

# Training and Preparation for Administering COVID-19 Vaccinations under the Auspices of the Virginia Department of Health

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## *I. Purpose*

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The purpose of this document is to provide uniform guidance and training for all staff providing COVID-19 vaccinations. Public health professionals are the gold standard for vaccination campaigns. To maintain the trust and confidence of the public, this vaccination campaign must be undertaken with the utmost attention to detail in vaccine storage and handling, vaccine administration, correct timing of vaccination with the second dose, and thorough follow up on any potential adverse reactions.

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## *II. Individuals Authorized to Vaccinate*

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Table 1 below provides a summary of roles that are authorized to perform different actions related to vaccine administration (vaccinating, mixing etc.) along with supervision requirements. Please also review Sections III & IV of this document for further information on authorization of various roles. **Remember, all roles that are authorized to vaccinate MUST complete the Skills Assessment Checklist for the vaccine they will administer** (included as Appendices in this document).

**Table 1: Vaccinator Roles**

Provider Credentials*	Authorized to Vaccinate	Supervision Needed to Vaccinate	Authorized to mix/reconstitute/dilute	Supervision Needed to mix/reconstitute/dilute
MD, DO**	Yes	None needed	Yes	None needed
PA**	Yes	None needed	Yes	None needed, once trained
RN**	Yes	None needed	Yes	None needed, once trained
Nurse Practitioner (not in independent practice)**	Yes (functions under RN license)	None needed	Yes	None needed, once trained (functions as an RN)
LPN**	Yes	Yes. Supervision needed by RN (can also be provided by MD, DO)	No	N/A
Pharmacist**	Yes	No	Yes	None needed, once trained
Pharmacy Intern	Yes	Yes. Supervision can be provided by pharmacist ONLY	Yes	Yes. Supervision and second check can be provided ONLY by pharmacist

<b>Pharmacy Technician</b>	Yes	Yes. Supervision can be provided by pharmacist ONLY	Yes	Yes. Supervision and second check can be provided ONLY by pharmacist
<b>Other Health Professionals ***</b>	Yes	Yes	N/A	N/A
<b>EMS Providers**</b>	Yes	No	No	N/A
<b>Nursing Students****</b>	Yes (only as per <a href="#">§18VAC90-27-110</a> ) School must certify students have been properly trained in vaccination administration.	On-site oversight from health care providers whose scope of practice includes vaccine administration is also required.	No	N/A
<b>Other VA Students of Health Professions listed above (in good academic standing)****</b>	Yes. School must certify that students have been properly trained in vaccination administration.	On-site oversight from health care providers whose scope of practice includes vaccine administration is also required.	No	N/A

\* *Providers must have a license from Virginia, or another US State as per the [PREP Act](#) (only physicians, registered nurses, and licensed practical nurses), with the exception of Active Duty Military and Military Medical Personnel. Virginia MDs, DOs, and DPMs can search for their license on the [license look-up](#). If a provider is licensed in a state other than Virginia, they will be required to provide VDH with their license documentation.*

**Active Duty Military do not require a state-specific license** as per [§ 54.1-2901](#) (DHP regulations may not prevent the performance of the duties of any active duty health care provider in active service in the Army, Navy, Coast Guard, Marine Corps, Air Force, or public health service of the United States at any public or private health care facility while such individual is so commissioned or serving and in accordance with [their] official military duties) and [§ 54.1-106](#) (Any commissioned or contract medical officers or dentists serving on active duty in the United States armed services and assigned to duty as practicing commissioned or contract medical officers or dentists at any military hospital or medical facility owned and operated by the United States government shall be deemed to be licensed pursuant to this title). **Medical Military Personnel** (an individual who has recently served as a medic in the United States Army, medical technician in the United States Air Force, or corpsman in the United States Navy or the United States Coast Guard and who was discharged or released from such service under conditions other than dishonorable as per [§ 2.2-2001.4](#). **Military medical personnel; do not require a state-specific license.** More specifically, military medical personnel may practice and perform certain delegated acts that constitute the practice of medicine or nursing, reflecting

*the level of training and experience of the military medical personnel and under the supervision of a licensed physician or podiatrist.*

*\*\* For example, under the [PREP Act](#) MDs, DOs, RNs, LPNs, pharmacists, pharmacy interns, and pharmacy technicians with an expired **out of state** license due to retirement in the past five years that is in good standing can also prescribe (MD, DO) or administer (RN, LPN, pharmacist, pharmacy intern, pharmacy technician) vaccines in Virginia. Please note that in all cases, retired individuals cannot put any former credentials on their name tag during the vaccine clinic. Only those with active licenses can use credentials like MD, RN, etc.*

*\*\*\* The other health professionals category includes dentists, optometrists, respiratory therapists, midwives, podiatrists, and veterinarians as indicated in the PREP Act.*

*\*\*\*\* Check Section III, numbers 4 & 5 for more guidance about students of health professions, which includes students of medicine, nursing, dental medicine, midwifery, optometry, paramedic, pharmacy, physician assistant studies, podiatry, respiratory therapy, veterinary medicine, and emergency medical technician students (advanced or intermediate EMTs).*

#### **Individuals Authorized to Vaccinate When a Prescriber is Not on Site:**

Under [§54.1-3408](#), the following individuals may vaccinate adults when a prescriber is not on site:

1. **Pharmacists**
2. **Registered Nurses (RNs)**
3. **Licensed Practical Nurses (LPNs; only under the supervision of an RN)**
4. **Retired MDs, pharmacists, RNs (only if a licensed professional whose scope of practice includes vaccination)**
5. **Designated emergency medical services (EMS) providers who hold an advanced life support certificate**

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### ***III. Other Individuals Who May Vaccinate***

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On-site oversight from health care providers whose scope of practice includes vaccine administration is required for non-traditional vaccinators. Additional details and requirements can be found below:

1. **Pharmacy Interns and Pharmacy Technicians:** [Department of Health and Human Services declaration](#) (HHS) allows pharmacists to order and administer childhood vaccinations to children ages 3-18 years of age and COVID-19 vaccinations to children and adults. In addition, pharmacy interns and pharmacy technicians may administer childhood vaccines to children ages 3-18 and **COVID-19 vaccines to children and adults while under the supervision of a pharmacist as long as they meet the requirements in the declaration of the HHS Secretary.** Requirements for this provision have been defined by the [HHS](#) document. Per [§ 54.1-3320](#), the supervision of pharmacy interns and pharmacy technicians is reserved for pharmacists only. In addition,

a pharmacy intern may engage in the acts to be performed by a pharmacist as set forth in subsection A of the Drug Control Act ([§ 54.1-3400](#) et seq.) for the purpose of obtaining practical experience required for licensure as a pharmacist, if the supervising pharmacist is directly monitoring these activities.

2. **EMS providers:** May provide vaccines when they meet the current requirements. In order for EMS providers to support VDH vaccination clinics, according to [§ 54.1-3408](#), they must:
  - a. Hold a valid, unrestricted Advanced Life Support certificate issued by the Virginia Commissioner of Health
  - b. Be affiliated with the Virginia EMS agency developing the vaccination program
  - c. Be individually approved by their agency Operational Medical Director (OMD) as a vaccinator
  - d. Must follow protocols approved by their OMD for vaccine administration  
the Virginia EMS Agency, where the EMS provider is affiliated, shall provide confirmation to VDH that the provider meets the requirements above. Virginia EMS providers supporting VDH vaccination clinics must complete the VDH procedures for Evaluating Immunization Knowledge and Skills for Vaccinators listed below. Virginia EMS Agencies are encouraged to use VDH procedures for Evaluating Immunization Knowledge and Skills for Vaccinators for their vaccination program and closed POD vaccination efforts.
3. **MRC volunteers that are EMS providers:** Can ONLY provide vaccinations under the direction of their EMS Agency and OMD as outlined above. MRC coordinators will not be responsible for managing EMS providers as MRC volunteers.
4. **Nursing Students:** Per [§18VAC90-27-110](#), “In accordance with [§54.1-3001](#) of the Code of Virginia, a nursing student, while enrolled in an approved nursing program, may perform tasks that would constitute the practice of nursing.” **Schools of Nursing must have a current school MOA with VDH, and students must be supervised by their clinical instructor or preceptor** and in accordance with all Board of Nursing regulations.
5. **VA Students of Health Professions:** Students of those professions listed in Table 1 (students of medicine, nursing, dental medicine, midwifery, optometry, paramedic, pharmacy, physician assistant studies, podiatry, respiratory therapy, veterinary medicine, and emergency medical technician students {advanced or intermediate EMTs}) who are in good academic standing may vaccinate through VDH, LHD, or hospital community clinic IF their school certifies that students have been properly trained in vaccination administration in compliance with the PREP act. **Schools must have a current school MOA with VDH, and students must be supervised by their clinical instructor or preceptor.**

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#### *IV. Individuals Authorized for Immediate Use Mixing, Diluting, or Reconstituting*

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It is anticipated that at least one of the vaccines for COVID-19 will require immediate diluting prior to use. Per [§18VAC85-20-400](#), **MD or DO may have a physician assistant or registered nurse (RN) mix vaccines without a second check by the physician provided all of the provisions set forth in the administrative code are followed.**

**Pharmacists can mix, dilute or reconstitute medications** including vaccines and directly supervise pharmacy interns and pharmacy technicians in the mixing, diluting or reconstituting of medications and vaccines under [§54.1-3320\(A\) \(7\)](#).

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#### *V. Required Training to Administer COVID-19 Vaccines under the Auspices of the Virginia Department of Health*

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#### **Training Assumptions & Key Considerations**

1. **All vaccinators will function under the guidance of a public health district director or their deputy, or public health nurse, or registered nurse in charge of COVID-19 vaccination efforts.** In addition, health districts may hire an immunization subject matter expert registered nurse, MD, DO or NP either acting under their appropriate NP qualifications or as a RN, or a Pharmacist to lead their COVID-19 vaccination efforts.
2. **All vaccinators must complete these following core training requirements** prior to participating in the vaccination event:
  - a. Moderna (TRAIN ID: 1095215) **and** Pfizer-BioNTech (TRAIN ID: 1095345) **and** Johnson & Johnson (Train ID: 1096541) **and** Novavax (Train ID: 1107395) Covid-19 Vaccine specific training module(s)
  - b. VDH: Responding to Anaphylaxis (TRAIN ID: 1095208)
  - c. Needlestick Prevention (TRAIN ID: 1101015).
  - d. CDC: Intramuscular (IM) Injection: Sites (TRAIN ID: 1102625)
  - e. CDC: Intramuscular (IM) Injection: Supplies (Children Birth Through 18 Years of Age) (TRAIN ID: 1102626)
  - f. Complete skills checklist(s) for vaccine(s) they are administering (Refer to Appendices A-D)

**Note:** All training must be entered into TRAIN. Refer to the table below for direct links to these courses in TRAIN.
3. **Districts are required to maintain proof of competency on each vaccinator** in their personnel files. This includes copies of all documents verifying courses have been completed outside of TRAIN and satisfactory completion of VDH procedures for Evaluating Immunization Knowledge and Skills for Vaccinators (Skills Assessment Checklist).

4. **The Nurse Manager, District IAP, or their designee will evaluate all vaccinators** using the Skills Assessment Checklist (included as Appendix A in this document). This assessment is also an opportunity for vaccinators to ask questions, get clarification on technique, and resolve issues. The skills checklist can be completed at the vaccination site/POD. As a reminder, this function can be delegated to a competent MRC volunteer.
5. **This document will be regularly updated as additional guidance is released by the FDA and the CDC.** It is recommended that all vaccinators continue to check for regular updates to any training requirements. Vaccinators should also join the CDC Clinician Outreach and Communication Activity (COCA) Calls to continue to receive latest guidance: <https://emergency.cdc.gov/coca/calls/index.asp>

### **Training Requirements by Role**

**Traditional Vaccinators:** Any provider who is authorized to administer vaccination and who has performed vaccinations in the last one (1) year. Includes those that have completed MRC training for other vaccination efforts. Volunteers are only required to take training for the vaccine they are delivering. For example, if volunteers will only be administering the COVID-19 vaccine, they do not need to complete training for administering other vaccines such as influenza, Tdap, etc. This group includes individuals currently working in health care who provide any vaccines in their health care setting (such as influenza vaccine). This group also includes individuals who are pharmacists, nurses, MDs, DOs, PAs, NPs (function as RNs), EMT-I and EMT-P who are currently authorized to vaccinate and LPNs in current practice or who have retired or left their practice setting within the last year that can complete the basic courses and demonstrate safe injection practices.

**Non-Traditional Vaccinators:** Any provider who is authorized to vaccinate but who does NOT have experience with administering vaccinations in the last one (1) year or have **retired/left active practice more than 1 year ago\***. As the pace of vaccine production increases, additional vaccinators will be needed. Many of these vaccinators may have little or no experience in providing vaccines and are considered non-traditional vaccinators.

\*If a provider previously completed training when there was a two-year requirement, the provider has met the required training to be a COVID-19 Vaccinator and does not need to take any additional training. As of March 8, 2021, any provider who has not administered a vaccine in the past one (1) year is classified as a Non-Traditional Vaccinator, and must complete all courses assigned to Non-Traditional Vaccinators.

**Community Vaccinators:** There is a separate training plan for those only interested in volunteering to vaccinate at COVID-19 Vaccination Clinics.

**Storage & Handling Staff:** Medical or non-medical staff who will be storing, handing, or managing logistics for the COVID-19 vaccines.

**Other Personnel:** Those in additional roles as defined by the pandemic environment such as (front desk staff, support staff, patient coordinators, POD members etc.) may be required to take certain trainings.

**Table 2: Required Trainings**

Topic/Course Name	TRAIN ID (approx. duration)	Training required for the following roles:			
		Traditional Vaccinators (providers with routine vaccination experience- see definition above)	Non-traditional Vaccinators (see definition above)	Storage & Handling Staff	Other Personnel
Pfizer BioNTech Vaccine Preparation and Administration	<a href="#">1095215</a> (~25 min)	x	x		
Moderna Vaccine Preparation and Administration	<a href="#">1095345</a> (~25 min)	x	x		
J&J Vaccine Preparation and Administration	<a href="#">1096541</a> (~25 min)	x	x		
Novavax Vaccine Preparation and Administration	<a href="#">1107395</a> (~25 min)	x	x		
VDH: Responding to Anaphylaxis	<a href="#">1095208</a> (~10 min)	x	x		
Needlestick Prevention	<a href="#">1101015</a> (~15 min)	x	x		
CDC: Intramuscular (IM) Injection: Sites	<a href="#">1102625</a> (~10 min)	x	x		
CDC: Intramuscular (IM) Injection: Supplies (Children Birth Through 18 Years of Age)	<a href="#">1102626</a> (~10 min)	x	x		
CDC: Intramuscular (IM) Injection: Supplies for Adults	<a href="#">1103882</a> (~10 min)	encouraged	encouraged		
VDH: Vastus Lateralis Intramuscular Injection	<a href="#">1103885</a> (~10 min)	encouraged	encouraged		
CDC: Comfort and Restraint Techniques	<a href="#">1103883</a> (~10 min)	encouraged	encouraged		
Completion of the Skills Assessment checklist	<a href="#">1096532</a> (~20 min, see Appendix A)	x	x		
How to Give an IM Injection	<a href="#">1096822</a> (~15 min)		x		
Bloodborne Pathogens <sup>1</sup>	<a href="#">1028520</a> (~20 min)		x		

Airborne Pathogens <sup>1</sup>	<a href="#">1087669</a> (~20 min)		<b>X</b>		
Vaccinating in a pandemic environment	<a href="#">1095195</a> (~15 min)		<b>X</b>		
Pfizer Vaccine storage and handling and Returning the Pfizer thermal shipper	<a href="#">1095212</a> (~15 min)			<b>X</b>	
Administering Moderna Vaccine	<a href="#">1095345</a> (~15 min)			<b>X</b>	
Preparing and Administering J&J Vaccine	<a href="#">1096541</a> (~15 min)			<b>X</b>	
Working with Dry Ice	<a href="#">1093708</a> (~10 min)			<b>X</b>	
Confidentiality Training	<a href="#">1032033</a> (~20 min)			<b>X</b>	
POD Essentials	<a href="#">1094136</a> (~25 min)			<b>X</b>	
IAP check off prior to working storage and handling role	Check off must be done prior to working in S&H role			<b>X</b>	
<i>CPR certification needs to be current within past 2 years<sup>2</sup></i>	Can use one of several options available online such as <a href="#">AHA HeartCode BLS</a> . EMS providers must have current certification. Each EMS agency has their own policy for verifying CPR skills and the EMS may not have a current CPR card. Districts should accept the training certification by their partner EMS agency.	<b>X</b>	<b>X</b>		<b>X</b>
Vaccine Adverse Event Reporting System (VAERS)	<a href="#">VAERS Report Event</a>				
V-safe	<a href="#">Quick Reference Guide</a>				<b>X</b>

<sup>1</sup>Vaccinators who have completed a medical bloodborne pathogen training within the last year may provide proof of official documentation through their employee health record, TRAIN transcript or official training transcript from their agency. For providers who are employed by health care systems, completion of similar courses may also be required annually by their employers and hence, such providers may be exempt from completing these again.

<sup>2</sup>Per 18VAC90-21-50. Requirements for protocols for administration of adult immunizations, the language for qualification of provider's states:

10. Qualification of immunization providers.
  - a. Virginia licensure as a registered nurse, licensed practical nurse, or pharmacist.
  - b. Supervision of a licensed practical nurse provider.
  - c. Current cardiopulmonary resuscitation training. (*Note: The agency definition of current training is "Professional CPR Certification". CPR certification is required every 2 years.*)

### **Storage and handling resources and EUA Fact Sheets for US COVID-19 vaccines**

[CDC Vaccine Storage and Handling Toolkit](#) (with COVID-19 Addendum)

[CDC US COVID-19 Vaccine Product Information](#) (brand specific storage)

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## **VI. Pediatric Vaccinations**

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### **VDH School-Age Population Vaccination Playbook**

VDH has published the [Vaccination of the School-Age Population in a School Setting and in the Community: Playbook to Support Vaccination Events](#).

The playbook covers pre-planning steps, necessary communications, mapped out day-of operations, and important legal considerations. Templates for consent forms and communications, in addition to additional tools and helpful links, can also be found in the playbook. Please note that this playbook is a work in progress and will be updated in accordance with guidance from the CDC and feedback from clinic planners.

### **[CDC COVID-19 Vaccine Interim COVID-19 Immunization Schedule for 6 Months of Age and Older](#)**

### **[At-a-Glance COVID-19 Vaccination Schedules for US COVID-19 vaccines](#)**

[CDC Intramuscular \(IM\) Injections for Children Job Aid](#)

[CDC Intramuscular \(IM\) Injections Sites Video](#) (deltoid and anterolateral thigh)

[CDC Approved Child Vaccination Holds](#)

[Needle Gauge Guide](#)

## CDC Vaccine Administration: Intramuscular (IM) Injection for Children Under 6 Years

[Infants 11 months of age and younger](#)

[Children 1 through 2 years of age](#)

[Children 3-6 years of age](#)

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### VII. FDA COVID-19 Vaccine Presentations, Fact Sheets, and Schedules

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#### Visual images of vaccine vial presentations

[Moderna](#)

[Pfizer](#)

[J&J \(page 3\)](#)

#### **Pfizer-BioNTech**

*Healthcare Providers*

[6 months through 4 years of age \(maroon cap\)](#)

[5 through 11 years of age \(orange cap\)](#)

[12 years of age and older \(purple cap\)](#)

[12 years of age and older \(gray cap\) \(do not dilute\)](#)

*Caregivers and Recipients*

[6 months through 4 years of age \(maroon cap\)](#)

[5 through 11 years of age \(orange cap\)](#)

[12 years of age and older \(purple or gray cap\)](#)

#### **Moderna**

*Healthcare Providers*

[6 months through 5 years of age \(magenta label\)](#)

[6 through 11 years of age \(purple or teal label\)](#)

[12 years of age and older \(light blue label\)](#)

[Booster doses for 18 years of age and older \(purple label\)](#)

*Caregivers and Recipients*

[6 months through 5 years of age \(magenta label\)](#)

[6 through 11 years of age \(purple or teal label\)](#)

[12 years of age and older \(black border\)](#)

**Novavax**

*Healthcare Providers*

[18 years of age and older](#)

*Caregivers and Recipients*

[18 years of age and older](#)

**Janssen (J&J)**

*Healthcare Providers*

[18 years of age and older](#)

*Caregivers and Recipients*

[18 years of age and older](#)

**Vaccination Schedules**

[CDC COVID-19 Vaccine Interim COVID-19 Immunization Schedule for 6 mos and Older](#)

[Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States](#)

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## *Appendix A: Skills Assessment Checklist for Covid-19 Vaccine Administration*

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Vaccinator's Name and Professional Credentials: \_\_\_\_\_ Date of Assessment: \_\_\_\_\_

Evaluator's Name and Professional Credentials: \_\_\_\_\_

[CDC COVID-19 Vaccine Interim COVID-19 Immunization Schedule for 6 mos and Older](#)

Competency	Clinical skills, techniques, and procedures	Needs Improve - ment	Meets or Exceeds Expecta- tions	Req'd Plan of Action
<b>A</b> <b>Patient Education</b>	1. Welcome patient and verify identity (name) and date of birth.			
	2. Ensure the Rights of Medication Administration. Make sure you have the: <ul style="list-style-type: none"> <li>a. Right patient</li> <li>b. Right vaccine with right diluent</li> <li>c. Right dosage</li> <li>d. Right route, needle length</li> <li>e. Right site</li> <li>f. Right documentation</li> </ul>			
	3. Explain the reason for the COVID-19 vaccination and the location of injection. Explain any follow-up shots and schedule as needed.			
	4. EMR/VASE Plus will capture precautions or contraindications. Review for appropriate vaccination or deferral.			
	5. Provide the relevant FDA-approved or EUA COVID-19 vaccine fact sheet. This may have been provided electronically during the registration process. It is important to provide the fact sheet BEFORE administering the vaccine. Verify client/parent/caregiver receives fact sheet, ensure client/parent/caregiver has time to read information and ask questions, and provide an opportunity to discuss side effects.			
	6. Review comfort measures and aftercare instructions with patient. Answer questions and accommodate any special needs of patient. Provide information to enroll in the <a href="#">v-safe</a> and <a href="#">VaxText</a> programs.			
<b>B</b> <b>Safety Protocols</b>	1. Identify the location of medical protocols (e.g., immunization protocol, emergency protocol, reference material).			
	2. Identify the location of epinephrine, its administration technique, and clinical situations where its use would be indicated.			
	3. Maintain up-to-date CPR certification			

	4. Understand the need to report any needle stick injury and to maintain a sharps injury log.			
	5. Demonstrate knowledge of proper vaccine handling, e.g., maintains vaccine at recommended temperatures before and prior to use, demonstrates knowledge of how to use multi-dose vials etc.			
	6. Identify AED location.			
<b>C</b> <b>Vaccine Preparation</b>	1. Perform proper hand hygiene prior to preparing the vaccine.			
	2. When removing vaccines from freezer or fridge, look to ensure storage unit temperature is in proper range.			
	3. Remove the required number of vials from storage and thaw each vial before use.			
	4. Before puncturing the vial, check the expiration date of vial and record the date and time the vial was punctured. Double check vial label and contents prior to drawing-up.			
	5. Prepare to draw vaccine in a designated clean area not adjacent to where potentially contaminated items are placed.			
	6. Follow manufacturer guidance to dilute or mix vaccine, if required (Refer to appropriate checklist for vaccine-specific protocol: Appendices B-D).			
<b>D</b> <b>Administering Vaccine</b>	1. Perform proper hand hygiene.			
	2. Utilize appropriate PPE (surgical/ procedure mask, face shield or goggles). Gloves are optional. If gloves are worn, they must be changed between each patient and hand hygiene performed.			
	3. Properly position patient. (See <a href="#">CDC appropriate holds for children.</a> )			
	4. Identify injection site by patient age. For children under 6, see links in section VI. <i>Pediatric Vaccinations</i> (P12 of this document) For children 6 through adults use deltoid ONLY.			
	5. Locate anatomic landmark specific for IM.			
	6. Prep site with alcohol wipe, using a circular motion from the center to a 2” to 3” circle. Allow alcohol to dry.			
	7. Draw up vaccines in a designated clean medication area that is not adjacent to areas where potentially contaminated items are placed.			
	8. Select the correct needle size for IM based on patient age and/or weight, site, and recommended injection technique (23-25 Gauge Needle. Lengths may vary by body size, 5/8, 1”, 1 1/2”). See <a href="#">Needle Gauge Guide</a>			
	9. Maintain aseptic technique throughout, including cleaning the rubber septum (stopper) of the vial with alcohol prior to piercing it.			

	10. Using aseptic technique, withdraw <u>appropriate dose</u> of vaccine into a sterile dosing syringe with a needle appropriate for intramuscular injection. <a href="#">CDC COVID-19 Vaccine Interim COVID-19 Immunization Schedule for 6 mos and Older</a>			
	11. Visually inspect each dose in the dosing syringe prior to administration. Verify the final dosing volume is correct. Do not administer if the vaccine is discolored or contains particulate matter. Administer vaccine immediately once dosing syringe passes inspection.			
	12. Control limb with non-dominant hand: hold needle an inch from skin and insert quickly at appropriate angle (90 degrees for IM).			
	13. Inject vaccine using steady pressure. Do not aspirate. Withdraw needle at angle of insertion (90 degrees for IM). Use proper technique to prevent needle-stick injury, such as using the same hand to operate the safety guard on needle after injection.			
	14. Apply gentle pressure to the injection site for several seconds (use gauze pad or Band-Aid).			
	15. Dispose of needle and syringe in sharps container.			
	16. Record the date and time of first and subsequent uses of the vaccine on the vaccine vial label.			
	17. Properly dispose of vaccine vial once all doses have been exhausted. Report all wasted doses to the appropriate VDH staff manager on site (usually the IAP, or POD leader). Waste reporting is <b>required</b> per the CDC agreement.			
	18. Only if the patient indicated a previous severe allergic reaction to a vaccine or injectable, or history of anaphylaxis, patient should be observed for 30 minutes. <b>All other patients should be observed for 15 minutes.</b> Be cognizant of the potential for vasovagal reactions.			
	19. Report any observed adverse events immediately to the supervisor.			
	20. Before the recipient leaves, ensure you have scheduled their next dose as indicated. See COVID-19 Vaccination Boosters chart above.			
	21. Provide the patient a completed vaccination card. Encourage self-enrollment in VaxText.			
<b>E</b> <b>Document- ation</b>	Fully document vaccine in patient chart: date, lot number, expiration, manufacturer, injection site, vaccinator, EUA vaccine fact sheet date. This should be accomplished in EMR and/or VASE Plus.			

***Plan of Action in Case of Remediation***

Circle desired next steps and write in the deadline for completion, and date for the follow-up review.

- |  |  |
|--|--|
| 1. Watch video on immunization techniques and review CDC’s Vaccine Administration eLearn, available at:<br><a href="https://www.cdc.gov/vaccines/hcp/admin/resource-library.html">https://www.cdc.gov/vaccines/hcp/admin/resource-library.html</a> | 8. Read Vaccine Information Statements.  |
| 2. Review site/clinic protocols.   | 9. Be mentored by someone who has demonstrated appropriate immunization skills.                                      |
| 3. Review manuals, textbooks, wall charts, or other guides.  | 10. Role play (with other staff) interactions with parents and patients, including age appropriate comfort measures. |
| 4. Review package inserts.   | 11. Attend a skills training or other appropriate courses/training.  |
| 5. Review vaccine storage and handling guidelines or videos.   | 12. Attend healthcare customer satisfaction or cultural competency training.   |
| 6. Observe other staff with patients.  | 13. Renew CPR certification.   |
| 7. Practice injections.  | 14. Other _____  |

*File the Skills Assessment Checklist in the employee’s personnel folder.*

Plan of Action Deadline (if applicable): \_\_\_\_\_

Date of Next Review (if applicable): \_\_\_\_\_

Employee/Volunteer Signature & Date: \_\_\_\_\_

Supervisor Signature & Date: \_\_\_\_\_

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***Appendix B: Guidance and Skills Assessment Checklist for  
Individuals Involved in Storage and Handling of the  
Spikevax/Moderna Covid-19 Vaccine***

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**NOTE:** This training is in addition to guidance provided on routine storage and handling on the CDC website.

Specific training for [Storage and Handling of the Moderna COVID-19 Vaccine](#) is located on the CDC web site. ALL guidance from CDC MUST be followed when storing and handling Moderna COVID-19 vaccine.

Links to useful CDC resources:

1. [Moderna Presentations](#) (6/17/22)
2. Moderna Storage and Handling Summary
  - a. [Ages: 6 mos and older](#)
3. Moderna Storage and Handling Labels
  - a. [Blue cap with magenta bordered label \(6 mos through 5yrs\)](#)
  - b. [Red cap](#)
4. Moderna BUD Guidance and Labels
  - a. [Blue cap with magenta bordered label \(6 mos through 5 yrs\)](#)
  - b. [Red cap](#)
5. [Temperature Log when Transporting Vaccine at Refrigerated Temperatures](#)
6. [Refrigerator Storage Temperature Log \(Celsius\)](#)
7. [Refrigerator Storage Temperature Log \(Fahrenheit\)](#)
8. [Freezer Storage Temperature Log \(Celsius\)](#)
9. [Freezer Storage Temperature Log \(Fahrenheit\)](#)
10. [Vaccine Storage Troubleshooting Record for temperature excursions](#)
11. [U.S Pharmacopeia \(USP\) COVID-19 Vaccine Handling Guide](#) (includes labeling guidance for transporting individual syringes off site)

**Plan of Action**

Circle desired next steps and write in the deadline for completion, and date for the follow-up review.

1. Review site/clinic protocols.
2. Review manuals, textbooks, wall charts, or other guides.
3. Review package inserts.
4. Review vaccine storage and handling guidelines or videos.
5. Observe other staff with patients.
6. Read Vaccine Information Statements.
7. Be mentored by someone who has demonstrated appropriate skills.
8. Attend a skills training or other appropriate courses/training.
9. Other \_\_\_\_\_

*File the Skills Assessment Checklist in the employee's personnel folder.*

Plan of Action Deadline (if applicable): \_\_\_\_\_

Date of Next Review (if applicable): \_\_\_\_\_

Employee/Volunteer Signature & Date: \_\_\_\_\_

Supervisor Signature & Date: \_\_\_\_\_

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## *Appendix C: Guidance and Skills Assessment Checklist for Individuals Involved in Storage and Handling of the Comirnaty/ Pfizer- BioNTech Covid-19 Vaccine*

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**NOTE:** This training is in addition to guidance provided on routine storage and handling on the CDC website.

Specific training for [Storage and Handling of the Pfizer-BioNTech COVID-19 Vaccine](#) is located on the CDC web site. ALL guidance from CDC MUST be followed when storing and handling Pfizer BioNTech COVID-19 vaccine.

Links to useful resources:

1. [Pfizer Presentations](#) (6/17/22)
2. Pfizer Storage and Handling Summary
  - a. [Purple Cap: 12 and older](#)
  - b. [Gray Cap: 12 and older](#)
  - c. [Orange cap: 5 through 11 YOs](#)
  - d. [Maroon cap: 6 mos through 4 yrs](#)
3. Pfizer Storage and Handling Labels
  - a. [Purple Cap: 12 and older](#)
  - b. [Gray Cap: 12 and older](#)
  - c. [Orange cap: 5 through 11 YOs](#)
  - d. [Maroon cap: 6 mos through 4 yrs](#)
4. Pfizer BUD Guidance and Labels
  - a. [Purple Cap: 12 and older](#)
  - b. [Gray Cap: 12 and older](#)
  - c. [Orange cap: 5 through 11 YOs](#)
  - d. [Maroon cap: 6 mos through 4 yrs](#)
5. [Freezer Storage Guidelines](#) (page 53, #19)
6. [Delivery Checklist](#)
7. [Vaccine Expiration Date Tracking Tool](#)
8. [Refrigerator Storage Temperature Log \(Celsius\)](#)
9. [Refrigerator Storage Temperature Log \(Fahrenheit\)](#)
10. [Ultra-Cold Vaccine Storage Temperature Log \(Fahrenheit\) {5 YO+ formulations}](#)
11. [Ultra-Cold Vaccine Storage Temperature Log \(Celsius\) {5 YO+ formulations}](#)
12. [Vaccine Storage Troubleshooting Record for temperature excursions](#)
13. [Dry Ice Safety](#)
14. [U.S Pharmacopeia \(USP\) COVID-19 Vaccine Handling Guide](#) (includes labeling guidance for transporting individual syringes off site)

<p><b><i>Plan of Action</i></b></p> <p>Circle desired next steps and write in the deadline for completion, and date for the follow-up review.</p>	<ol style="list-style-type: none"> <li>1. Review site/clinic protocols.</li> <li>2. Review manuals, textbooks, wall charts, or other guides.</li> <li>3. Review package inserts.</li> <li>4. Review vaccine storage and handling guidelines or videos.</li> <li>5. Observe other staff with patients.</li> </ol>	<ol style="list-style-type: none"> <li>Read Vaccine Information Statements.</li> <li>6. Be mentored by someone who has demonstrated appropriate skills.</li> <li>7. Attend a skills training or other appropriate courses/training.</li> <li>8. Other _____</li> </ol>
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*File the Skills Assessment Checklist in the employee's personnel folder.*

Plan of Action Deadline (if applicable): \_\_\_\_\_

Date of Next Review (if applicable): \_\_\_\_\_

Employee/Volunteer Signature & Date: \_\_\_\_\_

Supervisor Signature & Date: \_\_\_\_\_

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***Appendix D: Guidance and Skills Assessment Checklist for  
Individuals Involved in Storage and Handling of the Janssen  
(J&J) Covid-19 Vaccine***

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**NOTE:** This training is in addition to guidance provided on routine storage and handling on the CDC website.

Specific training for [Storage and Handling of the J&J COVID-19 Vaccine](#) is located on the CDC web site. ALL guidance from CDC MUST be followed when storing and handling Janssen J&J COVID-19 vaccine.

Links to useful resources:

1. [J&J Vaccine Storage and Handling Summary](#)
2. [Vaccine Preparation and Administration](#)
3. [Refrigerator Storage Temperature Log \(Celsius\)](#)
4. [Refrigerator Storage Temperature Log \(Fahrenheit\)](#)
5. [J&J Storage and Handling Summary](#)
6. [J&J Vaccine Storage and Handling Labels with BUD](#)
7. [Transport Guidance Summary](#)
8. [Temperature Log when Transporting Vaccine at Refrigerated Temperatures](#)
9. [Vaccine Storage Troubleshooting Record for temperature excursions](#)
10. [Vaccine Expiration Date Tracking Tool](#)
11. [U.S Pharmacopeia \(USP\) COVID-19 Vaccine Handling Guide](#) (includes labeling guidance for transporting individual syringes off site)

***Plan of Action***

Circle desired next steps and write in the deadline for completion, and date for the follow-up review.

- |  |  |
|--|--|
| 1. Review site/clinic protocols.                             | 6. Read Vaccine Information Statements.                            |
| 2. Review manuals, textbooks, wall charts, or other guides.  | 7. Be mentored by someone who has demonstrated appropriate skills. |
| 3. Review package inserts.                                   | 8. Attend a skills training or other appropriate courses/training. |
| 4. Review vaccine storage and handling guidelines or videos. | 9. Other _____   |
| 5. Observe other staff with patients.                        |  |

*File the Skills Assessment Checklist in the employee's personnel folder.*

Plan of Action Deadline (if applicable): \_\_\_\_\_

Date of Next Review (if applicable): \_\_\_\_\_

Employee/Volunteer Signature & Date: \_\_\_\_\_

Supervisor Signature & Date: \_\_\_\_\_

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***Appendix E: Guidance and Skills Assessment Checklist for  
Individuals Involved in Storage and Handling of the Novavax  
Covid-19 Vaccine***

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**NOTE:** This training is in addition to guidance provided on routine storage and handling on the CDC website.

Specific training for [Storage and Handling of the Novavax COVID-19 Vaccine](#) is located on the CDC web site. ALL guidance from CDC MUST be followed when storing and handling Novavax COVID-19 vaccine.

Links to useful resources:

1. [Novavax Vaccine Preparation and Administration Summary](#) (8/22/22)
2. [Novavax Vaccine Storage and Handling Summary](#)
3. [Novavax Vaccine Storage and Handling Labels](#)
4. [Temperature Log when Transporting Vaccine at Refrigerated Temperatures](#)
5. [Refrigerator Storage Temperature Log \(Celsius\)](#)
6. [Refrigerator Storage Temperature Log \(Fahrenheit\)](#)
7. [Vaccine Storage Troubleshooting Record for temperature excursions](#)
8. [Vaccine Expiration Date Tracking Tool](#)
9. [U.S Pharmacopeia \(USP\) COVID-19 Vaccine Handling Guide](#) (includes labeling guidance for transporting individual syringes off site)

***Plan of Action***

Circle desired next steps and write in the deadline for completion, and date for the follow-up review.

- |   |   |
|---|---|
| 10. Review site/clinic protocols.                             | 15. Read Vaccine Information Statements.                            |
| 11. Review manuals, textbooks, wall charts, or other guides.  | 16. Be mentored by someone who has demonstrated appropriate skills. |
| 12. Review package inserts.                                   | 17. Attend a skills training or other appropriate courses/training. |
| 13. Review vaccine storage and handling guidelines or videos. | 18. Other _____   |
| 14. Observe other staff with patients.                        |   |

*File the Skills Assessment Checklist in the employee's personnel folder.*

Plan of Action Deadline (if applicable): \_\_\_\_\_

Date of Next Review (if applicable): \_\_\_\_\_

Employee/Volunteer Signature & Date: \_\_\_\_\_

Supervisor Signature & Date: \_\_\_\_\_

