Nevada’s COVID-19 Vaccination Playbook Brief is being updated to incorporate the most recent recommendations regarding COVID-19 vaccine booster doses, including guidance to tailor the plan to Nevada’s unique needs. There are now booster recommendations for all three available COVID-19 vaccines in the United States. Eligible individuals may choose which vaccine they receive as a booster dose. Some people may prefer the vaccine type they originally received, and others may prefer to get a different booster. CDC’s recommendations now allow for this type of mix-and-match dosing for booster shots.

WHO IS ELIGIBLE FOR A COVID-19 VACCINE BOOSTER DOSE?

COVID-19 Vaccine booster shots are available for the following mRNA vaccine recipients (e.g., Pfizer–BioNTech or Moderna) who completed their initial series at least six (6) months ago:

- People who are 65 years or older
- People who are 18 years and older who have underlying medical conditions
- People who are 18 years and older who work in high-risk settings
- People who are 18 years and older who live in high-risk settings

COVID-19 Vaccine booster shots are available to any J&J vaccine recipient who completed their primary dose at least two (2) months ago.

PFIZER–BIOTECH BOOSTER – SUMMARY

On September 22 and 23, 2021, the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) met to discuss the evidence regarding waning COVID-19 vaccine immunity and to consider a booster dose of Pfizer–BioNTech COVID-19 vaccine for people who have completed the Pfizer–BioNTech COVID-19 vaccine primary series.¹

CDC now recommends people aged 65 years and older, residents aged 18 years and older in long-term care settings, and people aged 50–64 years with underlying medical conditions or social inequities should receive a booster shot of Pfizer–BioNTech’s COVID-19 Vaccine at least six (6) months after completing their Pfizer–BioNTech primary series. Other groups may receive a booster shot based on their individual risk and benefit.

The Pfizer–BioNTech COVID-19 vaccine series is protective at a minimum of two (2) weeks after receiving two (2) doses of the Pfizer–BioNTech COVID-19 vaccine at least three (3) weeks apart. Shared clinical decision-making between provider and patient/client is not required for a Pfizer–BioNTech booster dose to be administered to any eligible person 18 years and older.

MODERNA BOOSTER – SUMMARY

On October 20 and 21, 2021, the CDC’s ACIP met to discuss the recent booster dose recommendations for both the Moderna and Janssen/J&J COVID-19 vaccines.² CDC now recommends people aged 65 years and older, residents aged 18 years and older in long-term care settings, and people aged 50–64 years with underlying medical conditions

¹ https://www.cdc.gov/media/releases/2021/p0924-booster-recommendations-.html
² https://www.cdc.gov/media/releases/2021/p1021-covid-booster.html
**conditions** or **social inequities** should receive a booster shot of Moderna’s COVID-19 Vaccine at least six (6) months after completing the Moderna COVID-19 vaccine primary series. Other groups **may** receive a booster shot based on their individual risk and benefit.

The Moderna COVID-19 vaccine booster dose is 0.25ml administered intramuscularly into the deltoid muscle.\(^3\)

Shared clinical decision-making between provider and patient/client is not required for a Moderna booster dose to be administered to any eligible person 18 years and older. Any individual receiving a booster dose of the Moderna COVID-19 Vaccine, regardless of the vaccine product they received for their initial dose/series, should receive the 0.25ml dosage.

**JANSSEN/J&J BOOSTER – SUMMARY**

On October 20 and 21, 2021, the CDC’s ACIP met to discuss the recent booster dose recommendations for both the Moderna and Janssen/J&J COVID-19 vaccines.

The Janssen/J&J COVID-19 vaccine booster dose is recommended for any individual ages 18 years or older at least two (2) months after receiving their initial dose. **All individuals ages 18 years and older who received the Janssen/J&J vaccine should receive a booster dose.**

**SUPPORTING DATA**

Studies show that the COVID-19 vaccine’s protection against the virus may decrease over time and be less able to protect against the Delta variant. Although COVID-19 vaccination for adults aged 65 years and older remains effective in preventing severe disease, recent data suggest vaccination is less effective at preventing infection or milder symptomatic illness. Emerging evidence also indicates that among health care and other frontline workers, vaccine effectiveness against COVID-19 infections is decreasing over time, likely due to the combination of waning effectiveness as time passes as well as the greater infectiousness of the Delta variant.

Available data show **all three of the COVID-19 vaccines** approved or authorized in the United States continue to be **highly effective** in reducing risk of severe disease, hospitalization, and death, even against the widely circulating **Delta variant**. Vaccination remains the best way to protect yourself and reduce the spread of the virus and help prevent new variants from emerging. **CDC and ACIP emphasized that the nation’s priority should remain getting everyone fully vaccinated with a primary series.**

**Vaccinators**

Providers administering booster doses of COVID-19 vaccines should check the patient’s CDC COVID-19 Vaccine Card and/or search for the patient’s immunization record in **Nevada WebIZ** to ensure the appropriate time period has passed before administering a booster dose (i.e., 6 months following mRNA series completion or 2 months following a J&J dose).

Providers are also encouraged to stock and administer seasonal influenza vaccines, which can be safely coadministered with any COVID-19 vaccine.

**Long Term Care Facility Staff & Residents (LTCF)**

LTCF’s include nursing homes, skilled nursing facilities, behavioral health centers, and assisted living facilities. Individuals with disabilities living in group settings will be prioritized within this group. These settings include Intensive Supported Living Arrangements (ISLA) and Supported Living Arrangements (SLA) for staff and residents. Staff in these facilities are encouraged to seek out a COVID-19 booster dose.

Residents aged 18 years and older of long-term care settings **should** get a COVID-19 booster dose, because they often live closely together in a group setting and are usually older adults with underlying medical conditions; therefore, this population is at increased risk of infection and severe illness from COVID-19.

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\(^3\) Dose is 50mcg which is half the full 100mcg dose administered in the primary series. The same Moderna COVID-19 vaccine formulation is used for both the primary series and the booster dose.
PEOPLE WITH UNDERLYING MEDICAL CONDITIONS

The risk of severe illness from COVID-19 increases with age. Further, adults of any age with the following conditions can be more likely to get severely ill from COVID-19. Severe illness means that a person with COVID-19 is more likely to need hospitalization, intensive care, a ventilator to help them breathe, or they may even die from the virus. People who are 65 years and older or 50–64 years with underlying medical conditions should get a COVID-19 vaccine booster dose.

Adults aged 18–49 years with underlying medical conditions are at increased risk for severe illness from COVID-19. However, that risk is likely not as high as it would be for adults aged 50 years and older with underlying conditions. Therefore, people ages 18–49 years with underlying medical conditions may get a COVID-19 vaccine booster dose based on their individual benefits and risks.

- Asthma
- Blood disorders such as Sickle Cell Disease (SCD) and Thalassemia
- Cerebrovascular disease including Stroke (CVA)
- Chronic kidney disease (CKD)
- Chronic Obstructive Pulmonary Disease (COPD)
- Cystic Fibrosis (CF)
- Diabetes mellitus, type 1 and 2
- Down Syndrome
- Heart conditions (heart failure, coronary artery disease (CAD), or cardiomyopathies)
- HIV/AIDS
- Immune deficiencies
- Liver disease, including Cirrhosis, Hepatitis, and nonalcoholic fatty liver disease
- Morbid obesity (BMI=/>40kg/m2)
- Neurologic conditions, including dementia
- Other lung diseases including interstitial lung disease, pulmonary fibrosis, pulmonary hypertension
- Overweight (BMI>25kg/m2 – 30kg/m2)
- Pregnancy and postpartum
- Severe obesity (BMI>30kg/m2 – <40kg/m2)
- Smoking, current and former
- Solid organ or blood stem cell transplantation
- Substance use disorders, e.g., alcohol, opioids, etc.
- Use of corticosteroids or other immunosuppressive medications
OCCUPATIONAL & INSTITUTIONAL HIGH-RISK GROUPS WHO MAY SEEK OUT A COVID-19 VACCINE BOOSTER DOSE

Adults aged 18–64 years who work or reside in certain settings (see descriptions below) may be at increased risk of being exposed to COVID-19, which could be spreading where they work or reside. Since that risk can vary across settings and based on how much COVID-19 is spreading in a community, people aged 18–64 years who are at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting may get a COVID-19 vaccine booster dose after considering their individual risks and benefits.

Health Care Workforce and Support

The health care workforce includes paid and non-paid clinical and non-clinical employees, volunteers, interns, etc.

- General Medical & Surgical Hospital
- Psychiatric & Substance Abuse Hospitals
- Emergency Medical Services Personnel
- Frontline Public Health Workforce
- Laboratory Workers
- Pharmacists & Pharmacy Technicians
- Outpatient & Home Health Providers

### PUBLIC SAFETY & SECURITY

<table>
<thead>
<tr>
<th>NEVADA DEPARTMENT OF CORRECTIONS STAFF</th>
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<tbody>
<tr>
<td>Nevada Department of Public Safety (DPS) and associated Divisions (e.g., juvenile detention and probation, parole and probation, Nevada Highway Patrol, Division of Emergency Management, etc.): local Sheriffs’ Offices and Police Departments; School and University Police; Airport Police; other peace officers not specifically named; Nevada Threat Analysis Center; mission critical national security workforce not covered by one of the five federal agencies receiving direct vaccine allocation.</td>
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<th>LAW ENFORCEMENT, PUBLIC SAFETY AND NATIONAL SECURITY</th>
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<tr>
<th>STATE AND LOCAL EMERGENCY OPERATIONS MANAGERS/STAFF</th>
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### FRONTLINE COMMUNITY SUPPORT

<table>
<thead>
<tr>
<th>EDUCATION (Pre-K &amp; K-12) &amp; CHILDCARE (public/private/charter school settings)</th>
</tr>
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<tbody>
<tr>
<td>Educators in pre-school and K-12 settings, including teachers, aides, special education and special needs teachers, ESOL teachers, and para-educators; workers who provide services necessary to support educators/students, including but not limited to administrators, administrative staff, IT staff, media specialists, librarians, guidance counselors, essential workers in the Nevada Dept. of Education, etc.; workers who support the transportation and operational needs of school settings, including bus drivers, crossing guards, cafeteria staff, cleaning and maintenance staff, and bus depot and maintenance staff.</td>
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<tr>
<th>NEVADA SYSTEM OF HIGHER EDUCATION (NSHE) FRONTLINE EDUCATORS, STAFF &amp; STUDENTS</th>
<th>Instructional and administrative faculty and all non-instructional staff types across the NSHE system who must work on campus, in close contact with others, and who cannot and have not been able to conduct their job duties from home. Most of this group includes medical and health faculty, staff, and students.</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNITY SUPPORT FRONTLINE STAFF (e.g. Frontline workers who support food, shelter, court/legal and social services, and other necessities of life for needy groups and individuals)</td>
<td>Frontline workers who support food, shelter, court/legal services, and social services, and other necessities of life for needy groups and individuals, including in-need populations and COVID19 responders, including food bank distributors and food preparers (if applicable), front-facing state service staff (e.g., DETR, WIC, DWSS, DMV, ADSD, etc.), community coalition advocates/volunteers in the field (e.g., CHWs and others with public interaction). Veterinary nurses, technicians, veterinarians, and other services supporting individuals and organizations with service animals, search and rescue dogs, and support animals.</td>
</tr>
<tr>
<td>CONTINUITY OF GOVERNANCE (STATE &amp; LOCAL)</td>
<td>Essential, frontline workers who provide for the continuity of governance at the state and local level.</td>
</tr>
<tr>
<td>ESSENTIAL PUBLIC TRANSPORTATION</td>
<td>Public transportation system employees at the state and local levels (urban, interurban, and rural transit authorities), taxi and ride share services (e.g., Uber, Lyft, etc.), and other ground transport services not specifically named.</td>
</tr>
<tr>
<td>REMAINING ESSENTIAL PUBLIC HEALTH WORKFORCE</td>
<td>Public health and environmental health workers specializing in sanitary and infection control, health care facility safety and emergency preparedness planning, public health/community health workers (including call center workers) who conduct community-based public health functions, conducting epidemiologic surveillance and compiling, analyzing, and communicating public health information, who cannot and have not been working from home.</td>
</tr>
<tr>
<td>MORTUARY SERVICES</td>
<td>Workers who prepare the deceased for burial or interment, conduct funerals, and/or operate sites or structures reserved for interment or cremation.</td>
</tr>
<tr>
<td>FRONTLINE SUPPLY CHAIN &amp; LOGISTICS</td>
<td>Food manufacturer workers and their supplier workers including those employed at food ingredient production and processing facilities; aquaculture and seafood harvesting facilities; slaughter and processing facilities for livestock, poultry, and seafood; animal food manufacturing and processing facilities; human food facilities producing by-products for animal food; industrial facilities producing co-</td>
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products for animal food; beverage production facilities; the production of food packaging; and workers supporting agriculture irrigation infrastructure.

Farmers, farm and ranch workers, and agribusiness support services, including workers involved in auction and sales; in food operations, including animal food, grain and oilseed storage, handling, and processing; in ingredient production; in manufacturing of veterinary drugs and biologics (e.g., vaccines).

Animal agriculture workers to include those employed in veterinary health (including those involved in supporting emergency veterinary or livestock services); raising, caring for and management of animals for food, as well as pets; animal production operations; livestock markets, slaughter and packing plants, manufacturers, renderers, and associated regulatory and government workforce.

END-TO-END ESSENTIAL GOODS SUPPLY CHAIN (includes manufacturing, transport, distribution and sale of essential items)

Warehouses, processing, packaging, storage, and distribution workforce (e.g., USPS, FedEx, UPS, messengers, truck drivers (local and long-haul), wholesale traders, etc.); workers enabling the sale of human food (e.g., grocery stores), animal food (including pet food, animal feed, and raw materials/ingredients), and beverage products at groceries, pharmacies, and convenience stores, including staff in retail customer support and IT support necessary for online orders, pickup, and/or delivery; warehouse operators, including vendors and support personnel critical for business continuity (including heating, ventilation, and air conditioning (HVAC) and electrical engineers, security personnel, and janitorial staff), e-commerce or online commerce, and customer service for essential functions. Essential Manufacturing Workers necessary for the manufacturing of materials and products needed for medical supply chains, and for supply chains associated with transportation, energy, communications, food and agriculture, chemical manufacturing, nuclear facilities, the operation of dams, water and wastewater treatment, emergency services, and the defense industrial base.

Updated: November 5, 2021
| **UTILITIES AND COMMUNICATIONS INFRASTRUCTURE** | Water and wastewater workers, dam workers, natural gas, energy/electric sectors, internet and mobile services, telephone service providers, news broadcasters (Radio and Television), newspaper publishers, including back-office staff as well as frontline journalists, and workers responsible for ensuring persons with disabilities have access to and the benefits of communications platforms. |
| **NEVADA DEPARTMENT OF TRANSPORTATION & LOCAL EMERGENCY ROAD PERSONNEL** | CDL operators, street cleanup crews, snowplow drivers, district training officers, safety/loss control section, and traffic incident management, emergency road crews. |
| **ESSENTIAL AIRPORT OPERATIONS** | Workers who support air transportation for cargo and passengers, including operation, distribution, maintenance, and sanitation. This includes air traffic controllers, flight dispatchers, maintenance personnel, ramp workers, fueling agents, flight crews, airport safety inspectors and engineers, airport operations personnel, aviation and aerospace safety workers, security, commercial space personnel, airport operations personnel, accident investigators, and flight instructors. |
| **OTHER ESSENTIAL TRANSPORTATION** | Vehicle repair, maintenance, and transportation equipment manufacturing and distribution facilities; workers critical to the manufacturing, distribution, sales, rental, leasing, repair and maintenance of vehicles and other equipment and the supply chains that enable these operations to facilitate continuity of travel-related operations for essential workers. |
| **FRONTLINE COMMERCE & SERVICE INDUSTRIES** | Restaurant and quick serve food operations, including dark kitchen and food prep centers, carry-out, and delivery food workers. Workers in cafeterias used to feed workers or other congregate settings not already captured in an occupation group above. *Specific to Nevada: frontline casino and resort employees not in food service who have prolonged/sustained customer interaction.* |
| HYGIENE PRODUCTS AND SERVICES | Workers who produce hygiene products; workers in laundromats, laundry services, and dry cleaners, workers providing personal and household goods, repair, and maintenance; workers providing disinfection services for essential facilities and modes of transportation and who support the sanitation of all food manufacturing processes and operations from wholesale to retail; workers necessary for the installation, maintenance, distribution, and manufacturing of water and space heating equipment and components; support required for continuity of services, including commercial disinfectant services, janitorial and cleaning personnel, and support personnel functions that need freedom of movement to access facilities; workers supporting the production of home cleaning, pest control, and other essential products necessary to clean, disinfect, sanitize, and ensure the cleanliness of residential homes, shelters, and commercial facilities. |
| DEPOSITORY CREDIT INSTITUTION WORKFORCE | Workers who are needed to provide, process, and maintain systems for processing, verifying, and recording financial transactions and services, including payment, clearing, and settlement; wholesale funding; insurance services; consumer and commercial lending; and public lending. Workers who are needed to provide business, commercial, and consumer access to bank and non-bank financial and/or lending services, including ATMs, lending and money transmission, lockbox banking, and armored car services. |
| FRONTLINE INFRASTRUCTURE | Workers performing housing and commercial construction related activities, including those supporting the sale, transportation, and installation of manufactured homes. Workers supporting government functions related to the building and development process, such as inspections, permitting, and plan review services that can be modified to protect the public health, but fundamentally should continue and enable the continuity of the construction industry. Workers such as plumbers, electricians, exterminators, builders (including building and insulation), contractors, HVAC Technicians, technicians for elevators, escalators and moving walkways, landscapers, and other service providers who provide services, including temporary construction, that are necessary to maintaining safety, sanitation, and essential operation of residences, businesses, |
and buildings, such as hospitals and senior living facilities.

<table>
<thead>
<tr>
<th>ESSENTIAL MINING OPERATIONS</th>
<th>Frontline mining and processing operations and supplier/vendor industries essential to such operations.</th>
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<tr>
<td>OTHER</td>
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<tr>
<td>COMMUNITY SUPPORT ADMINISTRATIVE STAFF</td>
<td>Food Bank, state service office (e.g., DETR, WIC, DWSS, DMV, ADSD, etc.), and Community Coalition administrative and other support staff who can and have been working from home.</td>
</tr>
<tr>
<td>NSHE STUDENTS LIVING IN CAMPUS-SPONSORED RESIDENTIAL SETTINGS (e.g. dorms, campus-sponsored apartments, etc.)</td>
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<tr>
<td>NSHE REMAINING WORKFORCE</td>
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FREQUENTLY ASKED QUESTIONS (BOOSTERS)

1. When can I get a COVID-19 vaccine booster if I am NOT in one of the recommended groups?
   Additional groups may be recommended to receive a booster dose as more data becomes available. The COVID-19 vaccines approved and authorized in the United States continue to be effective at reducing risk of severe disease, hospitalization, and death. Experts are looking at all available data to understand how well the vaccines are working for different populations. This includes looking at how new variants, like Delta, affect vaccine effectiveness.

2. If we need a booster dose, does that mean the vaccines aren’t working?
   No. The COVID-19 vaccines are working well to prevent severe illness, hospitalization, and death, even against the widely circulating Delta variant. However, public health experts are starting to see reduced protection, especially among certain populations, against mild and moderate disease.

3. What are the risks to getting a COVID-19 vaccine booster dose?
   So far, the reactions reported after getting a COVID-19 vaccine booster dose were similar to those seen with administration of the primary series. Fatigue and pain at the injection site were the most reported side effects, and overall, most side effects were mild to moderate. However, as with the COVID-19 vaccine primary series, serious side effects are rare, but may occur.

4. Am I still considered “fully vaccinated” if I DO NOT get a booster dose?
   Yes. Everyone is still considered fully vaccinated two weeks after their second dose in a two-dose series (e.g., Pfizer-BioNTech and Moderna), or two weeks after a single dose vaccine (e.g., Janssen/J&J).

For more information go to NVCOIDFighter.org