#### **COVID-19 Vaccine Summary Chart**



#### **Quick Links**

- CDC: Frequently Asked Questions about COVID-19 Vaccination
- CDC: <u>Understanding and Explaining Viral Vector</u> <u>COVID-19 Vaccines</u>
- FDA: COVID-19 Vaccines

- CDC: V-safe After Vaccination Health Checker
- CDC: <u>VaxText<sup>SM</sup> COVID-19 Vaccination Second-Dose Reminder</u>
- USP: <u>COVID-19 Vaccine Handling: Operational Considerations</u> for Healthcare <u>Practitioners</u>

This chart covers information for the adult-indicated Pfizer-BioNTech vaccine only. The Pfizer-BioNTech COVID-19 vaccine is now recommended for children ages 5–11 years old. Children require a smaller dose and therefore, providers must use the pediatric-indicated Pfizer-BioNTech COVID-19 vaccine to vaccinate this population. For information about the pediatric-indicated vaccine, reference APhA's "COVID-19 Vaccination in Adolescents and Children" resource in the COVID-19 Resources: Know the Facts library.

Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)
FDA Approval	<ul><li>Issued August 23, 2021</li><li>For use in adults ages 16 years and older</li></ul>		
Prescribing Information	Comirnaty Package Insert		
Emergency Use Authorization	Issued December 11, 2020  Revised May 10, 2021  • For use in persons ages 12-15 years old  Revised October 29, 2021  • For use in persons ages 5-11 years old  (not detailed in this chart)	<u>Issued December 18, 2020</u>	Issued February 27, 2021
Fact sheet	<ul><li>Health care providers</li><li>Recipients/caregivers</li></ul>	<ul><li>Health care providers</li><li>Recipients/caregivers</li></ul>	<ul><li>Health care providers</li><li>Recipients/caregivers</li></ul>
ACIP recommendations	Interim recommendation for use: Persons aged ≥5 years for prevention of COVID-19	Interim recommendation for use: Persons aged ≥18 years for prevention of COVID-19	Interim recommendation for use: Persons aged ≥18 years for prevention of COVID-19





Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)	
CDC resources	Pfizer-BioNTech COVID-19 Vaccine	Moderna COVID-19 Vaccine	Janssen COVID-19 Vaccine	
CDC clinical considerations		Interim Clinical Considerations		
Dosing and Administration				
Vaccine type	m	RNA	Viral Vector	
Administer		Intramuscular (I.M.)		
Administration Errors	Refer to CDC's COVID-19 Vaccine Administration Errors of Deviations guide for information about how to prevent and report administration errors. Reference additional scenarios that deviate from CDC recommendations but are not considered administration errors.			
Primary Vaccine Series				
Dose	30 mcg ( <b>0.3 mL each</b> ) for individuals ≥12 years old; for individuals ages 5-11 years old, use pediatric-indicated vaccine (not detailed in this chart)	100 mcg ( <b>0.5 mL each</b> )	5x10 <sup>10</sup> viral particles ( <b>0.5 mL each</b> )	
Doses per vial	6	10-11 dose vial or 13-15 dose vial	5	
Schedule	Two-dose series	Two-dose series	Single dose	
Recommended interval	21 days from first dose	28 days from first dose	N/A	
Earliest interval	17 days from first dose	24 days from first dose	N/A	
Additional Dose				
Additional dose recommendations	Recommended for moderately or severely immunocompromised individuals ≥5 years old		Not recommended at this time.	
Recommended interval	≥ 28 days after primary series			





Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)
Additional Dose (continued)			
Additional Dose Options	<ul> <li>Individuals ≥18 years old:</li> <li>Pfizer-BioNTech 0.3 mL</li> <li>Moderna 0.5 mL*</li> <li>Individuals 12-17 years old:</li> <li>Pfizer-BioNTech 0.3 mL</li> <li>Individuals 5-11 years old:</li> <li>Pfizer-BioNTech 0.2 mL (Pediatric-indicated vaccine)</li> </ul>	Individuals ≥18 years old: • Moderna 0.5 mL • Pfizer-BioNTech 0.3 mL*	
Dosing and Administration	(continued)		
Booster Dose			
Booster dose eligibility based on primary series	<ul> <li>Should get a booster dose:</li> <li>People aged ≥ 12 years</li> <li>Moderately or severely immunocompromised individuals ≥ 12 years old who received an additional dose (3 doses of mRNA vaccine)</li> </ul>	<ul> <li>Should get a booster dose:</li> <li>People aged ≥ 18 years</li> <li>Moderately or severely immunocompromised individuals ≥ 18 years old who received an additional dose (3 doses of mRNA vaccine)</li> </ul>	<ul> <li>Should get a booster dose:</li> <li>People aged ≥ 18 years</li> <li>Moderately or severely immunocompromised individuals</li> </ul>
Recommended interval	,	er additional dose for individuals who are ly immunocompromised	≥ 2 months after initial dose
Booster dose options	Individuals ages 12-17 years old may only receive Pfizer-BioNTech (0.3mL)  Individuals aged ≥ 18 years have the option to receive any of the FDA-approved/authorized COVID-19 booster products, but the Pfizer-BioNTech and Moderna vaccines are preferred in most situations  Pfizer-BioNTech 0.3 mL OR Moderna 0.25 mL OR Janssen (J&J) 0.5 mL		

<sup>\*</sup>If the product administered for the primary series is unavailable, an alternative mRNA COVID-19 vaccine may be given as an additional dose





Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)
Storage*			
How product arrives	Frozen liquid.	No preservative.	Liquid suspension. No preservative.
	Purple Cap: Ultra-low freezing until expiry date** OR store frozen between -25°C to -15°C (-13°F to 5°F) for up to 2 weeks	Store frozen between -50°C to -15°C (-58°F to 5°F) until expiry date; check expiry date here: https://www.modernatx.com/covid19vaccine-eua/providers/vial-lookup	Refrigerate until expiry date; check the expiry date here: https://vaxcheck.jnj/
Long-term storage	Gray Cap: Ultra-low freezing until expiry date** OR store in the refrigerator for up to 10 weeks prior to use; if product is received at refrigerated temperature, do NOT refreeze		
Thawing	Purple Cap: Thaw in refrigerator for at least 2–3 hours or at room temperature; must be at room temperature for at least 30 mins before dilution; do NOT refreeze Gray Cap: Thaw in refrigerator for about 6 hours or at room temperature for 30 minutes prior to use; do NOT refreeze	Thaw in refrigerator for at least 2–3 hours or at room temperature; must be at room temperature for at least 30 mins before administration; do NOT refreeze	Product is stored frozen by manufacturer until shipped at refrigerated temperatures; If vaccine is still frozen upon receipt, thaw at refrigerated temperature or if immediate use is required, thaw at room temperature; do NOT refreeze
Max time refrigerated unpunctured	Purple Cap: 30 days Gray Cap: 10 weeks	30 days	Until expiry date
Max time at room temperature unpunctured	Purple Cap: 2 hours Gray Cap: 12 hours	24 hours	12 hours

<sup>\*</sup>Temperature Key:

- Ultra-low Frozen Temperature: -90°C to -60°C (-130°F to 76°F)
- Pfizer-BioNTech Frozen Temperature: -25°C to -15°C (-13°F to 5°F)
- Moderna Frozen Temperature: -50°C to -15°C (-58°F to 5°F)
- Refrigerated Temperature: 2°C to 8°C (36°F to 46°F)
- Room Temperature: 9°C to 25°C (47°F to 77°F)

<sup>\*\*</sup>Note: Cartons and vials of Pfizer-BioNTech COVID-19 Vaccine with an expiry date of August 2021 through February 2022 printed on the label may remain in use for 3 months beyond the printed date as long as authorized storage conditions between -90°C to -60°C (-130°F to -76°F) have been maintained.





Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)		
Dose Preparation	Dose Preparation				
Dilution	Purple Cap: Dilute with 1.8 mL of 0.9% sodium chloride (normal saline, preservative free)	Not dilu	ted.		
	Gray Cap: NOT diluted				
Coloring	Off-white	suspension	Colorless to slightly yellow, clear very opalescent suspension		
Handling	Do NOT shake; <b>invert only</b>	Do NOT shake; <b>swirl bef</b> o	ore drawing up dose		
Max time refrigerated after first punctured	Purple Cap: 6 hours after dilution Gray Cap: 12 hours	12 hours	6 hours		
Max time at room temperature after first punctured	Purple Cap: 6 hours after dilution Gray Cap: 12 hours	12 hours  Maximum of 20 punctures into vial septum; after this, discard unused doses	2 hours		
Efficacy and Safety Informa	tion				
Publications	Dagan, et al. NEJM. Feb 24, 2021	Baden, et al. NEJM. Feb 4, 2021	Sadoff, et al. NEJM. Jan 13, 2021		
	Polack, et al. NEJM. Dec 31, 2020	Anderson, et al. NEJM. Dec 17, 2020			
	Walsh, et al. NEJM. Dec 17, 2020	Jackson, et al. NEJM. Nov 12, 2020			
Overall efficacy; prevention of COVID-19 infection	95% beginning 7 days after second dose: primary analysis of Phase III trial data in 43,538 volunteers	94% beginning 14 days after second dose: primary analysis of Phase III trial data in >30,000 volunteers	67% beginning 14 days after single dose: primary analysis of Phase III trial data in >40,000 volunteers		
Prevention of severe COVID-19 infection	89%	100%	85%		
Prevention of asymptomatic COVID-19 infection	Under evaluation	Limited data suggest some degree of prevention	Data suggest a 60% reduction in asymptomatic infection from 29 days after dose		



Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)
Efficacy and Safety Informa	<b>tion</b> (continued)		
Study demographics	26.2% Hispanic/Latino; 9.8% African American; 4.4% Asian; <3% other races/ An	iversity of volunteers: 79.4% White; 0% Hispanic/Latino; 9.7% African merican; 4.7% Asian; <3% other races/ chnicities	Diversity of volunteers: 59% White; 45% Hispanic/Latino ; 19% African American; 3% Asian ; 9% Native American
		ge and sex distribution: 52.6% male; 7.4% female; 25.3% 65 years and older	Age and sex distribution: 55% male; 45% female; 34% 60 years and older
Patient Counseling	<ul> <li>Injection site: Pain, swelling, erythema at ill lymphadenopathy (80%–89% of vaccinate</li> </ul>		Injection site: Pain, swelling, erythema
	Systemic: Fever, fatigue, headache, chills, vaccinated persons*; acetaminophen or ib		Systemic: Headache, fatigue, muscle ache, nausea, fever
	<ul> <li>These symptoms tend to be more commo 1-3 days after vaccination</li> </ul>	on after the second dose and resolve	<u>Warn</u> about the <u>rare</u> potential onset of symptoms of
	<ul> <li>Reports suggest there is an increased risk particularly in young adults, after vaccinati within a few days after vaccination and res management; refer to CDC's guidance on </li> </ul>	tion; symptom onset generally occurs solve with appropriate medical	thrombocytopenia syndrome (TTS) 1–2 weeks after vaccination, including shortness of breath, chest pain, leg
	<ul> <li>Anaphylaxis following vaccination is noted rate of 4.7 cases/million for Pfizer-BioNTe Moderna as of 1/18/21; unless contraindic risk of anaphylaxis; refer to CDC's guidance</li> </ul>	ech and at a rate of 2.5 cases/million for cated, benefit of vaccination outweighs	swelling, abdominal pain, persistent headache, or bruising around injection site.
	Access a comprehensive summary of local events, and serious adverse events for the	al reactions, systemic reactions, adverse	<ul> <li>Access a comprehensive summary for the <u>Janssen</u> COVID-19 vaccine.</li> </ul>
	* Depending on the vaccine, age group, and va	accine dose	



Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)			
Efficacy and Safety Info	Efficacy and Safety Information (continued)					
Contraindications		laxis) to any component of the vaccine o mRNA COVID-19 vaccines (including due t	o a known allergy to polyethylene			
	glycol [PEG]) have a precaution to Janssen COVID-19 vaccine, and vice versa  • Persons with a contraindication to Janssen COVID-19 vaccine (including due to a known allergy to polysorbate) have a precaution to mRNA COVID-19 vaccines					
	<ul> <li>Immediate (within 4 hours) allergic reaction of any severity after a previous dose or known (diagnosed) allergy to a component of the vaccine (see ingredients below)</li> </ul>					
	<ul> <li>Persons with contraindication to one mRNA vaccine should not receive doses of either mRNA vaccine (Pfizer-BioNTech or Moderna)</li> </ul>					
	• If screen positive for a contraindication, do not vaccinate and consider referral to allergist-immunologist					
Precautions	<ul> <li>Among persons without a contraindi vaccines or injectable therapies</li> </ul>	cation, a history of any immediate (within 4 l	hours) allergic reaction to other			
	<ul> <li>Persons with a contraindication to mRNA COVID-19 vaccines (Pfizer-BioNTech or Moderna) have a precaution to Janssen COVID-19 vaccine, and vice versa</li> </ul>					
	<ul> <li>If screen positive for a precaution, co observe for 30 minutes postvaccina</li> </ul>	omplete a risk assessment, consider referral ion	to allergist-immunologist, and			



Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)			
Clinical Considerations	Clinical Considerations					
Interchangeability of	In general, COVID-19 vaccines are not interchangeable; some nuances include:					
• If the first dose of an mRNA COVID-19 vaccine was received, but the patient is unable to complete the se contraindication), then the Janssen COVID-19 vaccine may be given at a minimum interval of 28 days fro and the patient is considered to have received a valid, single-dose Janssen vaccination, not a mixed vaccine may be given at a minimum interval of 28 days fro						
	• If the mRNA COVID-19 vaccine product given for the first dose cannot be determined and it has been at least 28 days, a second dose of either product can be administered					
	<ul> <li>For moderate to severely immunocompromised individuals, if the original mRNA vaccines administered is not a it is acceptable to administer the other mRNA vaccine</li> </ul>					
Coadministration with other vaccines	May be administered without regard to timing (can be administered on same day and without waiting period); if multiple vaccines are administered at a single visit, administer each injection in a different injection site per best practices; have discussion with patient regarding potential vaccine reactions and how to manage					
Coadministration with antipyretic/analgesic	Prophylactic administration of antipyretic or analgesic medications for the prevention of postvaccination symptoms is NOT recommended; these medications may be used if postvaccination symptoms occur, and patient need exists					
Persons with a history of SARS-CoV-2 infection	Vaccination should be offered regardless of prior SARS-CoV-2 infection					
Persons with a history of MIS-C or MIS-A	There is limited data on the safety and efficacy of COVID-19 vaccines in people with a history of multisystem inflammatory syndrome in children (MIS-C) or in adults (MIS-A); access more information on the risks and benefits					
Persons treated with antibodies	Persons who received monoclonal antibody therapy for COVID-19 infection treatment should defer vaccination for 90 days					



Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)	
Clinical Considerations (continued)				
Persons vaccinated	Persons vaccinated outside of the U.S. are considered fully vaccinated, if:			
outside of the U.S.	<ul> <li>They received all recommended doses of a single or two-dose COVID-19 vaccine series currently FDA-approved/authorized in the U.S.</li> </ul>			
	<ul> <li>They completed all of the recommended doses of a <u>WHO-EUL COVID-19 vaccine</u> or a mixed series of an WHO-EUL COVID-19 vaccine and a FDA-approved/authorized COVID-19 vaccine</li> </ul>			
	<ul> <li>Persons who received only one dose in a two-dose series of FDA-approved/authorized COVID-19 vaccine may receive a second dose as close to the recommended time as possible and do not have to restart their series</li> </ul>			
	<ul> <li>Persons vaccinated outside of the U.S. should be offered a primary vaccination series with an FDA-approved/ authorized COVID-19 vaccine (minimum interval of 28 days since their last dose), if:</li> </ul>			
	They received only the first dose of a multidose WHO-EUL COVID-19 vaccine			
	They were NOT vaccinated with a WHO-EUL COVID-19 vaccine or FDA-approved/authorized COVID-19 vaccine			
	• For more information, or to determine whether an individual is eligible to receive additional or booster doses once they are considered fully vaccinated, refer to CDC's interim guidance on persons vaccinated outside of the U.S.			
Persons who received	Persons who received COVID-19 vaccine as part of a clinical trial are considered fully vaccinated, if:			
COVID-19 vaccine as part of a clinical trial	<ul> <li>They received all of the recomme vaccine that is not FDA-approved</li> </ul>	nded "active" (not placebo) primary series d or FDA-authorized	oses of a WHO-EUL COVID-19	
	<u>-</u>	COVID-19 vaccine, but a U.S. data and safety (i.e., Novavax COVID-19 Vaccine, Moderna (		
		whether an individual is eligible to receive actor CDC's interim guidance on persons vaccin		





Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)		
Additional Considerations by	Additional Considerations by Age				
Children and adolescents (<18 years old)	Children and adolescents ≥5 years of age are eligible for vaccination; considerations for vaccinating this age group are covered in APhA's "COVID-19 Vaccination in Adolescents and Children" resource in the COVID-19 Resources: Know the Facts library	Not recommended to persons <18 years of age	Not recommended to persons <18 years of age		
Women aged < 50 years	No additional considerations.	No additional considerations.	May receive Janssen COVID-19 vaccine; should be made aware of the rare risk of TTS and the availability of mRNA vaccines		
Additional Considerations for	r People with Underlying Medical Conditions				
Immunocompromised persons	May be vaccinated; counsel on the potential for a reduced immune response to the vaccine (efficacy) and the need to follow current guidance to protect themselves against COVID-19 (e.g., masks, social distancing); antiviral therapy is unlikely to impact development of a protective antibody response; for individuals who are moderately or severely immunocompromised:  • An additional dose is recommended 28 days after completion of a two-dose mRNA primary series and a booster dose may be given 5 months after the additional dose				
	A booster dose is recommended 2 months after an initial dose of Janssen COVID-19 vaccine				
Persons with autoimmune disorder	May be vaccinated; no safety and efficacy data available, but persons with autoimmune disorders were included in clinical trials				
People with a history of myocarditis or pericarditis	People with a history of myocarditis/pericarditis unrelated to an mRNA COVID-19 vaccine may receive any FDA-authorized COVID-19 vaccine as long as the episode of has resolved; people with a history of myocarditis/pericarditis after first dose of mRNA COVID-19 vaccine should speak with their physician to determine whether they should receive a second dose				



Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)		
Additional Considerations for	People with Underlying Medical Conditions	(continued)			
Persons with a history/risk for thrombosis	No additional considerations.	No additional considerations.	Persons with a history of an episode of an immune-mediated syndrome characterized by thrombosis and thrombocytopenia, such as heparin-induced thrombocytopenia (HIT), should avoid use; persons with a history or risk of venous thromboembolism are not believed to be more susceptible to TTS following receipt of vaccine		
Persons with a history of Guillain-Barre syndrome	May receive any FDA-Approved or authorized COVID-19 vaccine; should be made aware of the possible association between the Janssen COVID-19 vaccine and an increased risk of GBS, a patient with a history of GBS and the availability of mRNA COVID-19 vaccines				
Other special populations	Persons with a history of Bell's palsy may be vaccinated; persons with a history of dermal filler use may experience temporary swelling at or near the site of filler injection following vaccination and should follow up with their health care provider if this occurs				
Additional Considerations for	Additional Considerations for People Who Are Pregnant or Lactating				
Pregnant/lactating persons	COVID-19 vaccination is recommended for people who are pregnant, lactating, trying to get pregnant now, or who might want to be pregnant in the near future; postauthorization <u>safety monitoring</u> of >30,000 pregnant women has not revealed a safety problem; mRNA and viral vector COVID-19 vaccines are not considered live virus vaccines and are not considered a risk to the breastfeeding infant				



#### **COVID-19 Vaccine Summary Chart**

Vaccine	Comirnaty and Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)
Ingredients	Nucleoside-modified mRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2     2[(polyethylene glycol)*-2000]-N,N-ditetradecylacetamide     1,2-distearoyl-sn-glycero-3-phosphocholine	<ul> <li>Nucleoside-modified mRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2</li> <li>Polyethylene glycol (PEG)* 2000 dimyristoyl glycerol (DMG)</li> <li>1,2-distearoyl-sn-glycero-3-phosphocholine</li> <li>Cholesterol</li> </ul>	Recombinant, replication-incompetent     Ad26 vector, encoding a stabilized     variant of the SARS-CoV-2 Spike (S)     protein     Citric acid     Trisodium citrate     Ethanol
	<ul> <li>Cholesterol</li> <li>(4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate)</li> <li>Potassium chloride</li> <li>Monobasic potassium phosphate</li> <li>Sodium chloride</li> <li>Dibasic sodium phosphate dihydrate</li> <li>Sucrose</li> </ul>	<ul> <li>SM-102 (proprietary to Moderna)</li> <li>Tromethamine</li> <li>Tromethamine hydrochloride</li> <li>Acetic acid</li> <li>Sodium acetate</li> <li>Sucrose</li> </ul>	<ul> <li>2-hydroxypropyl-β-cyclodextrin</li> <li>Polysorbate-80*</li> <li>Sodium chloride</li> </ul>

<sup>\*</sup> As of March 1, 2021, mRNA COVID-19 vaccines are the only vaccines in the United States that contain PEG, though several vaccines contain polysorbate (more information can be found in CDC's vaccine excipient summary).

Disclaimer: Information related to the COVID-19 pandemic is changing rapidly and continuously. The material and information contained in this publication is believed to be current as of the date included on this document. The American Pharmacists Association assumes no responsibility for the accuracy, timeliness, errors or omission contained herein. Links to any sources do not constitute any endorsement of, validity, or warranty of the information contained on any site. The user of these materials should not under any circumstances solely rely on, or act based on this publication. Pharmacy professionals retain the responsibility for using their own professional judgment and practicing in accordance with all rules, regulations, and laws governing the pharmacy practice within their jurisdiction.

