization program is in place, individuals who are living, working, or going to school in Alberta will be eligible for the COVID-19 vaccine free of charge.

**Is anyone ineligible for COVID-19 immunization? Who should not get the COVID-19 vaccine?**

The Pfizer vaccine is licensed for anyone 16 years of age and older and Moderna vaccine is licensed for anyone 18 years of age and older. It will be offered to anyone in these age groups.

Anybody with a current infection of COVID-19 should wait to be immunized until the isolating period is over, meaning 10 days from the start of symptoms or until symptoms have improved and they have been non-feverish for at least 24 hours without the use of fever-reducing medications, whichever is longer.

Canadians who receive any other vaccine, including their influenza immunization, should wait at least 14 days before getting immunized against COVID-19.

The following groups should not receive the COVID-19 vaccine:

- people who have had an allergic reaction (anaphylaxis) to a previous dose of the vaccine.
- people who have severe hypersensitivity to any component of the vaccine.

There is no data about the use of COVID-19 vaccines in individuals who are immunocompromised, pregnant or breastfeeding, however, with the exception of Solid Organ Transplant (SOT) and Haematopoietic Stem Cell Transplant (HSCT) clients, a COVID-19 immunization can be offered without a risk assessment from their doctor, following an acknowledgment from the individual requesting immunization that there is no evidence on the use of COVID-19 vaccine in these populations.

NACI recommends additional research and surveillance of COVID-19 immunization, particularly for populations not currently included in clinical trials (e.g., people who are pregnant, breastfeeding, or immunocompromised, and seniors living in congregate care settings).

**Will COVID-19 vaccine be mandatory in Alberta?**

Immunization will not be mandatory in Alberta, including the COVID-19 vaccine, but it is highly encouraged and recommended. The Government of Alberta recognizes immunization as one of the most important ways to protect and promote the health of Albertans. When immunization schedules are followed, vaccines are highly effective at preventing disease in those who receive them. We choose an approach that is collaborative rather than mandatory because we want to encourage conversations on the benefits of immunization, while still respecting Albertans’ right to make informed decisions about their own health.
Can my employer require me to be immunized?

Yes, private employers can require employees to be immunized as part of their company policy or as a required precondition of employment.

Some employers have occupational health and safety policies that require some immunizations as a condition of employment to protect themselves and others around them. Employers may ask that employees present their immunization records, to have them on file to determine who is at risk of infection in the event of an outbreak or if an individual is exposed to someone with a communicable disease. It is recommended that employees speak with their employer about their specific occupational health and safety immunization policy.

Will I be able to receive vaccine from my physician or community pharmacy?

Not at this time. Currently, the COVID-19 vaccine supply is very limited and the current vaccines have unique storage and handling requirements that prevent widespread distribution to multiple providers. Once there is a vaccine supply to support wide spread distribution to multiple providers such as physicians or community pharmacists, those health practitioners who can comply with the Immunization Regulation and who have the infrastructure in place could participate in the COVID-19 Immunization Program.

What will clinics do to protect clients and healthcare workers from COVID-19 during immunization?

All healthcare providers follow guidelines to protect you and themselves from COVID-19. This includes:
- Screening clients and staff for illness and exposure to COVID-19;
- Setting up the clinic and using an appointment-based system to make sure that everyone can keep physical distance;
- Enhanced environmental cleaning;
- Using personal protective equipment (PPE) such as masks; and
- Requiring hand washing or the use of hand sanitizer when clients arrive.

Will I have to pay for the vaccine? If I don’t want to wait to be included in the populations being offered the vaccine, can I buy the vaccine privately?

No. The vaccine will be available to eligible Albertans at no additional charge. There is no vaccine available for private purchase at this time.

Will I get to choose which vaccine I receive?

No. To stop the spread of COVID-19, we all need to be immunized as soon as we are eligible to receive COVID-19 vaccine which means accepting the first vaccine offered. Health Canada has completed thorough reviews of the data from the clinical trials and of the manufacturing processes.

This review process allowed Health Canada to confirm that there are no significant safety concerns and that the vaccines protect against disease. Health Canada would not approve a vaccine if they determined the efficacy to be insufficient to protect against disease. If different vaccines are offered to different groups in the future, the decision to offer one product over another is deliberate, and is made based on the scientific evidence and supply available at the time.
Post-Immunization

Will I have to continue to follow public health measures if I get immunized?

Yes. Based on recommendations from the National Advisory Committee on Immunization (NACI), Alberta Health advises that all individuals, including those immunized with COVID-19 vaccine, should continue to follow public health measures for prevention and control of COVID-19 infection and transmission. This includes masking when in public, maintaining physical distancing, practicing diligent hand hygiene, and staying home when sick.

The Pfizer BioNTech and Moderna COVID-19 vaccines require two doses, three to six weeks apart. It takes time for your body to build up an immune response after receiving the vaccine. High efficacy against symptomatic COVID-19 disease is achieved 1-2 weeks after the second dose.

Currently, there is little evidence on:
- How effective these vaccines are in the real world;
- How long these vaccines will offer protection from the virus; or
- How effective the COVID-19 vaccines are in preventing asymptomatic infections and reducing transmission to others.

Health Canada and Alberta Health continue to monitor the emerging evidence on vaccine effectiveness and will provide updates when possible.

Why should I get immunized if I am still expected to follow public health measures after I receive the vaccine?

Vaccines are only one part of the effort against COVID-19. We do not yet know if immunized people can still carry and pass the virus to others that are not immunized, how effective the vaccines are in the real world and against variants, or how long immunity lasts.

Research into these questions is ongoing, and we will provide updates to these questions. In the meantime, we all should continue to follow COVID-19 public health guidelines.

Will I have to quarantine if I received the vaccine and then am a close contact of someone who was positive for COVID-19?

Yes, continue to follow all public health measures, including quarantining if you are informed that you are a close contact of a COVID-19 case for the reasons stated above.

Will I have to quarantine if I received the vaccine and am returning to Canada from an international destination?

Yes, continue to follow all public health measures, including all federal and provincial quarantine requirements.

If I am immunized outside of Canada, do I still need a negative test to return to Canada? Quarantine in a Government of Canada-approved hotel? Take a COVID-19 molecular test on arrival?

Yes, regardless of immunization status, travelers must present proof of a negative COVID-19 test result (either paper or electronic) to an airline prior to boarding a flight to Canada. Travelers must also reserve a room in a Government of Canada-approved isolation hotel, and must take a COVID-19 molecular test on arrival. For more information see the Government of Canada website.
What do I do if I experience the expected reactions that are similar to the symptoms of COVID-19 that require isolation?

Individuals who receive the COVID-19 vaccine may experience some side effects. These reactions are most often mild, develop within 24 hours, and could last 24 to 48 hours. Many of the reactions that occur are similar to the symptoms of COVID-19 infection such as:

- fever and/or chills,
- feeling tired,
- headache or body aches,
- nausea

Individuals should monitor themselves for these symptoms. Individuals who develop the above symptoms should stay home. If the symptoms develop within 24 hours of receiving the COVID-19 vaccine and resolve within 48 hours after starting, the individual can return to normal activities, unless they have been instructed to quarantine or isolate for other reasons by Alberta Health Services.

If symptoms persist longer than 48 hours and are not related to a pre-existing illness or health condition, individuals must continue to stay home and contact Health Link at 811 or complete the online COVID-19 online self-assessment tool for testing.

If testing is not done, adults with fever, cough, runny nose, sore throat or shortness of breath are to remain in isolation at home and stay away from others for 10 days, or until symptoms improve and they have been without a fever for at least 24 hours without the use of fever-reducing medications, whichever is longer. Individuals with any other symptoms on the COVID-19 symptom list should remain home until symptoms resolve.

For Health-care Practitioners

How do I have a positive conversation with my patient/client who may have concerns about receiving the COVID-19 vaccine?

Be open-minded, respectful and empathetic. Establish an environment where the patient/client can freely discuss their concerns and ask questions about immunization without feeling judged. Identify and understand the patient/client’s concerns by actively listening, repackaging their statements back to them and asking open-ended questions. You can then provide tailored information related to the concerns or misconceptions they might have. Trying to convince them by simply providing the facts about immunization may backfire and make the patient/client even more hesitant.

For more information see Motivational interviewing: A powerful tool to address vaccine hesitancy.

I am a student completing a clinical placement, am I eligible for vaccine?

No. While students are key to our future success they will not be included in with the HCWs currently working in the Phase 1 care areas. This should not be interpreted as a value judgement on the role of students but rather that students are not considered part of the critical workforce in the pandemic context.

Once students become eligible for vaccine, more information will be provided to the educational institutions.
Will healthcare workers who are not immunized be excluded from work if they do not get immunized or if there is a COVID-19 outbreak in the workplace?

Immunization is voluntary for all Albertans. There are many reasons a person may not be immunized for COVID-19. For example, individuals may be waiting for their scheduled appointment time to receive the vaccine, may have declined the vaccine, or the vaccine may be contraindicated or there are precautions to consider (e.g., pregnancy, allergy to components of the vaccine).

Although current outbreak management guidelines from Alberta Health Services indicate that health care workers who are not immunized against influenza need to either take influenza antivirals or be excluded from work when there is an outbreak in the facility. Currently, there are no antivirals recommended for COVID-19.

At this time, exclusion of workers who are not immunized against COVID-19 is not required due to the measures already in place to prevent transmission. These measures include active and passive health assessment screening, staying home when sick, continuous masking, hand hygiene, contact and droplet precautions with appropriate Personal Protective Equipment. These measures must be maintained as there is currently limited evidence on the duration of protection of COVID-19 vaccines and the effectiveness of these vaccines in preventing asymptomatic infection and reducing transmission of other strains of the virus.

Resources to help health practitioners with conversations about COVID-19 vaccine:

Websites:
19 to Zero
COVID-19: How vaccines are developed, Government of Canada.
Vaccine development and approval in Canada, Government of Canada.
Immunize Canada
CANVax

Social media:
http://linkedin.com/company/19tozero
https://twitter.com/19toZero
https://www.facebook.com/19tozero
https://www.instagram.com/covidisabear/
@covidvaccinefacts (Instagram)