Interim Post-Vaccination Considerations for School Employees (February 5, 2021)

Table 1: Considerations for Persons with Systemic Signs and Symptoms Pre- and Post- COVID-19 Vaccination

<table>
<tr><td rowspan="3">Recommended Infection Prevention and Control Strategies</td><td colspan="4">Status of Individual with Systemic Signs and Symptoms of COVID-19 Infection[1, 2]</td></tr>
<tr><td rowspan="2">Unvaccinated</td><td colspan="2">Received COVID-19 Vaccination in the prior 3 days (including day of vaccination, which is considered Day 1).[7]</td><td rowspan="2">Partially[4] or Fully[5] Vaccinated</td></tr>
<tr><td>Symptoms unlikely to be from COVID-19 vaccination[1] (e.g., cough, shortness of breath, rhinorrhea, loss of taste/smell).</td><td colspan="2">Symptoms may be vaccine-related, possible COVID-19, or other unrelated illness[2] (e.g., chills, headache, myalgia, arthralgia, fatigue).</td></tr>
<tr><td>Exclude from School</td><td>YES</td><td>YES</td><td>NO – if afebrile[3] and symptoms[2] occur within the first 48 hours and feels well enough to work.</td><td>YES – if fever of 100.4F or greater or if symptoms persist for more than 2 days.</td><td>YES</td></tr>
<tr><td>Refer for Clinical Evaluation</td><td>YES
Refer to Row D in Exclusion Guidance Decision Tree.</td><td>YES</td><td colspan="2">YES – if symptoms do not improve and persist for more than 2 days.
Not Recommended - if symptoms resolve within 2 days.</td><td>YES
Refer to Row D in Exclusion Guidance Decision Tree.</td></tr>
<tr><td rowspan="2">Perform COVID-19 Test
(Health Care Provider may decide to test based on clinical assessment.)</td><td>YES
NOT Recommended – if less than 90 days (3 months) from last positive test.</td><td>YES
Not Recommended – if less than 90 days (3 months) from last positive test.</td><td colspan="2">YES – if symptoms do not improve and persist for more than 2 days.
Not Recommended – if symptoms resolve within 2 days.
Not Recommended – if less than 90 days (3 months) from last positive test.</td><td>NOT Recommended – if less than 90 days (3 months) from last positive test.</td></tr>
<tr><td colspan="4">If SARS-CoV-2 test Positive: Refer to Row A in Exclusion Guidance Decision Tree.
If SARS-CoV-2 test Negative[6]: Refer to Row B in Exclusion Guidance Decision Tree.</td></tr>
<tr><td>Place in Isolation</td><td colspan="2">YES – if SARS-CoV-2 test Positive: Stay home at least 10 calendar days from onset of symptoms AND
for 24 hours with no fever (without fever-reducing medication) AND improvement of symptoms.</td><td colspan="2">NO - if afebrile3 and symptoms occur within the first 48 hours and feels well enough to work.
Recommended - if symptoms persist for more than 2 days and pending test results.
YES - if SARS-CoV-2 test Positive.</td><td>YES – if SARS-CoV-2 test Positive.</td></tr>
</table>

Table 2: Considerations for Asymptomatic Persons Pre- and Post- COVID-19 Vaccination

Recommended Infection Prevention and Control Strategies	Status of Asymptomatic Individual		
	Unvaccinated	**Received COVID-19 vaccination in the prior 3 days (including day of vaccination, which is considered Day 1).**	**Partially[2] or Fully[3] Vaccinated**
Place in Quarantine if Named as a Close Contact to a Known Case of COVID-19	YES – if no history of previous positive test for SARS-CoV-2; or if greater than 90 days (3 months) from last positive test. Not Recommended – if less than 90 days (3 months) from last positive test.	YES – if no history of previous positive test for SARS-CoV-2; or if greater than 90 days (3 months) from last positive test. Not Recommended – if less than 90 days (3 months) from last positive test.	YES – if no history of previous positive test for SARS-CoV-2; or if greater than 90 days (3 months) from last positive test. Not Recommended – if less than 90 days (3 months) from last positive test.

1 Presence of ANY systemic signs and symptoms consistent with COVID-19 infection (e.g., cough, shortness of breath, rhinorrhea, sore throat, loss of taste or smell) or another infectious etiology (e.g., influenza) that are not typical for post-vaccination signs and symptoms.
2 Signs and symptoms *that may be* from either COVID-19 vaccination, SARS-CoV-2 infection, or another infectious etiology (e.g., fever of 100.4 or higher, fatigue, headache, chills, myalgia, arthralgia). **For symptomatic persons who are close contacts to a COVID-19 case, isolate, send home, and refer for testing and clinical evaluation**.
3 Must be afebrile for at least 24 hours to return to work.
4 Person receiving one dose of a two-dose vaccine series.
5 Person receiving one dose in a one-dose vaccine regimen or two doses of a two-dose vaccine series AND is two full weeks post-completion of vaccine series.
6 If performed, a negative SARS-CoV-2 antigen test in a person who has signs and symptoms that are typical for COVID-19 infection should be confirmed by SARS-CoV-2 nucleic acid amplification test (NAAT), e.g., RT-PCR test.
7 Individuals who are close contacts to COVID-19 case should follow quarantine guidelines; symptomatic close contacts should be tested for COVID-19.

Post-Vaccination Signs and Symptoms: General Information

- Depending on vaccine product, age group, and vaccine dose, approximately 80–89% of vaccinated persons develop at least one local symptom and 55–83% develop at least one systemic symptom following vaccination.
- Signs and symptoms most typically seen after COVID-19 vaccination include:
  - Local: pain, swelling, or redness at injection site.
  - Systemic: fever, fatigue, headache, chills, myalgia (muscle aches/pain), and arthralgia (joint aches/pain).
- Immediate hypersensitive reactions (e.g., anaphylaxis, urticaria), and injection site symptoms are not consistent with SARS-CoV-2 infection and should be managed per usual protocols for vaccine side effects.
- Based on preliminary data from mRNA COVID-19 vaccine trials , most systemic post-vaccination signs and symptoms are mild to moderate in severity, occur within the first three days of vaccination (the day of vaccination and following two days, with most occurring the day after vaccination), resolve within 1-2 days of onset, and are more frequent and severe following the second dose and among younger persons compared to those who are older (>55 years).