

Communications Toolkit: Helping Oregonians with Underlying Conditions Get COVID-19 Vaccinations

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**Resources for your communication needs:
Email template, Newsletter content, Social media content**



A Message from the Oregon Health Authority

The Oregon Health Authority thanks you for helping people get vaccinated against COVID-19. Your partnership will help save lives. We are committed to sharing information with you as we continue to roll out Oregon’s vaccination program.

Our Communications Toolkit provides you with the basic tools, links and templates you will need to do outreach and answer questions. Please feel free to customize this content for the people you reach. You are an important part of the state’s effort to make sure Oregonians have accurate information about where they can go for a vaccine. If you have questions about this toolkit, please reach out to the OHA Health Information Center at COVID.19@dhsoha.state.or.us.

Find the Communications Toolkit at <https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le3646.pdf>.

Talking Points/Key Messages



WHO can get a vaccine? WHEN?

Oregon is doing vaccinations in phases. Only people in eligible groups can get vaccinated. Healthcare workers, people living in long-term care facilities, teachers, childcare providers, and people age 65 and older can already get vaccinated.

WHEN: Starting March 29, 2021

WHO: Adults age 45–64 with one or more Centers for Disease Control and Prevention (CDC)-defined underlying health conditions with increased risk of severe illness from COVID-19:

- Cancer
- Chronic kidney disease
- Chronic lung diseases, including COPD (chronic obstructive pulmonary disease), asthma (moderate-to-severe), interstitial lung disease, cystic fibrosis, and pulmonary hypertension
- Dementia or other neurological conditions
- Diabetes (type 1 or type 2)
- Down syndrome
- Heart conditions (such as heart failure, coronary artery disease, cardiomyopathies, or hypertension)
- HIV infection
- Immunocompromised state (weakened immune system)
- Liver disease
- Overweight and obesity (defined as body mass index (BMI) greater than 25 kg/m²)
- Pregnancy
- Sickle cell disease or thalassemia
- Smoking, current or former
- Solid organ or blood stem cell transplant
- Stroke or cerebrovascular disease
- Substance use disorder

WHEN: Starting April 5, 2021

WHO: Adults age 16–44 with one or more of the above CDC-defined underlying health conditions with increased risk listed above.

 [Vaccine Sequencing Information](#)

Underlying Health Conditions Questions

1. Will people with one or more underlying health conditions with increased risk have to show proof of their condition with a note from their doctor?

No, you do not need to show proof. You are not required to call your doctor or access your medical chart to prove you have an underlying condition.

2. Will there be any prioritization by age in the 16–64 age range or will they all be eligible at once?

Yes. Adults age 45-64 with one or more CDC-defined underlying health conditions with increased risk became eligible March 29. Adults age 16–44 will become eligible no later than April 5, 2021. People age 16 and older who are pregnant are also eligible April 5.

3. Where will people with one or more underlying health conditions with increased risk get vaccinated?

Adults age 16-64 with underlying health conditions with increased risk will get vaccinated through high throughput vaccination sites/mass vaccination events, through local public health authorities (LPHA), Federally Qualified Health Centers, pharmacies, and through partnerships with community- and faith-based organizations.

4. Can I get vaccinated if I'm taking medication?

Yes, you can. There is no data available at this time to indicate that any of the vaccines interact with any other drugs. See emergency use authorization (EUA) fact sheets for Pfizer, (<https://www.fda.gov/media/144413/download>), Moderna (<https://www.fda.gov/media/144637/download>) and Johnson & Johnson (<https://www.fda.gov/media/146304/download>).

5. Is the vaccine safe if I have allergies or an allergic reaction to other shots?

You should talk to your doctor about your specific situation. Let them know of any history of allergies or reactions to vaccines or injections. The CDC recommends you do NOT get a COVID-19 vaccine dose if you've had:

- Severe allergic reaction (like anaphylaxis) after your first COVID-19 vaccine dose.
- Immediate allergic reaction of any kind to a past dose of a COVID-19 vaccine, or any of its parts (including polyethylene glycol).
- Immediate allergic reaction of any kind to polysorbate.

If you have a history of immediate allergic reaction of any kind to any vaccine, injection, food, medication or insect venom, or if you have a history of anaphylaxis, you should be monitored for 30 minutes after getting your COVID-19 vaccine.

Pregnancy, Breastfeeding, Fertility Questions

1. Should I get vaccinated if I'm pregnant?

Getting vaccinated is a personal choice. Any of the COVID-19 vaccines available in the U.S. can be offered to people who are pregnant or breastfeeding. If you have questions about getting vaccinated, a conversation with your doctor might help, but is not required.

Although the overall risk of severe illness is low, pregnant people are at an increased risk for severe illness from COVID-19 when compared to non-pregnant people. Severe illness means illness that results in hospitalization or death. Also, pregnant people with COVID-19 might be at increased risk of negative pregnancy outcomes, such as preterm birth, compared with pregnant people without COVID-19.

2. Is it safe to get vaccinated if I'm pregnant? Could the vaccine harm my baby?

Limited data are available about the safety of COVID-19 vaccines for people who are pregnant. Based on how these vaccines work in the body, experts believe they are unlikely to pose a specific risk for people who are pregnant.

CDC and the U.S. Food and Drug Administration (FDA) have [safety monitoring systems](#) in place to gather information about vaccination during pregnancy and will closely monitor that information. Most of the pregnancies in these systems are ongoing, so we don't yet have information on the outcomes of these pregnancies. We need to continue to follow pregnancies long-term to understand effects on pregnancy and infants.

The Moderna and Pfizer-BioNTech vaccines are [mRNA vaccines](#) that do not contain the live virus that causes COVID-19 and, therefore, cannot give someone COVID-19. Additionally, mRNA vaccines do not interact with a person's DNA or cause genetic changes because the mRNA does not enter the nucleus of the cell, which is where our DNA is kept. Learn more about [how COVID-19 mRNA vaccines work](#).

The Johnson & Johnson COVID-19 vaccine is a viral vector vaccine, meaning it uses a modified version of a different virus (the vector) to deliver important instructions to our cells. Viral vector technology has been used for other vaccine development programs. Vaccines that use the same viral vector have been given to pregnant people in all trimesters of pregnancy, including in a large-scale Ebola vaccination trial. No adverse pregnancy-related outcomes, including adverse outcomes that affected the infant, were associated with vaccination in these trials. Learn more about [how viral vector vaccines work](#).

3. What are the vaccine side effects for pregnant people?

Side effects can occur after receiving any of the available COVID-19 vaccines, especially after the second dose for those that require two doses. Pregnant people have not reported different side effects from non-pregnant people after vaccination with mRNA vaccines (Moderna and Pfizer-BioNTech vaccines). Side effects may include sore arm, muscle aches, joint pain, tiredness, headache, chills, and fever. If you have a fever after vaccination, you should take acetaminophen (Tylenol), because fever has been linked to negative pregnancy outcomes.

4. Are the vaccines safe if I'm breastfeeding?

Clinical trials for the COVID-19 vaccines currently authorized in the United States did not include people who are breastfeeding. Because the vaccines have not been studied on lactating people, there are no data available on:

- The safety of COVID-19 vaccines in lactating people
- The effects of vaccination on the breastfed infant
- The effects on milk production or excretion

The COVID-19 vaccines authorized now are non-replicating vaccines, meaning they are able to create an immune response but do not reproduce inside host cells. Because non-replicating vaccines pose no risk for lactating people or their infants, COVID-19 vaccines are also thought to not be a risk to the breastfeeding infant. Therefore, lactating people may choose to be vaccinated.

5. Could the vaccines affect my fertility?

If you are trying to get pregnant now or if you want to get pregnant in the future, you can get a COVID-19 vaccine when one is available to you.

There is no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems. If you are trying to get pregnant, you do not need to avoid pregnancy after getting a COVID-19 vaccine. Like all vaccines, scientists are studying COVID-19 vaccines carefully for side effects now and will report findings as they become available.

For more questions about the COVID-19 vaccine, see our [Frequently Asked Questions](#).



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