Coadministration with Other Vaccines

California COVID-19 Vaccination Program



COVID-19 vaccines and other vaccines may be administered without regard to timing. This includes simultaneous administration of COVID-19 vaccine and other vaccines on the same day, as well as coadministration within 14 days. The benefits of coadministration and timely catch up on vaccinations outweigh any theoretical risk. New data shows that immunogenicity and adverse event profiles are generally similar when vaccines are administered simultaneously as when they are administered alone.

AAP Supports Coadministration

May 12, 2021. The American Academy of Pediatrics (AAP) recommends vaccination for eligible children ages 12 and older with the federally authorized COVID-19 vaccine and supports coadministration of the COVID-19 vaccine with routine immunizations—particularly for children and teens who are behind on their immunizations. Any COVID-19 vaccine authorized through Emergency Use Authorization by the US Food and Drug Administration, recommended by the CDC, and appropriate by age and health status can be used for COVID-19 vaccination in children and adolescents.

AAP recommends that children and adolescents catch up on all vaccinations that may have been delayed during the pandemic. Between the substantial data collected on the safety of COVID-19 vaccines, and the extensive experience with non-COVID-19 vaccines which shows the immune response and side effects are generally similar when vaccines are given together as when they are administered alone, the benefits of coadministration and timely catch up on vaccinations outweigh any theoretical risk.

(For details, see Policy Statement, Press Statement, and New HealthyChildren.org article.)

CDC Guidance

When deciding whether to administer an(other) vaccine(s) with COVID-19 vaccine, vaccination providers should consider

- whether the patient is behind or at risk of becoming behind on recommended vaccines,
- their risk of vaccine-preventable disease (e.g., during an outbreak or occupational exposures), and
- the reactogenicity profile of the vaccines.

If multiple vaccines are administered at a single visit, administer each injection in a different injection site. For adolescents and adults, the deltoid muscle can be used for more than one intramuscular injection administered at different sites in the muscle.

Consider these <u>best practices</u> for multiple injections:

- Label each syringe with the name and the dosage (amount) of the vaccine, lot number, the initials of the preparer, and the exact beyond-use time, if applicable.
- Separate injection sites by 1 inch or more, if possible.
- Administer the COVID-19 vaccines and vaccines that may be more likely to cause a local reaction (e.g., tetanus-toxoid-containing and adjuvanted vaccines) in different limbs, if possible.

(Source: Interim Clinical Considerations for Use of COVID-19 Vaccines | CDC.)