Welcome to
Talking with Patients about COVID-19 Bivalent Booster Doses

Vaccinate ALL 58
Together we can end the pandemic.

September 8, 2022

12:00PM-1:00PM

#THIS IS OUR SHOT #VACUNATE YA

Housekeeping

For Panelists: Please remember to mute yourself when not speaking.

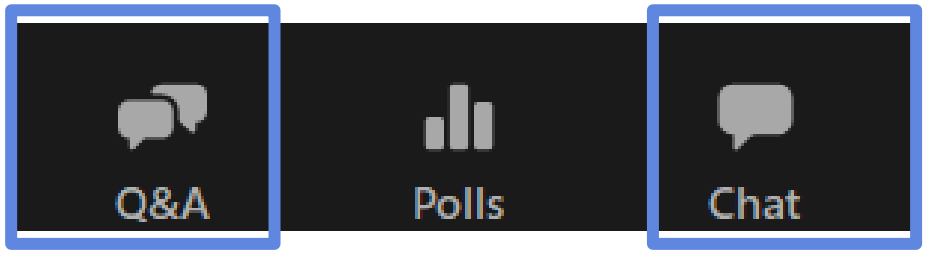
For Attendees: This webinar is being recorded. Please access today's slides and recording through the following link: https://eziz.org/covid/crucialconversations

Please use "Q&A" to ask questions.

For post-webinar questions, contact rachel.jacobs@cdph.ca.gov.

Questions & Answers

During today's session, please use the Q&A panel to ask your questions.



Resource links will be dropped into, “Chat”

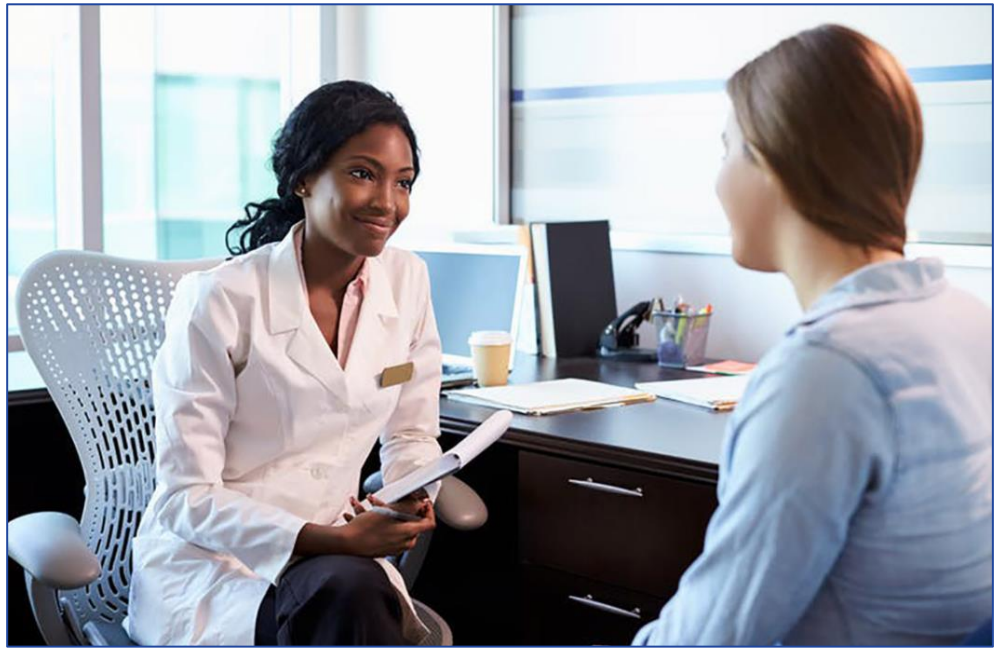
Agenda: Thursday, September 8, 2022

No.	Item	Speaker(s)	Time (PM)
1	Welcome	Rachel Jacobs (CDPH)	12:00 – 12:05
2	Talking with Patients about Bivalent Booster Doses	Ilan Shapiro, MD, MBA, FAAP, FACHE	12:05 – 12:40
Questions & Answers			12:40 – 12:55
3	Resources, Poll, and Wrap-Up	Rachel Jacobs (CDPH)	12:55 – 1:00

Webinar Objectives

Participants will learn:

- The evolving landscape of COVID-19 variants
- Updated recommendations for bivalent booster doses
- Communication strategies for effective patient conversations



Poll: CDPH appreciates your feedback!

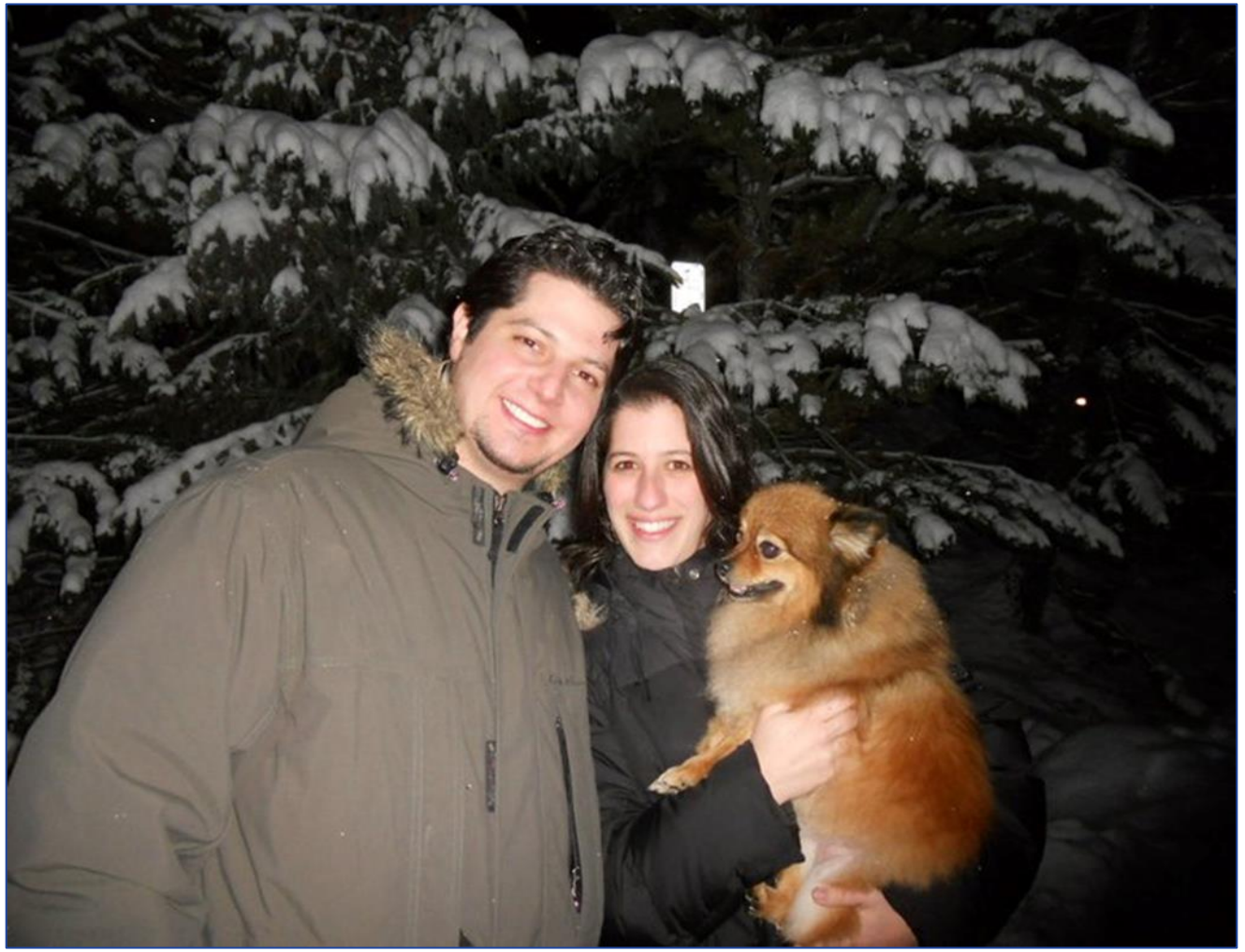
How confident are you in your ability to effectively discuss COVID-19 bivalent booster doses with patients?

- ❑ Very confident
- ❑ Confident
- ❑ Somewhat confident
- ❑ Slightly confident
- ❑ Not confident

Talking with Patients about Bivalent Booster Doses

Ilan Shapiro, MD, MBA, FAAP, FACHE

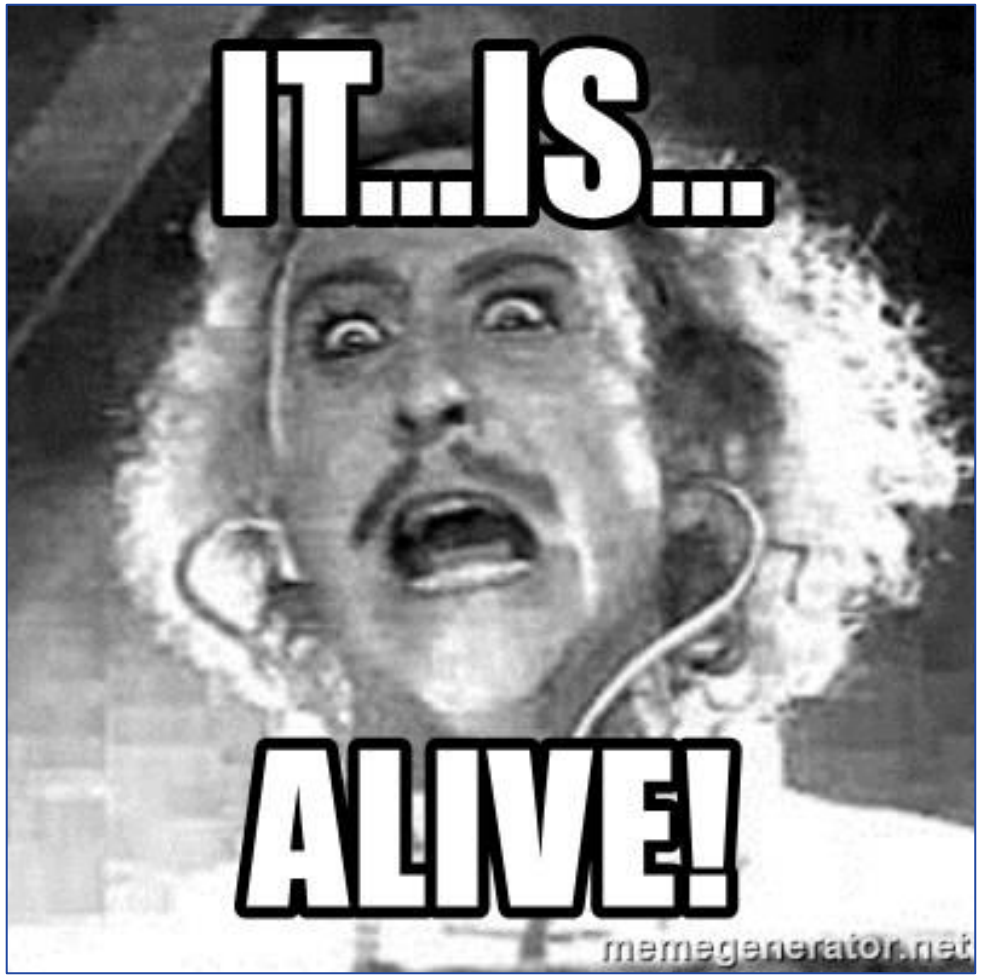
#VacunateYa



How Did We Get Here?

Changes in COVID-19

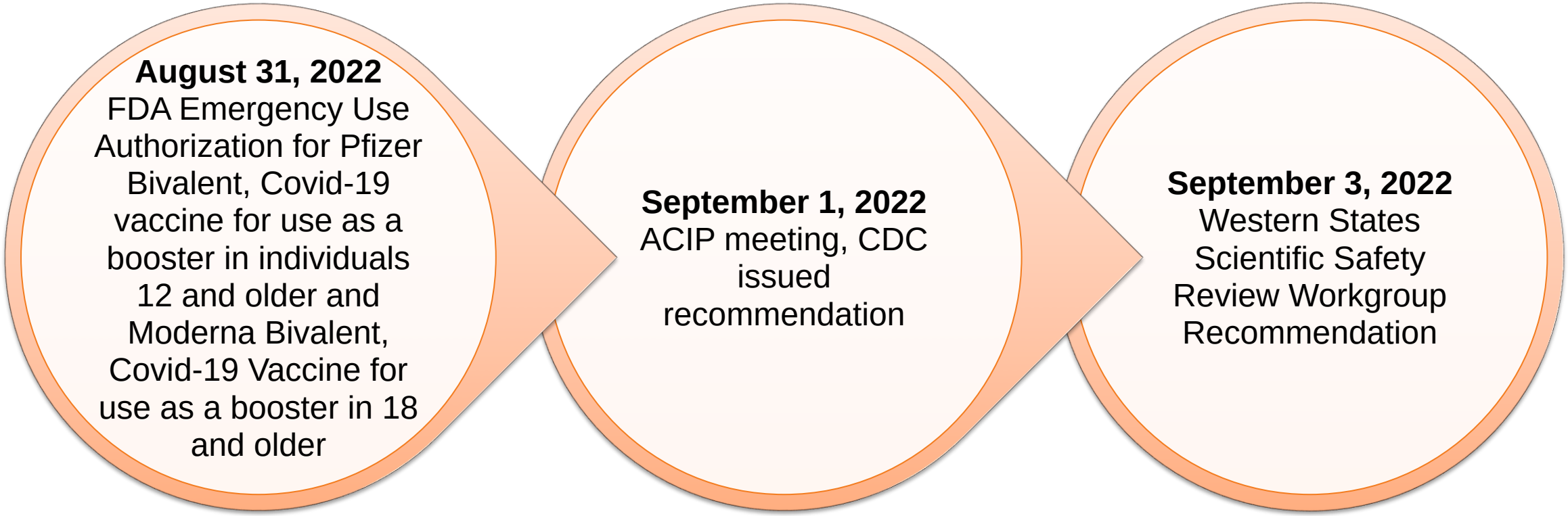
- Ancestral → Delta → Omicron
- Let's talk about the percent: did it change?
- And now... what?



Some Important Questions

- Are we going to have multiple “boosters”?
- Are they going to be updated all the time?
- Do we need to move to...?

Where Are We Now?
Bivalent Booster Dose Authorization & Recommendations



FDA Press Announcement 8/31/22 | CDC Press Release 9/1/22
Western States Scientific Safety Review Workgroup Recommendation 9/3/22

Booster Dose Vaccination Trends: California

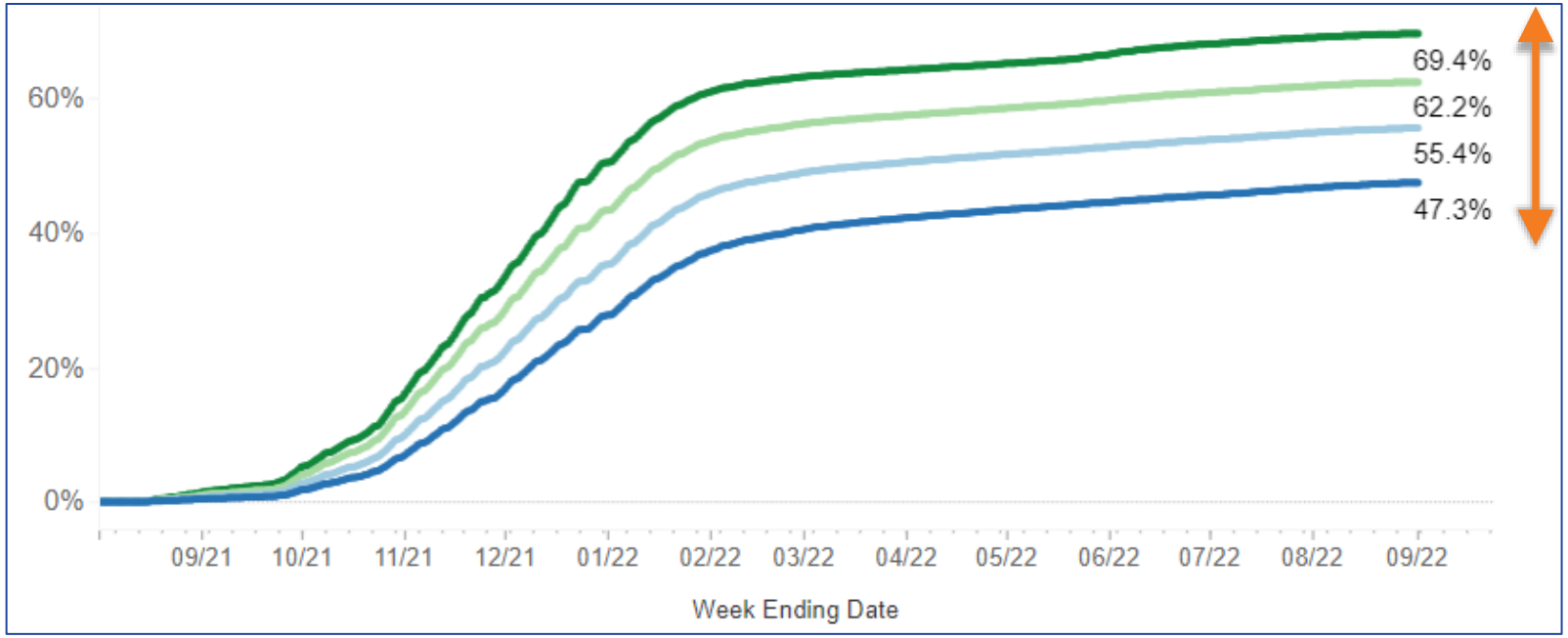
as of September 1, 2022

- **72%** of Californians have received their primary series; **58.8%** of eligible Californians have received a booster dose.
- Graph shows booster vaccination rates by county
  - Darker blue = higher rates of vaccination

Disparities in Booster Dose Vaccination Rates: California

as of September 1, 2022

- Disparities in vaccination coverage rates by Vaccine Equity Metric Quartile
- People living in the Most Healthy Places are much more likely to have received a booster dose than people living in Least Healthy Places



What Do We Know?

- The authorized bivalent COVID-19 vaccines, or updated boosters, include
  - an mRNA component of the original strain to provide an immune response that is broadly protective against COVID-19 and
  - an mRNA component in common between the omicron variant BA.4 and BA.5 lineages to provide better protection against COVID-19 caused by the omicron variant.
- Individuals who receive a bivalent COVID-19 vaccine may experience side effects commonly reported by individuals who receive authorized or approved monovalent mRNA COVID-19 vaccines.

What Do We Know?
Bivalent Booster Dose Authorization & Recommendations

- People ages **12 years and older** are recommended to receive 1 age-appropriate bivalent mRNA booster dose after completion of any Food and Drug Administration (FDA)-approved or FDA-authorized monovalent primary series or previously received monovalent booster dose(s).
  - Updated boosters can be administered at least **2 months** after completion of the primary series or at least **2 months** after the last monovalent booster dose
  - Bivalent booster recommendation is the **same** for immunocompromised and immunocompetent people

What Do We Know?
Bivalent Booster Dose Authorization & Recommendations

- Individuals **18 years** of age and older are eligible for a **single booster dose** of the Moderna COVID-19 Vaccine, Bivalent if it has been at least two months since they have completed primary vaccination or have received the most recent booster dose with any authorized or approved monovalent COVID-19 vaccine.
- Individuals **12 years of age and older** are eligible for a **single booster** dose of the Pfizer-BioNTech COVID-19 Vaccine, Bivalent if it has been at least two months since they have completed primary vaccination or have received the most recent booster dose with any authorized or approved monovalent COVID-19 vaccine.

What Do We Know?
Deauthorization of Monovalent Booster Doses

- **The new booster recommendation replaces all prior booster recommendations for this age group.**
  - Monovalent mRNA vaccines are no longer authorized as a booster dose for people ages 12 years and older.
- Children ages 5–11 years are recommended to continue receiving 1 monovalent mRNA booster dose if eligible.
- Only monovalent vaccines are approved or authorized for primary series doses.
- J&J vaccine remains available as first booster for certain people.

Booster “Reset”

- Recommendations are now simplified
- Change from dose counting to 1 bivalent booster for everyone eligible
- If eligible, a bivalent booster should not be denied based on total number of doses.

Vaccination history	→	Next dose
Primary series	At least 2 months →	1 bivalent booster dose
Primary series + 1 booster	At least 2 months →	1 bivalent booster dose
Primary series + 2 booster	At least 2 months →	1 bivalent booster dose

Summary: Clinical Trial Data

- Bivalent booster doses of both Moderna & Pfizer-BioNTech COVID-19 vaccines **increase immune response** in those who have completed a primary series and a previous booster
  - Compared with ancestral booster dose
    - Demonstrated superior response to Omicron
    - Demonstrated non-inferior response to ancestral strain
- Similar reactogenicity profile to primary series (and ancestral booster dose)
- Data from clinical trial limited in size, age, and bivalent booster type

Bivalent COVID-19 Vaccines:
Data to Inform Recommendations

- Experience from using COVID-19 vaccine mRNA platform for nearly 2 years and over 600 million doses in the United States alone
  - Extensive vaccine effectiveness studies as well as robust post-authorization safety data across multiple platform
- Clinical (human) data from bivalent COVID-19 vaccines in >1700 persons
  - Includes bivalent vaccines with Beta and Omicron variants, both from manufacturers and NIH studies
  - Over 1400 individuals received bivalent vaccine with **Omicron** component specifically
  - While there are subtle differences in mutations between BA.1 and BA.4/BA.5 spike protein sequences, do not anticipate differences in safety or reactogenicity of vaccines based on these limited mutations
  - Overall composition of the vaccine as well as total antigenic load are the same as current booster doses
- Antigenic cartography and antibody studies
- Modeling data

Summary: Balance of Benefits and Harms for Bivalent Booster Doses

- Bivalent booster dose of both Moderna & Pfizer-BioNTech COVID-19 vaccines **increases immune response** in those who have completed a primary series and a previous booster
- Similar reactogenicity profile to primary series and ancestral booster dose
- Myocarditis risk following a bivalent booster dose is unknown, but anticipate similar risk to what is seen after monovalent booster doses
- Modeling projects more hospitalizations and deaths averted when booster doses are recommended for **persons ≥18 years** compared to only persons ≥50 years, and when the booster campaign begins in **September** compared to November 2022
- Benefits and harms for the U.S. population are best assessed when clinical trial and study populations are optimally representative of the U.S. population

Looking to the Future

- Pfizer is planning to submit an application for an Omicron-adapted bivalent vaccine for children 5 through 11 years of age to the FDA in early October.
- Bivalent vaccine for children 6 months through 4 years application to follow

Discussing Bivalent Booster Doses: Patient FAQs

Q: Can I get a bivalent booster dose now, if I just recently got my second monovalent booster?

A: You will need to wait until two months have passed since your last booster dose. Get the bivalent booster shot as soon as you are eligible, and you will have expanded protection!

Discussing Bivalent Booster Doses: Patient FAQs

Q: How long do I need to wait to get the bivalent booster if I have had COVID-19?

A:

- People with known current SARS-CoV-2 infection should defer any COVID-19 vaccination, including booster vaccination, at least until recovery from the acute illness (if symptoms were present), and criteria to discontinue isolation have been met.
- People who recently had SARS-CoV-2 infection **may consider** delaying a primary series dose or booster dose by 3 months from symptom onset or positive test (if infection was asymptomatic).

Discussing Bivalent Booster Doses: Patient FAQs

Q: Can I receive the COVID-19 bivalent booster and the flu vaccine together?

A: Yes. Extensive experience with non-COVID-19 vaccines has demonstrated that immune response and adverse event profiles are generally similar when vaccines are administered simultaneously as when they are administered alone.

Coadministration with Flu Vaccine

- Providers should offer influenza and COVID-19 vaccines at the same visit, if eligible.
- With both influenza and SARS-CoV-2 circulating, getting both vaccines is important for prevention of severe disease, hospitalization, and death.
- Getting both vaccines at the same visit increases the chance that a person will be up to date with their vaccinations.

Discussing Bivalent Booster Doses: Patient FAQs

Can we “mix and match” the new bivalent booster dose brand with another brand?

Yes. Any homologous or heterologous age-appropriate mRNA vaccine can be used if a booster dose is FDA-authorized for use in a specified population.

Talking with Our Patients and Communities

COVID-19 Vaccine Language Tips

Do Say	Don't Say
Vaccination	Injection or shot
A safe and effective vaccine	A vaccine developed quickly
Authorized by FDA based on clinical testing	Approved by FDA; Operation Warp Speed; Emergency Use Authorization*
Get the latest information	There are things we still don't know
Keep your family safe; keep those most vulnerable safe	Keep your country safe
Public Health	Government
Health/medical experts and doctors	Scientists
People who have questions	People who are hesitant, skeptical, resistant, or "anti-vaxxers"

* *The perceived speed of vaccine development is a current barrier among many audiences.*
These recommendations are based partly on research conducted by the de Beaumont Foundation.

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Conversation Methodology

3	5	3
Steps to Start the Conversation	Key Messages	Post-Conversation Steps

To address patients concerns related to myths and misinformation, use the 3-5-3 method.

3 Steps to Initiating Conversations

1

Ask and listen to the answer

“What do you think about the vaccine?”

“Why do you feel that way?”

“What concerns do you have about the vaccine?”

2

Create an alignment of safety

"I would be scared too. Let’s do what’s safe here.”

“We both want what's safest for you.”

3

Find common goals

“We all want to be able to safely be with our loved ones again."

“What reasons would motivate you to get vaccinated?”

Find their personally motivating reason.

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Key Messages

1

The vaccine will keep you safe.

The vaccine will protect you from getting very sick. Over 220 million Americans have been safely vaccinated and are now protected. Over 100 million Americans have received a booster dose.

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Key Messages

2

Mild side effects are common.

Side effects are a sign that your body is protecting you.

For a few days after vaccination, many people temporarily feel:

- Sore arm (at administration site)
- Tired or fatigue
- Headache
- Muscle pain
- Joint pain

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Key Messages

3

Vaccines are very effective.

Each vaccine is extremely effective at preventing hospitalization and death from COVID-19 and its variants.

Key Messages

4

The vaccine is built on 20 years of research and science.

It is good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

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Key Messages

5

Have questions? Please ask.

I am glad you want to know more. Ultimately, the choice is yours. Today or when you're ready, go to myturn.ca.gov or text your zip code to GETVAX or VACUNA to get your vaccine.

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3 Steps Post-Conversation

1

Acknowledge their agency and personal choice

“I want you to get vaccinated today, but ultimately it’s your choice.”

“I'm here as a resource to help you."

2

Keep lines of communication open

Trust is a journey. Give folks a way to reach you that you are comfortable with as they consider their decision.

3

Offer to find a vaccine

Offer myturn.ca.gov or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.

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Questions & Answers

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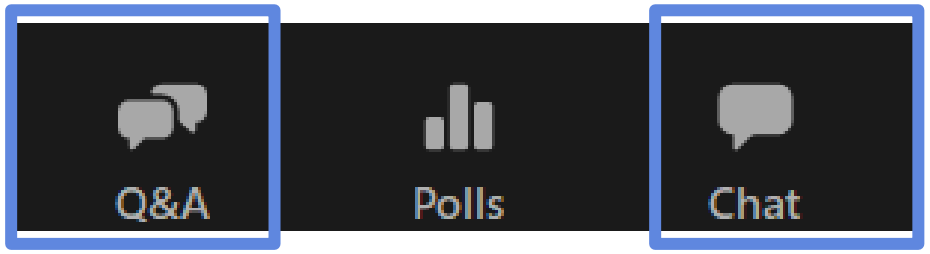

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Poll & Resources

Rachel Jacobs, CDPH

Poll: CDPH appreciates your feedback!

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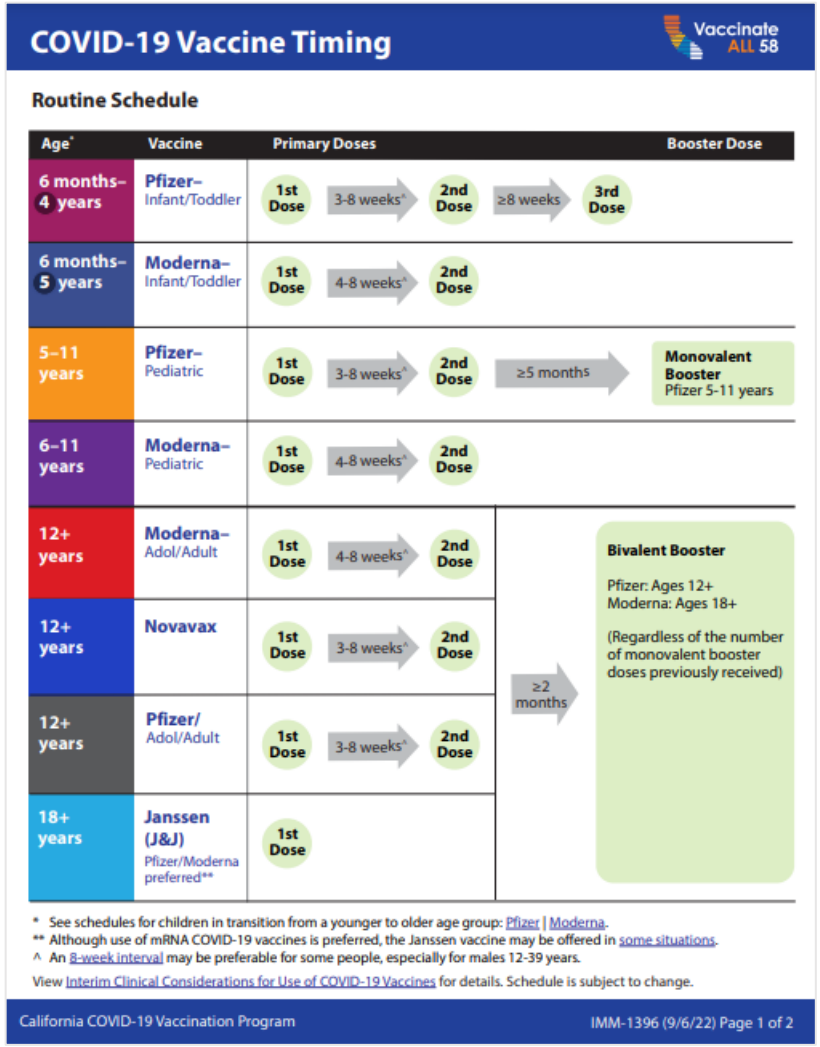
Job Aid: COVID-19 Vaccine Timing Guide



COVID-19 Vaccine Timing

Vaccinate ALL 58

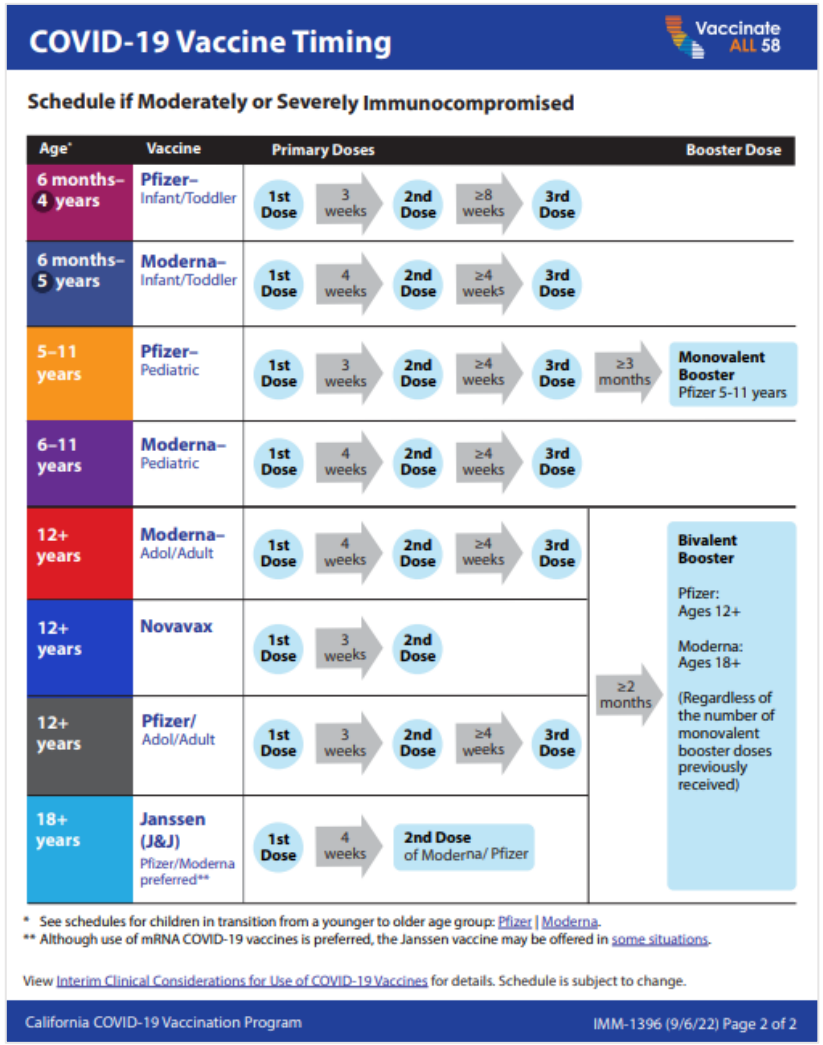
Routine Schedule

Age*	Vaccine	Primary Doses						Booster Dose
6 months–4 years	Pfizer–Infant/Toddler	1st Dose	3-8 weeks^	2nd Dose	≥8 weeks	3rd Dose		
6 months–5 years	Moderna–Infant/Toddler	1st Dose	4-8 weeks^	2nd Dose				
5–11 years	Pfizer–Pediatric	1st Dose	3-8 weeks^	2nd Dose	≥5 months			Monovalent Booster Pfizer 5-11 years
6–11 years	Moderna–Pediatric	1st Dose	4-8 weeks^	2nd Dose				
12+ years	Moderna–Adol/Adult	1st Dose	4-8 weeks^	2nd Dose	≥2 months			Bivalent Booster Pfizer: Ages 12+ Moderna: Ages 18+ (Regardless of the number of monovalent booster doses previously received)
12+ years	Novavax	1st Dose	3-8 weeks^	2nd Dose				
12+ years	Pfizer/Adol/Adult	1st Dose	3-8 weeks^	2nd Dose				
18+ years	Janssen (J&J) Pfizer/Moderna preferred**	1st Dose						

* See schedules for children in transition from a younger to older age group: Pfizer | Moderna.
** Although use of mRNA COVID-19 vaccines is preferred, the Janssen vaccine may be offered in some situations.
^ An 8-week interval may be preferable for some people, especially for males 12-39 years.

View Interim Clinical Considerations for Use of COVID-19 Vaccines for details. Schedule is subject to change.

California COVID-19 Vaccination Program IMM-1396 (9/6/22) Page 1 of 2



COVID-19 Vaccine Timing

Vaccinate ALL 58

Schedule if Moderately or Severely Immunocompromised

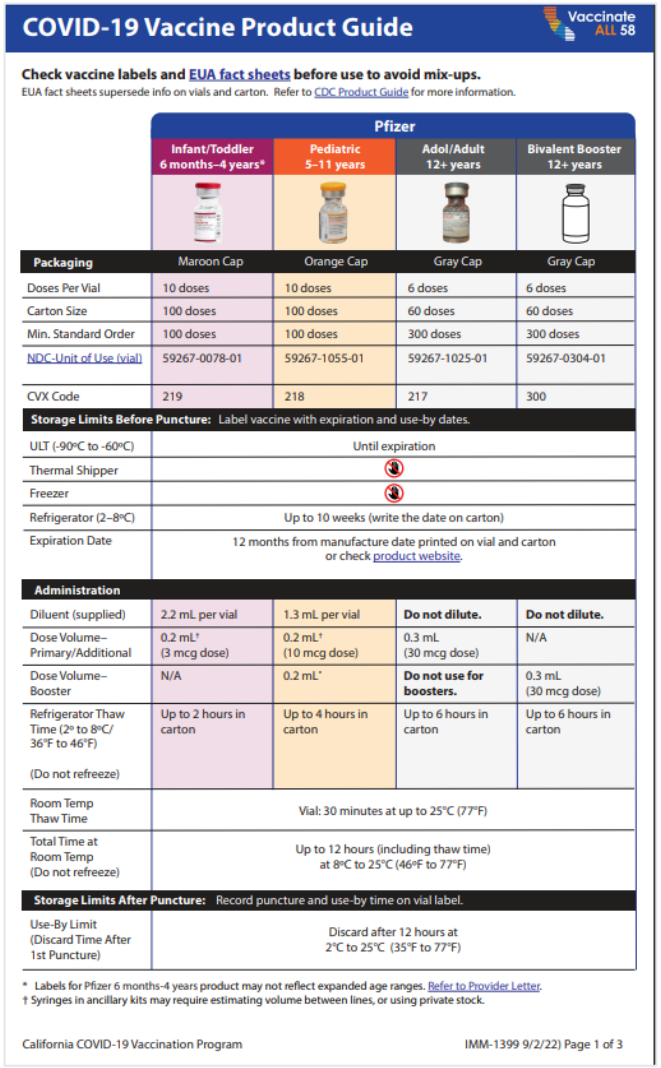
Age*	Vaccine	Primary Doses								Booster Dose
6 months–4 years	Pfizer–Infant/Toddler	1st Dose	3 weeks	2nd Dose	≥8 weeks	3rd Dose				
6 months–5 years	Moderna–Infant/Toddler	1st Dose	4 weeks	2nd Dose	≥4 weeks	3rd Dose				
5–11 years	Pfizer–Pediatric	1st Dose	3 weeks	2nd Dose	≥4 weeks	3rd Dose	≥3 months			Monovalent Booster Pfizer 5-11 years
6–11 years	Moderna–Pediatric	1st Dose	4 weeks	2nd Dose	≥4 weeks	3rd Dose				
12+ years	Moderna–Adol/Adult	1st Dose	4 weeks	2nd Dose	≥4 weeks	3rd Dose	≥2 months			Bivalent Booster Pfizer: Ages 12+ Moderna: Ages 18+ (Regardless of the number of monovalent booster doses previously received)
12+ years	Novavax	1st Dose	3 weeks	2nd Dose						
12+ years	Pfizer/Adol/Adult	1st Dose	3 weeks	2nd Dose	≥4 weeks	3rd Dose				
18+ years	Janssen (J&J) Pfizer/Moderna preferred**	1st Dose	4 weeks	2nd Dose of Moderna/ Pfizer						

* See schedules for children in transition from a younger to older age group: Pfizer | Moderna.
** Although use of mRNA COVID-19 vaccines is preferred, the Janssen vaccine may be offered in some situations.

View Interim Clinical Considerations for Use of COVID-19 Vaccines for details. Schedule is subject to change.

California COVID-19 Vaccination Program IMM-1396 (9/6/22) Page 2 of 2

Job Aid: COVID-19 Vaccine Product Guide



COVID-19 Vaccine Product Guide

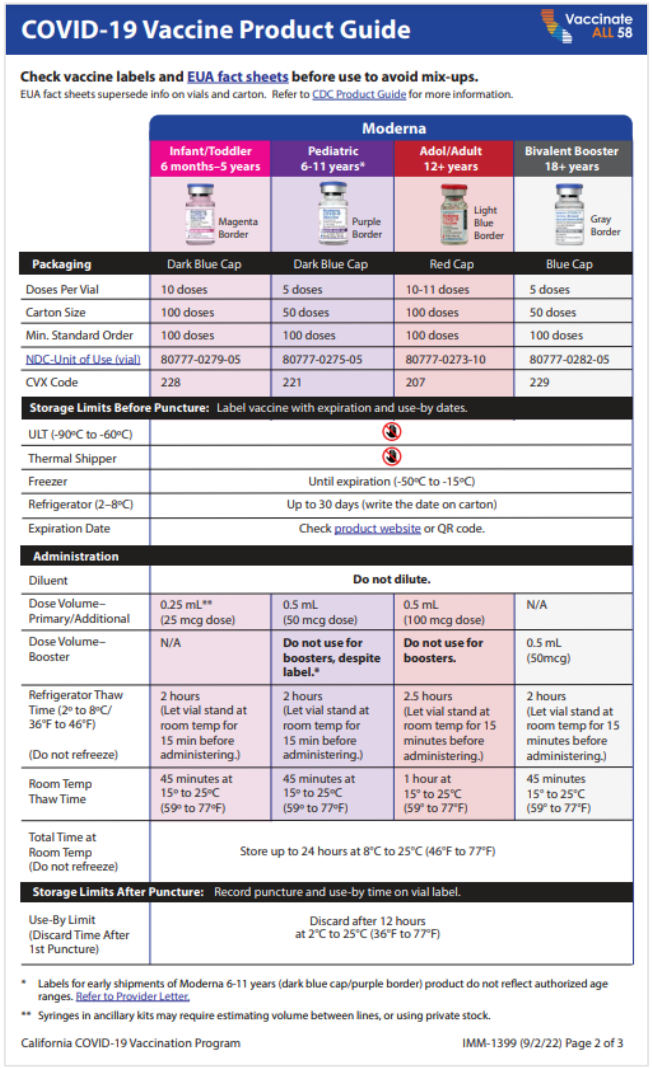
Vaccinate ALL 58

Check vaccine labels and EUA fact sheets before use to avoid mix-ups.
EUA fact sheets supersede info on vials and carton. Refer to CDC Product Guide for more information.

	Pfizer			
	Infant/Toddler 6 months–4 years*	Pediatric 5–11 years	Adol/Adult 12+ years	Bivalent Booster 12+ years
Packaging	Maroon Cap	Orange Cap	Gray Cap	Gray Cap
Doses Per Vial	10 doses	10 doses	6 doses	6 doses
Carton Size	100 doses	100 doses	60 doses	60 doses
Min. Standard Order	100 doses	100 doses	300 doses	300 doses
NDC-Unit of Use (vial)	59267-0078-01	59267-1055-01	59267-1025-01	59267-0304-01
CVX Code	219	218	217	300
Storage Limits Before Puncture: Label vaccine with expiration and use-by dates.				
ULT (-90ºC to -60ºC)	Until expiration			
Thermal Shipper	⊘			
Freezer	⊘			
Refrigerator (2–8ºC)	Up to 10 weeks (write the date on carton)			
Expiration Date	12 months from manufacture date printed on vial and carton or check product website.			
Administration				
Diluent (supplied)	2.2 mL per vial	1.3 mL per vial	**Do not dilute.**	**Do not dilute.**
Dose Volume–Primary/Additional	0.2 mL† (3 mcg dose)	0.2 mL† (10 mcg dose)	0.3 mL (30 mcg dose)	N/A
Dose Volume–Booster	N/A	0.2 mL†	**Do not use for boosters.**	0.3 mL (30 mcg dose)
Refrigerator Thaw Time (2º to 8ºC/ 36°F to 46°F) (Do not refreeze)	Up to 2 hours in carton	Up to 4 hours in carton	Up to 6 hours in carton	Up to 6 hours in carton
Room Temp Thaw Time	Vial: 30 minutes at up to 25°C (77°F)			
Total Time at Room Temp (Do not refreeze)	Up to 12 hours (including thaw time) at 8ºC to 25°C (46ºF to 77°F)			
Storage Limits After Puncture: Record puncture and use-by time on vial label.				
Use-By Limit (Discard Time After 1st Puncture)	Discard after 12 hours at 2°C to 25°C (35°F to 77°F)			

* Labels for Pfizer 6 months-4 years product may not reflect expanded age ranges. Refer to Provider Letter.
† Syringes in ancillary kits may require estimating volume between lines, or using private stock.

California COVID-19 Vaccination Program — IMM-1399 9/2/22) Page 1 of 3



COVID-19 Vaccine Product Guide

Vaccinate ALL 58

Check vaccine labels and EUA fact sheets before use to avoid mix-ups.
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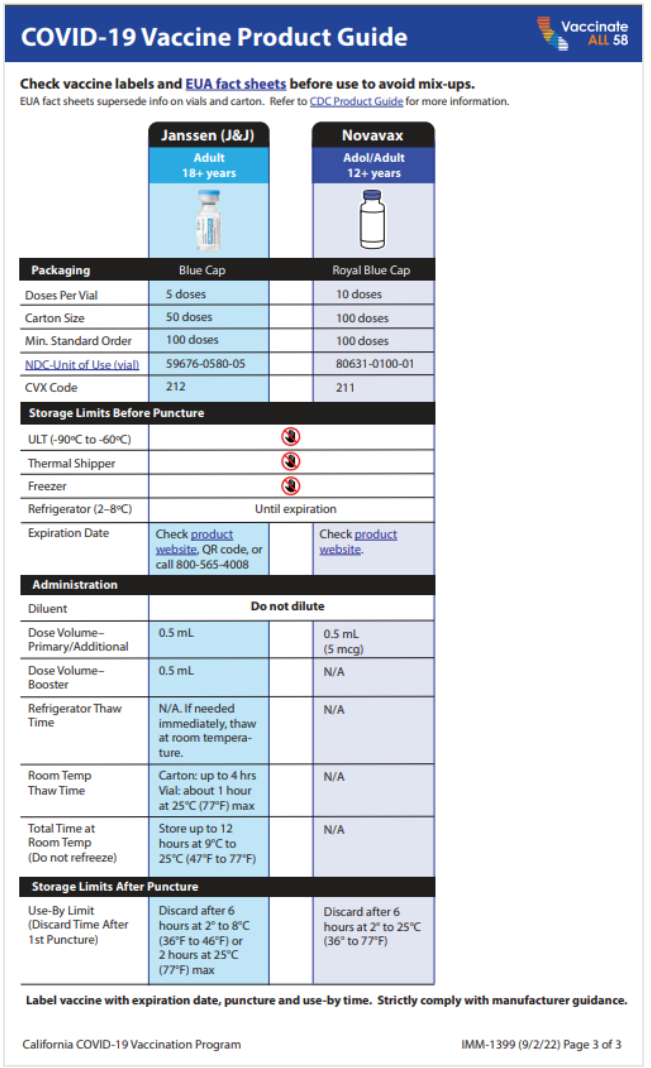
	Moderna			
	Infant/Toddler 6 months–5 years	Pediatric 6–11 years*	Adol/Adult 12+ years	Bivalent Booster 18+ years
	Magenta Border	Purple Border	Light Blue Border	Gray Border
Packaging	Dark Blue Cap	Dark Blue Cap	Red Cap	Blue Cap
Doses Per Vial	10 doses	5 doses	10-11 doses	5 doses
Carton Size	100 doses	50 doses	100 doses	50 doses
Min. Standard Order	100 doses	100 doses	100 doses	100 doses
NDC-Unit of Use (vial)	80777-0279-05	80777-0275-05	80777-0273-10	80777-0282-05
CVX Code	228	221	207	229
Storage Limits Before Puncture: Label vaccine with expiration and use-by dates.				
ULT (-90ºC to -60ºC)	⊘			
Thermal Shipper	⊘			
Freezer	Until expiration (-50ºC to -15ºC)			
Refrigerator (2–8ºC)	Up to 30 days (write the date on carton)			
Expiration Date	Check product website or QR code.			
Administration				
Diluent	**Do not dilute.**			
Dose Volume–Primary/Additional	0.25 mL** (25 mcg dose)	0.5 mL (50 mcg dose)	0.5 mL (100 mcg dose)	N/A
Dose Volume–Booster	N/A	**Do not use for boosters, despite label.***	**Do not use for boosters.**	0.5 mL (50mcg)
Refrigerator Thaw Time (2º to 8ºC/ 36°F to 46°F) (Do not refreeze)	2 hours (Let vial stand at room temp for 15 min before administering.)	2 hours (Let vial stand at room temp for 15 min before administering.)	2.5 hours (Let vial stand at room temp for 15 minutes before administering.)	2 hours (Let vial stand at room temp for 15 minutes before administering.)
Room Temp Thaw Time	45 minutes at 15º to 25ºC (59º to 77ºF)	45 minutes at 15º to 25ºC (59º to 77ºF)	1 hour at 15º to 25ºC (59º to 77ºF)	45 minutes 15º to 25ºC (59º to 77ºF)
Total Time at Room Temp (Do not refreeze)	Store up to 24 hours at 8°C to 25°C (46°F to 77°F)			
Storage Limits After Puncture: Record puncture and use-by time on vial label.				
Use-By Limit (Discard Time After 1st Puncture)	Discard after 12 hours at 2°C to 25°C (36°F to 77°F)			

* Labels for early shipments of Moderna 6-11 years (dark blue cap/purple border) product do not reflect authorized age ranges. Refer to Provider Letter.
** Syringes in ancillary kits may require estimating volume between lines, or using private stock.

California COVID-19 Vaccination Program — IMM-1399 (9/2/22) Page 2 of 3



COVID-19 Vaccine Product Guide

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Check vaccine labels and EUA fact sheets before use to avoid mix-ups.
EUA fact sheets supersede info on vials and carton. Refer to CDC Product Guide for more information.

	Janssen (J&J)	Novavax
	Adult 18+ years	Adol/Adult 12+ years
Packaging	Blue Cap	Royal Blue Cap
Doses Per Vial	5 doses	10 doses
Carton Size	50 doses	100 doses
Min. Standard Order	100 doses	100 doses
NDC-Unit of Use (vial)	59676-0580-05	80631-0100-01
CVX Code	212	211
Storage Limits Before Puncture		
ULT (-90ºC to -60ºC)	⊘	
Thermal Shipper	⊘	
Freezer	⊘	
Refrigerator (2–8ºC)	Until expiration	
Expiration Date	Check product website, QR code, or call 800-565-4008	Check product website.
Administration		
Diluent	**Do not dilute**	
Dose Volume–Primary/Additional	0.5 mL	0.5 mL (5 mcg)
Dose Volume–Booster	0.5 mL	N/A
Refrigerator Thaw Time	N/A. If needed immediately, thaw at room tempera-ture.	N/A
Room Temp Thaw Time	Carton: up to 4 hrs Vial: about 1 hour at 25°C (77°F) max	N/A
Total Time at Room Temp (Do not refreeze)	Store up to 12 hours at 9°C to 25°C (47°F to 77°F)	N/A
Storage Limits After Puncture		
Use-By Limit (Discard Time After 1st Puncture)	Discard after 6 hours at 2° to 8°C (36°F to 46°F) or 2 hours at 25°C (77°F) max	Discard after 6 hours at 2° to 25°C (36° to 77°F)

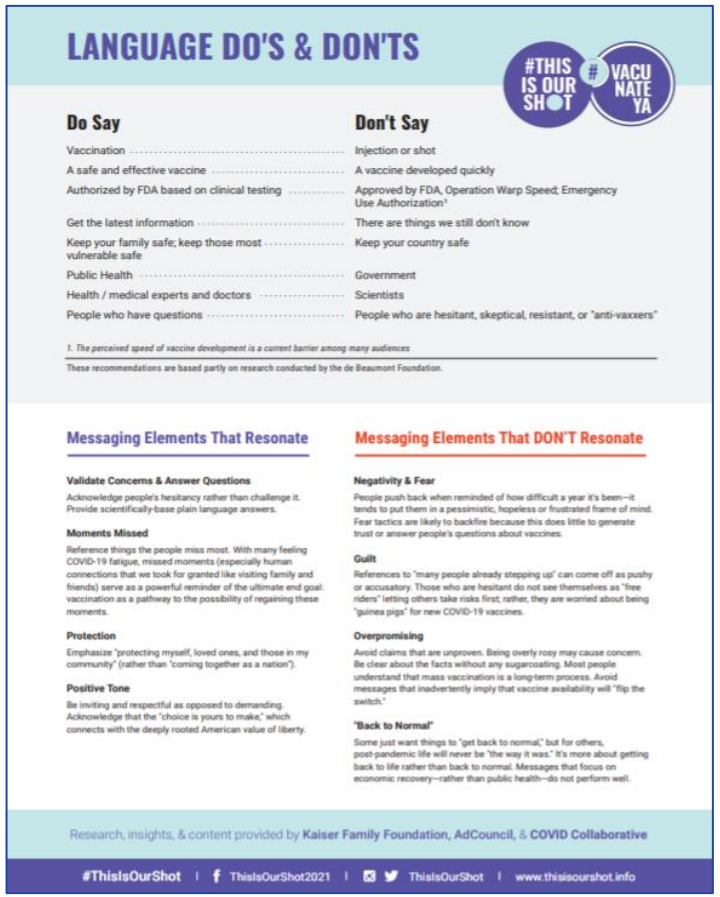
Label vaccine with expiration date, puncture and use-by time. Strictly comply with manufacturer guidance.

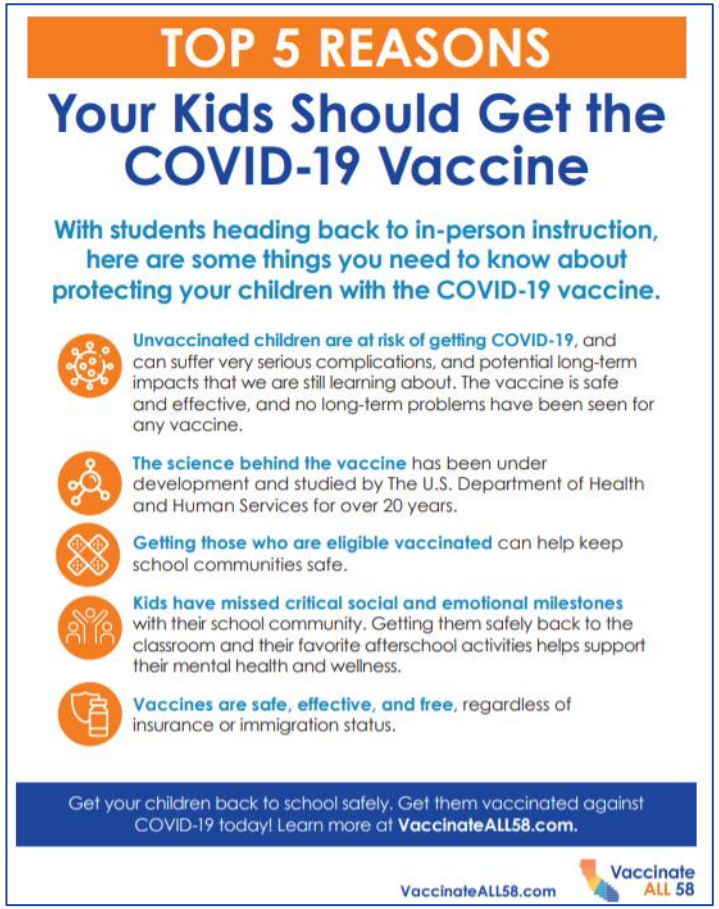
California COVID-19 Vaccination Program — IMM-1399 (9/2/22) Page 3 of 3

Toolkits, Fliers, Conversation Guides, and Videos

[#ThisIsOurShot Toolkit]

[COVID-19 Crucial Conversations Campaign]





Next Crucial Conversations Webinar: Talking with Patients about Long COVID

Please join Sharon Goldfarb, DNP, RN, FNP-BC, nurse lead with #ThisIsOurShot, to discuss what your patients need to know about post-COVID conditions.

When: Thursday, September 22 at 12:00PM-1:00PM

Register here!

For California COVID-19 Vaccine Providers

Monday

Provider Therapeutics Webinar

Next session: Monday, September 12, 12PM

My Turn and myCAvax Office Hours

Next session: Monday, September 19, 12PM

Friday

Provider Webinar

Next session: Friday, September 9, 9AM

Additional Support

Type of Support	Description	Updated 6.6.22
COVID-19 Provider Call Center	The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace. • Email: covidcallcenter@cdph.ca.gov • Phone: (833) 502-1245, Monday through Friday from 8AM–6PM	
Enrollment Support	For Provider enrollment support, please contact myCAvax Clinic Operations at • Email: myCAvaxinfo@cdph.ca.gov	
myCAvax Help Desk	Dedicated staff provide up-to-date information and technical support on the myCAvax system. • Email: myCAvax.HD@Accenture.com • Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM For training opportunities: https://eziz.org/covid/education/	
My Turn Clinic Help Desk	For **onboarding support** (those in the process of onboarding): myturnonboarding@cdph.ca.gov For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: MyTurn.Clinic.HD@Accenture.com or (833) 502-1245, option 4: Monday through Friday 8AM–6PM For job aids, demos, and training opportunities: flu at https://eziz.org/covid/myturn/flu/ and COVID at https://eziz.org/covid/myturn/	
Archived Communications	For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit • Website: EZIZ Archived Communications	

Special Thanks to

Today's Presenter:

Ilan Shapiro, MD, MBA, FAAP, FACHE

Webinar Planning & Support:

Rachel Jacobs, Cheri Banks, Leslie Amani, Blanca Corona, Charles Roberts

Vaccinate ALL 58
Together we can end the pandemic.

#THIS IS OUR SHOT #VACUNATE YA