

The Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) have authorized and recommended the Pfizer COVID-19 vaccine for use in children ages 5-11 and adolescents and teens 12-17. This marks a big development in COVID protection, but it also raises questions for many parents. Following are some answers from Intermountain Healthcare and Primary Children's Hospital.

FREQUENTLY ASKED QUESTIONS (FAQS)

Why does my child need a vaccine?

The biggest benefit of your child getting a vaccine is to protect them from the disease. Other benefits include:

- Participating safely in school, sports, activities, and play dates with friends
- Traveling with family
- Protecting others around them, like grandparents, infants, and toddlers
- Preventing the spread of COVID-19 in the community

Children have a lower risk of getting severely sick from COVID-19. However, lower risk does not mean no risk. In Utah in 2021, 600 children ages 5-11 were hospitalized with severe symptoms. Two died. More than 100 children developed Multisystem Inflammatory Syndrome in Children (MIS-C), which can cause dangerous inflammation of the heart, lungs, kidneys, brain, skin, eyes, and gastrointestinal organs. Some children who get COVID will have symptoms that last for 12 weeks or longer after the infection. This is called **Long-COVID**. Symptoms of long-COVID include fatigue (extreme tiredness), muscle and joint pain, sleeplessness, headache, difficulty concentrating, and uneven heartbeat for extended periods of time.

Is the Pfizer vaccine effective for children?

Yes. Research shows the vaccine is 90.7% effective. In other words, kids ages 5-11 who are vaccinated with two doses of the vaccine are 10 times less likely to get infected than kids who have not been vaccinated. Having a vaccine approved for children ages 5 and up is great news. It's what we need to protect kids, let them get back to normal lives, and get ahead of the pandemic.

How many Pfizer doses should a child get to be fully immunized?

Children 5-11 should get two doses of the Pfizer vaccine, at least three weeks apart.

Is it safe?

Yes. There have been no serious reactions reported among children ages 5-11 in testing and trials. Serious reactions or complications – if they happen at all – usually show up in the first couple weeks after vaccination. With almost a year of history with these vaccines being given to millions of individuals, we have a good understanding of their safety profile, including rare problems. The risk of getting the virus and having complications from the virus is much higher.

What are the side effects?

Your child may have redness and soreness at the injection site. They may also have other mild symptoms such as fatigue, fever, chills, or body aches. These symptoms are a sign that your child's immune (disease-fighting) system is

responding well to the vaccine. You may treat these symptoms with acetaminophen [ah-see-tuh-MIN-eh-fen] (Tylenol or other brands) or ibuprofen [eye-byoo-PRO-fen] (Motrin, Advil, or other brands) to relieve the symptoms.

No cases of severe allergic reactions or heart problems were reported in the 5-11 age group during the trial period.

This doesn't mean there won't be some very, very rare complications that are detected after several million children are vaccinated. The United States has extensive surveillance for rare complications so we can continue to watch and learn in real time.

Besides sore arms and fatigue, what should we watch for after the vaccine?

Swelling of the lymph nodes, particularly in the armpit or neck, can occur. This may last for a few days but is usually not a problem. If that area is very red or swollen, or if the nodes are bothersome, you should probably have a doctor look at it. Some people have had rashes, which go away. If there are any questions about the severity of the side effects, please talk to your child's healthcare provider.

When and where can children get the vaccine?

COVID vaccines are available to pediatric patients ages 5-11 in select Intermountain Medical Group clinics as well as Primary Children's Hospital's Community Pharmacy and at the hospital's Shot Spot walk-in clinic at its Eccles Outpatient Building (first floor). Access Intermountain pediatric vaccine locations at:

<https://intermountainhealthcare.org/Health-Wellness-Promotion/Vaccines/COVID/> (also see on page 4).

You can also find other vaccine locations on the [vaccines.gov](https://www.vaccines.gov) website.

What if my child has a medical condition?

It is important that children who have a medical condition (cancer, diabetes, obesity, lung or heart disease, organ transplant, etc.) get the vaccine. This is because they are more likely to develop severe illness if they get COVID-19. Children with medical conditions are not more likely to have a severe reaction to the vaccine. However, for some of them, the "immunity boost" from the vaccine may not be as strong as it would be in a child with a healthy immune system. (This is why we need the majority of people in our communities to be vaccinated—to create a protective barrier around those with weaker immune systems.)

Talk with your child's healthcare provider to understand how best to protect your child, even after vaccination.

Will my child need to wear a mask if they are fully vaccinated?

Yes, for now. Until COVID-19 transmission rates go down and vaccination rates go up, there's still a chance a child can become infected. Remember, the vaccine is exceptionally good at preventing serious illness and hospitalization, but a mild case is still possible. People with mild cases can still spread the disease.

What else can I do to protect my child?

In addition to getting your child vaccinated, encourage family members and others who are in close contact to be fully vaccinated. Other protective measures such as masks, frequent hand washing, and avoiding crowds of unvaccinated people add to their protection.

What are some common myths and disinformation about the vaccine?

There is a lot of false information about the vaccine on social media. Here is some information on those common myths and stories:

- **Heart Problems.** This is not a myth, but the risk may be exaggerated. There is an increased risk of **myocarditis** [my-oh-car-DIE-tiss] (inflammation of the heart muscle) and **pericarditis** [pear-ee-car-DIE-tiss] (inflammation of tissue surrounding the heart) after vaccination with the Pfizer vaccine. These complications are rare. They happen most often among males age 16-25 after getting their second dose. Most patients who received care for myocarditis or pericarditis responded well to medicine and rest and felt better quickly. The risk of developing

similar heart conditions from getting COVID is much higher than from the rare vaccine reaction. Studies show that the benefits of the vaccine outweigh its risks in children 5-11 years old.

- **Allergies.** Some parents worry that their children may have an allergic reaction to the vaccine. Most children have received many vaccines by the time they turn 5. Families will probably know by then if their child is likely to have a serious reaction to a vaccine.
- **Infertility.** There is no evidence that the vaccines cause problems with fertility. The idea that the vaccine causes infertility is a myth based on misinformation circulated when the COVID-19 vaccines were first given and has since been disproven.
- **Pregnancy.** COVID-19 vaccines are safe and recommended for those who are pregnant or breastfeeding. Getting COVID-19 itself increases the risk of having a preterm (early) birth.
- **Puberty.** There is nothing in the vaccine that can affect your child's hormones, brains, or puberty.

How was the vaccine tested in children and adolescents?

Pfizer started testing the vaccine in children and adolescents once it became clear that the vaccines were safe and effective for adults. Of the children who were tested, some got two doses of the vaccine and others got a placebo that did not include the vaccine. Blood samples were taken before and after they got the vaccine. The children were followed very closely for 2 to 6 months. The results of the study showed that the vaccine is 90.7% effective. In other words, kids ages 5-11 who are vaccinated with two doses of the vaccine are 10 times less likely to get infected than kids who have not been vaccinated.

The vaccine was authorized for emergency use. Does that mean it skipped the normal safety reviews?

No. The studies that have been done for safety and effectiveness are very similar to what is done outside of an emergency situation and in non-pandemic times. The COVID-19 vaccine studies involved the same number of participants who would have been studied in ordinary vaccine development. One big reason the vaccine became available so quickly is the FDA was able to speed up processes and waiting periods between phases that usually slow down drug approvals in normal times.

As of October 2021, more than 418 million doses of the COVID vaccines have been given in the United States, so we have a rich amount of data on safety and effectiveness. We're not looking at a brand-new product or one that was rushed.

Does the vaccine protect against variants of the virus?

Over time, some viruses can change how they infect humans. These "changed" viruses are called **variants**. The Pfizer vaccine is shown to protect against known COVID-19 variants. This is important because natural immunity from an older variant of the virus does not provide as much protection against new variants.

Do children spread COVID-19?

Yes. Children play a big role in community spread. Current trends show that when there are high case counts in schools, higher rates in the rest of the population show up 1 or 2 weeks later. Children and teenagers often spend time in groups. This means they are more likely to spread an infection to many people at once.

Can my child get the COVID-19 vaccine when they get other needed vaccines?

Yes. Children between ages 5 and 17 need several vaccinations, including diphtheria, tetanus, whooping cough, polio, measles, chickenpox, flu, HPV and more. Those vaccines can be safely given together.

How much does the vaccine cost?

Nothing. Intermountain will bill a patient's insurance for the administration of the vaccine to cover the costs of the medical professional and logistics of providing the vaccine. For uninsured patients, the cost is billed to the Health Resources and Services Administration's Provider Relief Fund. The vaccine itself (the syringe contents) is funded by

U.S. taxpayer dollars and will be provided at no cost to the person getting vaccinated.

What if I still have concerns about my child being vaccinated?

It's very important for parents and families to speak to their child's pediatrician, family doctor, specialist, or healthcare team and get their questions answered.

Should my child wait a while, until there are more studies available?

There's no good reason to wait, given the impact of COVID-19 on children in Utah. The most important thing is for people to talk to their healthcare team about the safety of the vaccine, its effectiveness, and what it means for young people. After that, the best move is to get your children vaccinated soon so that they can stay in school and keep doing the things they love.

LOCATIONS OFFERING THE COVID-19 VACCINE FOR AGES 5+

Call to schedule

Clinics

Pfizer (Ages 5 and older) - Requires 2 shots, 21 days apart. Available at:

- Intermountain Alta View Clinic Pediatrics
- Intermountain Bountiful Clinic
- Intermountain Budge Clinic Family Medicine
- Intermountain Budge Clinic Pediatrics
- Intermountain Budge Clinic Internal Medicine
- Intermountain Canyon View Clinic
- Intermountain Central Orem Clinic Pediatrics
- Intermountain Cottonwood Clinic Family Medicine
- Intermountain Cottonwood Clinic Internal Medicine
- Intermountain Draper Clinic
- Intermountain Ephraim Clinic
- Intermountain Fillmore Clinic
- Intermountain Garfield Memorial Clinic
- Intermountain Heber Valley Clinic
- Intermountain Hillcrest Pediatrics
- Intermountain Holladay Pediatrics
- Intermountain Hurricane Valley Clinic
- Intermountain Layton Clinic
- Intermountain Lehi Clinic
- Intermountain Liberty Clinic
- Intermountain Logan Clinic
- Intermountain McKay Bee Porter Clinic
- Intermountain Memorial Clinic Internal Medicine
- Intermountain Memorial Clinic Pediatrics
- Intermountain Moroni Clinic
- Intermountain Mt. Pleasant Clinic
- Intermountain Northern Utah Pediatrics - Layton
- Intermountain Northern Utah Pediatrics - Ogden
- Intermountain North Cache Valley Clinic
- Intermountain North Valley Pediatrics
- Intermountain Redrock Pediatrics
- Intermountain River Road Clinic Family Medicine

- Intermountain Rose Canyon Clinic
- Intermountain Rose Park Clinic
- Intermountain Round Valley Family Medicine
- Intermountain Roy Clinic
- Intermountain Salt Lake Bryner Pediatrics
- Intermountain Sevier Valley Clinic
- Intermountain South Cache Valley Clinic
- Intermountain Southridge Clinic Pediatrics
- Intermountain Springville Clinic
- Intermountain Sunset Clinic Family Medicine
- Intermountain Sunset Clinic Pediatrics
- Intermountain Syracuse Clinic
- Intermountain Taylorsville Clinic
- Intermountain Utah Valley Family Medicine
- Intermountain West Jordan Clinic
- Intermountain West Valley Clinic
- Intermountain White Sage Clinic

Hospital

- Intermountain Primary Children's Hospital Community Pharmacy (call to schedule)
- Intermountain Primary Children's Hospital Eccles Outpatient Building – Shot Spot (first floor, walk-in)