

1 EMILY T. KUWAHARA (SBN 252411)
ekuwahara@crowell.com
2 URI NIV (SBN 307487)
univ@crowell.com
3 CROWELL & MORING LLP
515 South Flower Street, 40th Floor
4 Los Angeles, CA 90071
Telephone: 213.622.4750
5 Facsimile: 213.622.2690

6 KRISTIN J. MADIGAN (SBN 233436)
kmadigan@crowell.com
7 SUZANNE E. RODE (SBN 253830)
srode@crowell.com
8 CROWELL & MORING LLP
3 Embarcadero Center, 26th Floor
9 San Francisco, CA 94111
Telephone: 415.986.2800
10 Facsimile: 415.986.2827

11 [Additional Counsel Listed on Next Page]

12 Attorneys for Defendants
THE REGENTS OF THE UNIVERSITY OF
13 CALIFORNIA and MICHAEL V. DRAKE

14 UNITED STATES DISTRICT COURT
15 CENTRAL DISTRICT OF CALIFORNIA
16 SOUTHERN DIVISION
17

18 AARON KHERIATY, M.D.,

19 Plaintiff,

20 v.

21 THE REGENTS OF THE
UNIVERSITY OF CALIFORNIA, a
22 corporation, and MICHAEL V.
DRAKE, in his official capacity as
23 President of the UNIVERSITY OF
CALIFORNIA,

24 Defendants.
25

Case No. 8:21-cv-01367-JVS-KES

**DECLARATION OF EMILY T.
KUWAHARA IN SUPPORT OF
DEFENDANTS' OPPOSITION
TO PLAINTIFF'S MOTION FOR
PRELIMINARY INJUNCTION**

Date: September 27, 2021
Time: 1:30 p.m.
Place: Courtroom 10 C
Judge: Hon. James V. Selna

1 CHARLES F. ROBINSON (SBN 113197)
charles.robinson@ucop.edu
2 NORMAN J. HAMILL (SBN 154272)
norman.hamill@ucop.edu
3 KATHARINE ESSICK (SBN 219426)
katharine.essick@ucop.edu
4 UNIVERSITY OF CALIFORNIA
Office of General Counsel
5 1111 Franklin Street, 8th Floor
Oakland, CA 94607
6 Telephone: 510.987.9800
Facsimile: 510.987.9757
7

8 Attorneys for Defendants
THE REGENTS OF THE UNIVERSITY OF
CALIFORNIA AND MICHAEL V. DRAKE
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1 I, Emily T. Kuwahara, hereby declare as follows:

2 1. I am a partner with the law firm of Crowell & Moring LLP
3 (“Crowell”), counsel for The Regents of the University of California, and Michael
4 V. Drake, in his official capacity as President of the University of California. I
5 submit this Declaration in Opposition to Dr. Aaron Kheriaty’s (“Plaintiff’s”)
6 Motion for Preliminary Injunction. I have personal knowledge of the following
7 facts set forth in this Declaration, except where stated on information and belief
8 and, if called as a witness, could and would competently testify thereto.

9 2. Attached hereto as **Exhibit 1** is a true and correct copy of the State of
10 California’s Public Health Officer Order of August 5, 2021, retrieved on September
11 2, 2021, available at
12 [https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx)
13 [State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx).

14 3. Attached hereto as **Exhibit 2** is a true and correct copy of Centers for
15 Disease Control and Prevention, “Safety of COVID-19 Vaccines”, retrieved on
16 September 2, 2021, available at [https://www.cdc.gov/coronavirus/2019-](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/safety-of-vaccines.html)
17 [ncov/vaccines/safety/safety-of-vaccines.html](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/safety-of-vaccines.html).

18 4. Attached hereto as **Exhibit 3** is a true and correct copy of CDC, FAQ
19 about COVID-19 Vaccination, retrieved on September 2, 2021, available at
20 <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>.

21 5. Attached hereto as **Exhibit 4** is a true and correct copy of FDA Safety
22 Communication, Antibody Testing Is Not Currently Recommended to Assess
23 Immunity After COVID-19 Vaccination: FDA (May 19, 2021), retrieved on
24 September 2, 2021, available at [https://www.fda.gov/medical-devices/safety-](https://www.fda.gov/medical-devices/safety-communications/antibody-testing-not-currently-recommended-assess-immunity-after-covid-19-vaccination-fda-safety)
25 [communications/antibody-testing-not-currently-recommended-assess-immunity-](https://www.fda.gov/medical-devices/safety-communications/antibody-testing-not-currently-recommended-assess-immunity-after-covid-19-vaccination-fda-safety)
26 [after-covid-19-vaccination-fda-safety](https://www.fda.gov/medical-devices/safety-communications/antibody-testing-not-currently-recommended-assess-immunity-after-covid-19-vaccination-fda-safety).

27 6. Attached hereto as **Exhibit 5** is a true and correct copy of the Court’s
28 Minute Order from *America’s Frontline Doctors v. Wilcox*, No. 5:21-cv-01243

1 (C.D. Cal. July 30, 2021).

2 7. Attached hereto as **Exhibit 6** is a true and correct copy of FDA
3 Approves First COVID-19 vaccine (Aug. 23, 2021), retrieved on September 2,
4 2021, available at [https://www.fda.gov/news-events/press-announcements/fda-
5 approves-first-covid-19-vaccine](https://www.fda.gov/news-events/press-announcements/fda-approves-first-covid-19-vaccine).

6 8. Attached hereto as **Exhibit 7** is a true and correct copy of Johns
7 Hopkins University's COVID Vaccination Information, retrieved on September 2,
8 2021, available at [https://covidinfo.jhu.edu/health-safety/covid-vaccination-
9 information/](https://covidinfo.jhu.edu/health-safety/covid-vaccination-information/).

10 9. Attached hereto as **Exhibit 8** are true and correct copies of
11 Georgetown University's, "COVID-19 Vaccination Requirement," retrieved on
12 July 28, 2021 and "COVID-19 FAQs," retrieved on July 27, 2021, available at
13 [https://www.georgetown.edu/coronavirus/covid-19-
14 %20vaccines/?utm_source=SilverpopMailing&utm_medium=email&utm_campaign=
15 n=Test%20-%20Fall%202021%20Message&utm_content](https://www.georgetown.edu/coronavirus/covid-19-%20vaccines/?utm_source=SilverpopMailing&utm_medium=email&utm_campaign=Test%20-%20Fall%202021%20Message&utm_content) and
16 <https://www.georgetown.edu/coronavirus/frequently-asked-questions/#vaccines>.

17 10. Attached hereto as **Exhibit 9** is a true and correct copy of Harvard's
18 "COVID-19 Updates and Vaccination at Harvard" and "COVID-19 Vaccine
19 Requirement FAQs," retrieved on September 2, 2021, available at
20 [https://www.harvard.edu/president/news/2021/covid-19-update-5-28-21/
21 and https://huhs.harvard.edu/covid-19-vaccine-requirement-faqs](https://www.harvard.edu/president/news/2021/covid-19-update-5-28-21/).

22 11. Attached hereto as **Exhibit 10** are true and correct copies of
23 Morehouse College's "Message From the President" and "COVID-19
24 Vaccination Requirements FAQ," retrieved on July 27, 2021, available at
25 [https://mailchi.mp/734e966b5cef/important-message-from-the-president-regarding-
26 covid-19-vaccination-requirements-for-the-fall-2021-semester](https://mailchi.mp/734e966b5cef/important-message-from-the-president-regarding-covid-19-vaccination-requirements-for-the-fall-2021-semester)
27 and [https://www.morehouse.edu/life/covid-19/vaccination-requirement-
28 faqs/#student](https://www.morehouse.edu/life/covid-19/vaccination-requirement-faqs/#student).

1 12. Attached hereto as **Exhibit 11** are true and correct copies of University
2 of Pennsylvania’s article, “An update on Penn’s plans for the fall semester” and
3 “Student FAQs,” retrieved on July 27, 2021 and September 2, 2021, available at
4 <https://penntoday.upenn.edu/announcements/update-penns-plans-fall-semester> and
5 <https://coronavirus.upenn.edu/content/student-faq>.

6 13. Attached hereto as **Exhibit 12** is a true and correct copy of
7 University of Virginia’s “Academic Division Employee COVID-19 Vaccine
8 Information,” retrieved on September 2, 2021, available at
9 <https://coronavirus.virginia.edu/vaccinations>.

10 14. Attached hereto as **Exhibit 13** is a true and correct copy of
11 Vanderbilt University’s “Health and Safety Protocols,” retrieved on September 3,
12 2021, available at [https://www.vanderbilt.edu/coronavirus/faqs/student-](https://www.vanderbilt.edu/coronavirus/faqs/student-vaccination-requirement/)
13 [vaccination-requirement/](https://www.vanderbilt.edu/coronavirus/faqs/student-vaccination-requirement/).

14 15. Attached hereto as **Exhibit 14** are true and correct copies of Wake
15 Forest University’s “Wake Forest COVID-19 Vaccine Policy,” “COVID-19
16 Vaccine FAQs,” and “Mandatory Student COVID-19 Vaccine Policy,” retrieved on
17 September 3, 2021, available at [https://ourwayforward.wfu.edu/2021/05/wake-](https://ourwayforward.wfu.edu/2021/05/wake-forest-covid-19-vaccine-policy/)
18 [forest-covid-19-vaccine-policy/](https://ourwayforward.wfu.edu/2021/05/wake-forest-covid-19-vaccine-policy/) and [https://ourwayforward.wfu.edu/faculty-](https://ourwayforward.wfu.edu/faculty-staff/vaccine-faqs/)
19 [staff/vaccine-faqs/](https://ourwayforward.wfu.edu/faculty-staff/vaccine-faqs/).

20 16. Attached hereto as **Exhibit 15** are true and correct copies of Yale
21 University’s “Requiring Students to be Vaccinated Against COVID-19,”
22 “COVID-19 Vaccine Exemption Requests,” and “COVID-19 Vaccine FAQ
23 for Yale Students,” retrieved on July 27, 2021 available at
24 [https://covid19.yale.edu/community-messages/requiring-students-be-vaccinated-](https://covid19.yale.edu/community-messages/requiring-students-be-vaccinated-against-covid-19)
25 [against-covid-19](https://covid19.yale.edu/community-messages/requiring-students-be-vaccinated-against-covid-19), [https://yalehealth.yale.edu/covid-19-vaccine-exemption-](https://yalehealth.yale.edu/covid-19-vaccine-exemption-requests)
26 [requests](https://yalehealth.yale.edu/covid-19-vaccine-exemption-requests), and <https://yalehealth.yale.edu/covid-19-vaccine-faq-yale-students> .

27 17. Attached hereto as **Exhibit 16** are true and correct copies of Duke
28 University’s Policy “Requirements & Exemptions,” and “Frequently Asked

1 Questions COVID Vaccine,” retrieved on September 1, 2021, available at
2 <https://covidvaccine.duke.edu/requirements> and <https://covidvaccine.duke.edu/faq>.

3 18. Attached hereto as **Exhibit 17** is a true and correct copy of the Court
4 Order from *Bridges v. Houston Methodist Hosp.*, No. CV H-21-1774, (S.D. Tex.
5 June 4, 2021).

6 19. Attached hereto as **Exhibit 18** is a true and correct copy of Association
7 of American Medical Colleges “Major Health Care Professional Organizations Call
8 for COVID-19 Vaccine Mandates for All Health Workers,” dated July 26, 2021,
9 retrieved on September 3, 2021, available at [https://www.aamc.org/news-](https://www.aamc.org/news-insights/press-releases/major-health-care-professional-organizations-call-covid-19-vaccine-mandates-all-health-workers)
10 [insights/press-releases/major-health-care-professional-organizations-call-covid-19-](https://www.aamc.org/news-insights/press-releases/major-health-care-professional-organizations-call-covid-19-vaccine-mandates-all-health-workers)
11 [vaccine-mandates-all-health-workers](https://www.aamc.org/news-insights/press-releases/major-health-care-professional-organizations-call-covid-19-vaccine-mandates-all-health-workers)).

12 20. Attached hereto as **Exhibit 19** is a true and correct copy of American
13 Medical Association’s “Routine Universal Immunization of Physicians – Code of
14 Medical Ethics Opinion 8.7,” retrieved on September 3, 2021, available at
15 [https://www.ama-assn.org/delivering-care/ethics/routine-universal-immunization-](https://www.ama-assn.org/delivering-care/ethics/routine-universal-immunization-physicians)
16 [physicians](https://www.ama-assn.org/delivering-care/ethics/routine-universal-immunization-physicians).

17 21. Attached hereto as **Exhibit 20** is a true and correct copy of American
18 Medical Association’s “Do physicians have a responsibility to be vaccinated?,”
19 retrieved on September 3, 2021, available at [https://www.ama-assn.org/delivering-](https://www.ama-assn.org/delivering-care/ethics/do-physicians-have-responsibility-be-vaccinated)
20 [care/ethics/do-physicians-have-responsibility-be-vaccinated](https://www.ama-assn.org/delivering-care/ethics/do-physicians-have-responsibility-be-vaccinated)).

21 22. Attached hereto as **Exhibit 21** is a true and correct copy of the
22 American Psychiatric Association’s COVID-19 Pandemic Guidance Document
23 “The Role of the Psychiatrist in the Equitable Distribution of the COVID-19
24 Vaccine,” retrieved on September 3, 2021, available at
25 [https://www.psychiatry.org/File%20Library/Psychiatrists/APA-Guidance-](https://www.psychiatry.org/File%20Library/Psychiatrists/APA-Guidance-Psychiatrists-Role-in-Equitable-Distribution-COVID-19-Vaccine.pdf)
26 [Psychiatrists-Role-in-Equitable-Distribution-COVID-19-Vaccine.pdf](https://www.psychiatry.org/File%20Library/Psychiatrists/APA-Guidance-Psychiatrists-Role-in-Equitable-Distribution-COVID-19-Vaccine.pdf)

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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed this 3rd day of September, 2021 at Los Angeles, California.

/s/ Emily T. Kuwahara

Emily T. Kuwahara

605317193.3

EXHIBIT 1

9/2/2021

Order of the State Public Health Officer Health Care Worker Vaccine Requirement



State of California—Health and Human
Services Agency
**California Department of
Public Health**



August 5, 2021

TO: All Californians

SUBJECT: Health Care Worker Vaccine Requirement

Related Materials: Health Care Worker Vaccine Requirement Q&A

State Public Health Officer Order of August 5, 2021

The COVID-19 pandemic remains a significant challenge in California. COVID-19 vaccines are effective in reducing infection and serious disease. At present, 63% of Californians 12 years of age and older are fully vaccinated with an additional 10% partially vaccinated. California is currently experiencing the fastest increase in COVID-19 cases during the entire pandemic with 18.3 new cases per 100,000 people per day, with case rates increasing ninefold within two months. The Delta variant is highly transmissible and may cause more severe illness. In fact, recent data suggests that viral load is roughly 1,000 times higher in people infected with the Delta variant than those infected with the original coronavirus strain, according to a recent study. The Delta variant is currently the most common variant causing new infections in California.

Unvaccinated persons are more likely to get infected and spread the virus, which is transmitted through the air. Most current hospitalizations and deaths are among unvaccinated persons. Thanks to vaccinations and to measures taken since March 2020, California's health care system is currently able to address the increase in cases and hospitalizations. However, additional statewide facility-directed measures are necessary to protect particularly vulnerable populations, and ensure a sufficient, consistent supply of workers in high-risk health care settings.

Hospitals, skilled nursing facilities (SNFs), and the other health care facility types identified in this order are particularly high-risk settings where COVID-19 outbreaks can have severe consequences for vulnerable populations including hospitalization, severe illness, and death. Further, the settings in this order share several features. There is frequent exposure to staff and highly vulnerable patients, including elderly, chronically ill, critically ill, medically fragile, and disabled patients. In many of these settings, the patients are at high risk of severe COVID-19 disease due to underlying health conditions, advanced age, or both.

Vaccinations have been available in California from December 2020 to the present, and from January 1, 2021, to July 12, 2021, a total of 9,371 confirmed COVID-19 outbreaks and 113,196 outbreak-related cases were reported to CDPH. Increasing numbers of health care workers are among the new positive cases, despite vaccinations being

9/2/2021

Order of the State Public Health Officer Health Care Worker Vaccine Requirement

prioritized for this group when vaccines initially became available. Recent outbreaks in health care settings have frequently been traced to unvaccinated staff members.

Vaccination against COVID-19 is the most effective means of preventing infection with the COVID-19 virus, and subsequent transmission and outbreaks. As we respond to the dramatic increase in cases, all health care workers must be vaccinated to reduce the chance of transmission to vulnerable populations.

For these reasons, COVID-19 remains a concern to public health and, in order to prevent its further spread in hospitals, SNFs, and other health care settings, new public health requirements are necessary at this time.

NOW, THEREFORE, I, as State Public Health Officer of the State of California, order:

1. All workers who provide services or work in facilities described in subdivision (a) have their first dose of a one-dose regimen or their second dose of a two-dose regimen by September 30, 2021:

a. Health Care Facilities:

- i. General Acute Care Hospitals
- ii. Skilled Nursing Facilities (including Subacute Facilities)
- iii. Intermediate Care Facilities
- iv. Acute Psychiatric Hospitals
- v. Adult Day Health Care Centers
- vi. Program of All-Inclusive Care for the Elderly (PACE) and PACE Centers
- vii. Ambulatory Surgery Centers
- viii. Chemical Dependency Recovery Hospitals
- ix. Clinics & Doctor Offices (including behavioral health, surgical)
- x. Congregate Living Health Facilities
- xi. Dialysis Centers
- xii. Hospice Facilities
- xiii. Pediatric Day Health and Respite Care Facilities
- xiv. Residential Substance Use Treatment and Mental Health Treatment Facilities

b. Two-dose vaccines include: Pfizer-BioNTech or Moderna or vaccine authorized by the World Health Organization. The one-dose vaccine is: Johnson and Johnson [J&J]/Janssen. All COVID-19 vaccines that are currently authorized for emergency use can be found at the following links:

- i. By the US Food and Drug Administration (FDA), are listed at the FDA COVID-19 Vaccines webpage.
- ii. By the World Health Organization (WHO), are listed at the WHO COVID-19 Vaccines webpage.

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Order of the State Public Health Officer Health Care Worker Vaccine Requirement

c. "Worker" refers to all paid and unpaid individuals who work in indoor settings where (1) care is provided to patients, or (2) patients have access for any purpose. This includes workers serving in health care or other health care settings who have the potential for direct or indirect exposure to patients or SARS-CoV-2 airborne aerosols. Workers include, but are not limited to, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the health care facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the health care setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel).

2. Workers may be exempt from the vaccination requirements under section (1) only upon providing the operator of the facility a declination form, signed by the individual stating either of the following: (1) the worker is declining vaccination based on Religious Beliefs, or (2) the worker is excused from receiving any COVID-19 vaccine due to Qualifying Medical Reasons.

a. To be eligible for a Qualified Medical Reasons exemption the worker must also provide to their employer a written statement signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician stating that the individual qualifies for the exemption (but the statement should not describe the underlying medical condition or disability) and indicating the probable duration of the worker's inability to receive the vaccine (or if the duration is unknown or permanent, so indicate).

3. If an operator of a facility listed above under section (1) deems a worker to have met the requirements of an exemption pursuant to section (2), the unvaccinated exempt worker must meet the following requirements when entering or working in such facility:

a. Test for COVID-19 with either PCR or antigen test that either has Emergency Use Authorization by the U.S. Food and Drug Administration or be operating per the Laboratory Developed Test requirements by the U.S. Centers for Medicare and Medicaid Services. Testing must occur twice weekly for unvaccinated exempt workers in acute health care and long-term care settings, and once weekly for such workers in other health care settings.

b. Wear a surgical mask or higher-level respirator approved by the National Institute of Occupational Safety and Health (NIOSH), such as an N95 filtering facepiece respirator, at all times while in the facility.

4. Consistent with applicable privacy laws and regulations, the operator of the facility must maintain records of workers' vaccination or exemption status. If the worker is exempt pursuant to section (2), the operator of the facility then also must maintain records of the workers' testing results pursuant to section (3).

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Order of the State Public Health Officer Health Care Worker Vaccine Requirement

- a. The facility must provide such records to the local or state Public Health Officer or their designee promptly upon request, and in any event no later than the next business day after receiving the request.
 - b. Operators of the facilities subject to the requirement under section (1) must maintain records pursuant to the CDPH Guidance for Vaccine Records Guidelines & Standards with the following information: (1) full name and date of birth; (2) vaccine manufacturer; and (3) date of vaccine administration (for first dose and, if applicable, second dose).
 - c. For unvaccinated workers: signed declination forms with written health care provider's statement where applicable, as described in section (2) above. Testing records pursuant to section (3) must be maintained.
5. Nothing in this Order limits otherwise applicable requirements related to Personal Protective Equipment, personnel training, and infection control policies and practices.
6. Facilities covered by this Order are encouraged to provide onsite vaccinations, easy access to nearby vaccinations, and education and outreach on vaccinations, including:
- a. access to epidemiologists, physicians, and other counselors who can answer questions or concerns related to vaccinations and provide culturally sensitive advice; and
 - b. access to online resources providing up to date information on COVID-19 science and research.
7. The July 26 Public Health Order will continue to apply.
8. This Order shall take effect on August 5, 2021, and facilities must be in full compliance with the Order by September 30, 2021.
9. This Order is issued pursuant to Health and Safety Code sections 120125, 120140, 120175, 120195 and 131080 and other applicable law.



Tomás J. Aragón, MD, DrPH
Director and State Public Health Officer
California Department of Public Health

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)

9/2/2021

Order of the State Public Health Officer Health Care Worker Vaccine Requirement



EXHIBIT 2



COVID-19

Safety of COVID-19 Vaccines

Updated Aug. 30, 2021


What You Need to Know

- COVID-19 vaccines are **safe and effective**.
- Millions of people in the United States have received COVID-19 vaccines under the most intense safety monitoring in U.S. history.
- CDC recommends you [get a COVID-19 vaccine](#) as soon as possible.
- If you are fully vaccinated, you can resume activities that you did prior to the pandemic. Learn more about what you can do [when you have been fully vaccinated](#).

Millions of People Have Safely Received a COVID-19 Vaccine

Over 369 million doses of COVID-19 vaccine have been given in the United States from December 14, 2020, through August 30, 2021.

COVID-19 vaccines are **safe and effective**. COVID-19 vaccines were evaluated in tens of thousands of participants in clinical trials. The vaccines met the Food and Drug Administration's (FDA) rigorous scientific standards for safety, effectiveness, and manufacturing quality needed to support approval or authorization of a vaccine.

Millions of people in the United States have received COVID-19 vaccines since they were authorized for emergency use by FDA. These vaccines have undergone and will continue to undergo the most intensive safety monitoring in U.S. history. This monitoring includes using both [established and new safety monitoring systems](#)  [\[PDF - 83 KB\]](#) to make sure that COVID-19 vaccines are safe.

Results Are Reassuring

Results from vaccine safety monitoring efforts are reassuring. Some people have no side effects. Others have reported common [side effects after COVID-19 vaccination](#), like

- swelling, redness, and pain at injection site
- fever
- headache
- tiredness
- muscle pain
- chills
- nausea

Serious Safety Problems Are Rare

To date, the systems in place to monitor the safety of these vaccines have found only two serious types of health problems after vaccination, both of which are rare. These are anaphylaxis and thrombosis with thrombocytopenia syndrome (TTS) after vaccination with J&J/Janssen COVID-19 Vaccine.

Anaphylaxis

A small number of people have had a [severe allergic reaction](#) (called “anaphylaxis”) after vaccination, but this is **rare**. Anaphylaxis can occur after any vaccination. If this occurs, vaccination providers have medicines available to effectively and immediately treat the reaction.

After you get a COVID-19 vaccine, you will be asked to stay for 15–30 minutes so you can be observed in case you have a severe allergic reaction and need immediate treatment.

Thrombosis with Thrombocytopenia Syndrome (TTS) after Vaccination with J&J/Janssen COVID-19 Vaccination

After receiving the J&J/Janssen COVID-19 Vaccine, there is risk for a rare but serious adverse event—blood clots with low platelets (thrombosis with thrombocytopenia syndrome, or TTS). Women younger than 50 years old should especially be aware of their increased risk for this rare adverse event. There are other COVID-19 vaccines available for which this risk has not been seen.

This adverse event is rare, occurring at a rate of about 7 per 1 million vaccinated women between 18 and 49 years old. For women 50 years and older and men of all ages, this adverse event is even more rare.

Cases of myocarditis and pericarditis in adolescents and young adults have been reported more often after getting the second dose than after the first dose of one of the two mRNA COVID-19 vaccines, Pfizer-BioNTech or Moderna. **These reports are rare and the known and potential benefits of COVID-19 vaccination outweigh the known and potential risks, including the [possible risk of myocarditis or pericarditis](#).**

Long-Term Side Effects Are Unlikely

Serious side effects that could cause a long-term health problem are extremely unlikely following any vaccination, including COVID-19 vaccination. Vaccine monitoring has historically shown that side effects generally happen within six weeks of receiving a vaccine dose. For this reason, the FDA required each of the authorized COVID-19 vaccines to be studied for at least two months (eight weeks) after the final dose. Millions of people have received COVID-19 vaccines, and no long-term side effects have been detected.

CDC continues to closely monitor the safety of COVID-19 vaccines. If scientists find a connection between a safety issue and a vaccine, FDA and the vaccine manufacturer will work toward an appropriate solution to address the specific safety concern (for example, a problem with a specific lot, a manufacturing issue, or the vaccine itself).

Have you experienced a side effect following COVID-19 vaccination?

You can [report it to VAERS](#).

More Information

[ACIP COVID-19 Vaccines Safety Technical Sub-Group \(VaST\)](#)

VaST Subgroup Technical Report

Last Updated Aug. 30, 2021

EXHIBIT 3



COVID-19

Frequently Asked Questions about COVID-19 Vaccination

Updated Sept. 1, 2021

- Below are answers to commonly asked questions about COVID-19 vaccination.
- [Bust myths and learn the facts about COVID-19 vaccines](#)

How can I get a new COVID-19 vaccination card? ∨

If you need a new vaccination card, contact the vaccination provider site where you received your vaccine. Your provider should give you a new card with up-to-date information about the vaccinations you have received.

If the location where you received your COVID-19 vaccine is no longer operating, contact your state or local health department's [immunization information system \(IIS\)](#) for assistance.

CDC does **not** maintain vaccination records or determine how vaccination records are used, and CDC does **not** provide the CDC-labeled, white COVID-19 vaccination record card to people. These cards are distributed to vaccination providers by state and local health departments. Please [contact your state or local health department](#) if you have additional questions about vaccination cards or vaccination records.

Related page:

- [COVID-19 Vaccines that Require 2 Shots | CDC](#)

If I have already had COVID-19 and recovered, do I still need to get vaccinated with a COVID-19 vaccine? ∨

Yes, you should be vaccinated regardless of whether you already had COVID-19 because:

- Research has not yet shown how long you are protected from getting COVID-19 again after you recover from COVID-19.
- Vaccination helps protect you even if you've already had COVID-19.

Evidence is emerging that people **get better protection by being fully vaccinated** compared with having had COVID-19. [One study](#) showed that unvaccinated people who already had COVID-19 are more than 2 times as likely than fully vaccinated people to get COVID-19 again.

If you were treated for COVID-19 with monoclonal antibodies or convalescent plasma, you should wait 90 days before getting a COVID-19 vaccine. Talk to your doctor if you are unsure what treatments you received or if you have more questions about getting a COVID-19 vaccine.

If you or your child has a history of multisystem inflammatory syndrome in adults or children ([MIS-A](#) or [MIS-C](#)), consider delaying vaccination until you or your child have recovered from being sick and for 90 days after the date of diagnosis of MIS-A or MIS-C. Learn more about the [clinical considerations](#) for people with a history of multisystem MIS-C or MIS-A.

Experts are still learning more about how long vaccines protect against COVID-19. CDC will keep the public informed as new evidence becomes available.

Related pages:

- [Benefits of Getting Vaccinated](#)
- [Preparing for Your COVID-19 Vaccination](#)

[Is it safe for my child to get a COVID-19 vaccine?](#) 

Yes. Studies show that COVID-19 vaccines are [safe](#) and [effective](#). Like adults, children may have some [side effects](#) after COVID-19 vaccination. These side effects may affect their ability to do daily activities, but they should go away in a few days. [Children 12 years and older](#) are now eligible to get vaccinated against COVID-19. COVID-19 vaccines have been used under the most intensive safety monitoring in U.S. history, including studies in children 12 years and older. Your child cannot get COVID-19 from any COVID-19 vaccine.

Related page:

- [COVID-19 Vaccines for Children and Teens](#)

[Why should my child get vaccinated against COVID-19?](#) 

COVID-19 vaccination can help protect your child from getting COVID-19. Although fewer children have been sick with COVID-19 compared to adults, [children can be infected with the virus that causes COVID-19](#), can get sick from COVID-19, and can spread the virus that causes COVID-19 to others. Getting your child vaccinated helps to protect your child and your family. Vaccination is now [recommended for everyone 12 years and older](#). Currently, the [Pfizer-BioNTech COVID-19 Vaccine](#) is the only one available to children 12 years and older.

Related page:

- [COVID-19 Vaccines for Children and Teens](#)

[What are the ingredients in COVID-19 vaccines?](#) 

Vaccine ingredients can vary by manufacturer. To learn more about the ingredients in authorized COVID-19 vaccines, see

- [Pfizer-BioNTech COVID-19 Vaccine Overview and Safety](#)
- [Moderna COVID-19 Vaccine Overview and Safety](#)
- [Johnson & Johnson's Janssen COVID-19 Vaccine Overview and Safety](#)
- [Ingredients Included in COVID-19 Vaccines](#)

Do I need to wear a mask and avoid close contact with others if I am fully vaccinated? 

After you are fully vaccinated for COVID-19 you can resume many activities without wearing a mask or staying 6 feet apart, except:

- if you are indoors in public and you are in an area of [substantial or high transmission](#).
- or where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance.

Can I choose which COVID-19 vaccine I get? 

Yes. All currently authorized and recommended COVID-19 vaccines are [safe](#) and [effective](#), and CDC does not recommend one vaccine over another. The most important decision is to get a COVID-19 vaccination as soon as possible. Widespread vaccination is a critical tool to help stop the pandemic.

People should be aware that a risk of a rare condition called thrombosis with thrombocytopenia syndrome (TTS) has been reported following vaccination with the J&J/Janssen COVID-19 Vaccine. TTS is a serious condition that involves blood clots with low platelet counts. This problem is rare, and most reports were in women between 18 and 49 years old. For women 50 years and older and men of any age, this problem is even more rare. There are other COVID-19 vaccine options available for which this risk has not been seen (Pfizer-BioNTech, Moderna).

Learn more about [your COVID-19 vaccination](#), including how to find a vaccination location, what to expect at your appointment, and more.

Related page:

- [Your Vaccination](#)
- [Safety of COVID-19 Vaccines](#)
- [Ensuring COVID-19 Vaccines Work](#)

If I am pregnant, can I get a COVID-19 vaccine? 

Yes, COVID-19 vaccination is recommended for all people 12 years and older, including [people who are pregnant](#), breastfeeding, trying to get pregnant now, or might become pregnant in the future. You might want to have a conversation with your healthcare provider about COVID-19 vaccination. While such a conversation might be helpful, it is not required before vaccination. Learn more about [vaccination considerations for people who are pregnant or breastfeeding](#).

If you are pregnant and have received a COVID-19 vaccine, we encourage you to enroll in [v-safe](#), CDC's smartphone-based tool that provides personalized health check-ins after vaccination. A [v-safe pregnancy registry](#) has been established to gather information on the health of pregnant people who have received a COVID-19 vaccine.

Related pages:

- [COVID-19 Vaccines for Pregnant or Breastfeeding People](#)
- [Monitoring Systems for Pregnant People](#)

- [V-safe Pregnancy Registry](#)

How long does protection from a COVID-19 vaccine last? ∨

We don't know how long protection lasts for those who are vaccinated. What we do know is that COVID-19 has caused very serious illness and death for a lot of people. If you get COVID-19, you also risk giving it to loved ones who may get very sick. Getting a COVID-19 vaccine is a safer choice.

People with moderately to severely compromised immune systems should [receive an additional dose](#) of mRNA COVID-19 vaccine after the initial 2 doses.

Experts are working to learn more about both natural immunity and vaccine-induced immunity. CDC will keep the public informed as new evidence becomes available.

Learn more about [Booster Shots](#).

Related pages:

- [Vaccines Work](#)
- [Booster Shots](#)
- [Moderately to Severely Immunocompromised People](#)

How many doses of COVID-19 vaccine will I need to get? ∨

The number of doses needed depends on which vaccine you receive. To get the most protection:

- Two [Pfizer-BioNTech](#) vaccine doses should be given 3 weeks (21 days) apart.
- Two [Moderna](#) vaccine doses should be given 1 month (28 days) apart.
- Johnson & Johnsons Janssen ([J&J/Janssen](#)) COVID-19 vaccine requires only one dose.

If you receive a vaccine that requires two doses, you should **get your second shot as close to the recommended interval as possible**. However, your second dose may be given up to [6 weeks \(42 days\) after the first dose, if necessary](#). You should **not** get the second dose earlier than the recommended interval.

People with moderately to severely compromised immune systems should [receive an additional dose](#) of mRNA COVID-19 vaccine after the initial 2 doses.

Learn more about [Booster Shots](#).

Related pages:

- [Pfizer-BioNTech](#)
- [Moderna](#)
- [Johnson & Johnson / Janssen](#)
- [Booster Shot](#)
- [Moderately to Severely Immunocompromised People](#)

If I have an underlying condition, can I get a COVID-19 vaccine?

People with underlying medical conditions can receive a COVID-19 vaccine as long as they have not had [an immediate or severe allergic reaction](#) to a COVID-19 vaccine or to any of the ingredients in the vaccine. Learn more about vaccination [considerations for people with underlying medical conditions](#). Vaccination is an important consideration for adults of any age with [certain underlying medical conditions](#) because they are at increased risk for severe illness from COVID-19.

Related pages:

- [Underlying Medical Conditions](#)
- [People at High Risk](#)
- [People with Allergies](#)

Can I get vaccinated against COVID-19 while I am currently sick with COVID-19?

No. People with COVID-19 who have symptoms should wait to be vaccinated until they have recovered from their illness and have met the [criteria](#) for discontinuing isolation; those without symptoms should also wait until they [meet the criteria](#) before getting vaccinated. This guidance also applies to people who get COVID-19 before getting their second dose of vaccine.

Related pages:

- [When to Quarantine](#)
- [Ending Home Isolation](#)

Answers to more questions about:

- [Healthcare Professionals and COVID-19 Vaccines](#)
- [Vaccines.gov](#)
- [Vaccine Administration Management System \(VAMS\)](#)
- [COVID-19 Vaccination in Long-term Care Facilities](#)
- [V-safe after Vaccination Health Checker](#)

Last Updated Sept. 1, 2021

EXHIBIT 4

9/2/2021

Antibody Testing Is Not Currently Recommended to Assess Immunity After COVID-19 Vaccination: FDA Safety Communication | FDA

Antibody Testing Is Not Currently Recommended to Assess Immunity After COVID-19 Vaccination: FDA Safety Communication

Date Issued: May 19, 2021

The U.S. Food and Drug Administration (FDA) is reminding the public and health care providers that results from currently authorized SARS-CoV-2 antibody tests should not be used to evaluate a person's level of immunity or protection from COVID-19 at any time, and especially after the person received a COVID-19 vaccination.

While a positive antibody test result can be used to help identify people who may have had a prior SARS-CoV-2 infection, more research is needed in people who have received a COVID-19 vaccination. Currently authorized SARS-CoV-2 antibody tests have not been evaluated to assess the level of protection provided by an immune response to COVID-19 vaccination. If antibody test results are interpreted incorrectly, there is a potential risk that people may take fewer precautions against SARS-CoV-2 exposure. Taking fewer steps to protect against SARS-CoV-2 can increase their risk of SARS-CoV-2 infection and may result in the increased spread of SARS-CoV-2.

The FDA is providing additional information and recommendations to the public and health care providers about the use of antibody tests in people who received a COVID-19 vaccination.

Recommendations for People Who Had or May Have a SARS-CoV-2 Antibody Test

- Be aware that SARS-CoV-2 antibody tests help health care providers identify whether someone has antibodies to SARS-CoV-2, the virus that causes COVID-19, indicating a prior infection with the virus. However, more research is needed to understand the meaning of a positive or negative antibody test, beyond the presence or absence of antibodies, including in people who received a COVID-19 vaccination, in people who have been exposed and have SARS-CoV-2 antibodies, and in people who are not fully vaccinated.
- **If you have not been vaccinated:** Be aware that a positive result from an antibody test does not mean you have a specific amount of immunity or protection from SARS-CoV-2 infection. If you have a positive test result on a SARS-CoV-2 antibody test, it means that it is possible you were previously infected with the SARS-CoV-2 virus. Talk with your health care provider about the meaning of your SARS-CoV-2 antibody test results.

9/2/2021

Antibody Testing Is Not Currently Recommended to Assess Immunity After COVID-19 Vaccination: FDA Safety Communication | FDA

- **If you received a COVID-19 vaccination:** Continue to follow the CDC's [recommendations for fully vaccinated people \(https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html\)](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html). Be aware that if you have a positive test result on a SARS-CoV-2 antibody test, it is possible you were previously infected with SARS-CoV-2. A COVID-19 vaccination may also cause a positive antibody test result for some but not all antibody tests. You should not interpret the results of your SARS-CoV-2 antibody test as an indication of a specific level of immunity or protection from SARS-CoV-2 infection. Talk to your health care provider or your state and local health departments if you have questions about whether an antibody test is right for you.

Recommendations for Health Care Providers

- At this time, do not interpret the results of qualitative, semi-quantitative, or quantitative SARS-CoV-2 antibody tests as an indication of a specific level of immunity or protection from SARS-CoV-2 infection after the person has received a COVID-19 vaccination. While a positive antibody test can indicate an immune response has occurred (seroconversion), and failure to detect such a response may suggest a lack of immune response, more research is needed. Currently [authorized SARS-CoV-2 antibody tests \(/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas-serology-and-other-adaptive-immune-response-tests-sars-cov-2\)](/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas-serology-and-other-adaptive-immune-response-tests-sars-cov-2) are not validated to evaluate specific immunity or protection from SARS-CoV-2 infection. SARS-CoV-2 antibody tests should be ordered only by health care providers who are familiar with the use and limitations of the test. For more information about antibody tests for SARS-CoV-2, see [Serology/Antibody Tests: FAQs on Testing for SARS-CoV-2 \(/medical-devices/coronavirus-covid-19-and-medical-devices/serologyantibody-tests-faqs-testing-sars-cov-2\)](/medical-devices/coronavirus-covid-19-and-medical-devices/serologyantibody-tests-faqs-testing-sars-cov-2).
- Be aware that vaccines trigger antibodies to specific viral protein targets. For example, currently authorized COVID-19 mRNA vaccines induce antibodies to the spike protein and not to nucleocapsid proteins that are likely detected only after natural infections. Therefore, COVID-19 vaccinated people who have not had previous natural infection will receive a negative antibody test result if the antibody test does not detect the antibodies induced by the COVID-19 vaccine. If you are considering antibody testing in vaccinated individuals, follow the [Centers for Disease Control and Prevention's guidelines \(https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antibody-tests-guidelines.html\)](https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antibody-tests-guidelines.html) for antibody testing. For more information about antibody test performance visit [EUA Authorized Serology Test Performance \(/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/eua-authorized-serology-test-performance\)](/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/eua-authorized-serology-test-performance).

9/2/2021

Antibody Testing Is Not Currently Recommended to Assess Immunity After COVID-19 Vaccination: FDA Safety Communication | FDA

Potential Risks of Improperly Using SARS-CoV-2 Antibody Test Results

Antibodies are proteins created by your body's immune system soon after you have been infected or vaccinated. SARS-CoV-2 antibody or serology tests look for antibodies in a blood sample to determine if an individual has had a past infection with the virus that causes COVID-19. These types of tests cannot be used to diagnose a current infection. For more information about antibody testing, see [Antibody \(Serology\) Testing for COVID-19: Information for Patients and Consumers \(/medical-devices/coronavirus-covid-19-and-medical-devices/antibody-serology-testing-covid-19-information-patients-and-consumers\)](#).

Test results from currently authorized SARS-CoV-2 antibody tests should not be used to evaluate a person's level of immunity or protection from COVID-19. If the results of the antibody test are interpreted as an indication of a specific level of immunity or protection from SARS-CoV-2 infection, there is a potential risk that people may take fewer precautions against SARS-CoV-2 exposure. Taking fewer precautions against SARS-CoV-2 exposure can increase their risk of infection and may result in increased spread of SARS-CoV-2.

FDA Actions

The FDA will continue to monitor the use of authorized SARS-CoV-2 antibody tests for purposes other than identifying people with an immune response to SARS-CoV-2 from a recent or prior infection.

The FDA provided updated information about [SARS-CoV-2 antibody tests \(/medical-devices/coronavirus-covid-19-and-medical-devices/serologyantibody-tests-faqs-testing-sars-cov-2\)](#) and will continue to keep health care providers and the public informed if new additional information becomes available. The FDA also provides information on [Antibody \(Serology\) Testing for COVID-19: Information for Patients and Consumers \(/medical-devices/coronavirus-covid-19-and-medical-devices/antibody-serology-testing-covid-19-information-patients-and-consumers\)](#) and will update the page if new additional information becomes available.

Reporting Problems

If you think you had a problem with a SARS-CoV-2 antibody test, the FDA encourages you to [report the problem through the MedWatch Voluntary Reporting Form \(https://www.accessdata.fda.gov/scripts/medwatch/index.cfm?action=reporting.home\)](#).

Health care personnel employed by facilities that are subject to the FDA's user facility reporting requirements should follow the reporting procedures established by their facilities.

Questions?

9/2/2021

Antibody Testing Is Not Currently Recommended to Assess Immunity After COVID-19 Vaccination: FDA Safety Communication | FDA

If you have questions, email the Division of Industry and Consumer Education (DICE) at DICE@FDA.HHS.GOV (<mailto:DICE@FDA.HHS.GOV>), or call 800-638-2041 or 301-796-7100.

EXHIBIT 5

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA
CIVIL MINUTES—GENERAL

Case No. **EDCV 21-1243 JGB (KKx)** Date July 30, 2021

Title *America’s Frontline Doctors, et al. v. Kim A. Wilcox, et al.*

Present: The Honorable **JESUS G. BERNAL, UNITED STATES DISTRICT JUDGE**

MAYNOR GALVEZ
Deputy Clerk

Not Reported
Court Reporter

Attorney(s) Present for Plaintiff(s):
None Present

Attorney(s) Present for Defendant(s):
None Present

Proceedings: Order DENYING Plaintiffs’ Ex Parte Application for Temporary Restraining Order (Dkt. No. 8) (IN CHAMBERS)

Before the Court is an ex parte application for temporary restraining order and order to show cause why a preliminary injunction should not issue filed by Plaintiffs America’s Frontline Doctors, Carly Powell, and Deborah Choi. (“Application,” Dkt. No. 8.) After considering the papers filed in support of and in opposition to the Application, the Court DENIES the Application.

I. BACKGROUND

On July 26, 2021, Plaintiffs America’s Frontline Doctors (“AFD”), Carly Powell, and Deborah Choi filed a complaint against Defendants Kim A. Wilcox, Chancellor of the University of California Riverside (“Wilcox” or “UC Riverside Chancellor”); Howard Gillman, Chancellor of the University of California Irvine (“Gillman” or “UC Irvine Chancellor”); The Regents of the University of California (“Regents”); and Michael V. Drake, President of the University of California. (“Complaint,” Dkt. No. 1.)

The Complaint alleges five causes of action arising from the University of California’s COVID-19 Vaccination Program: (1) declaratory relief for violation of Fourteenth Amendment right to bodily integrity; (2) injunctive relief for violation of Fourteenth Amendment right to bodily integrity; (3) injunctive relief for violation of Fourteenth Amendment right to freedom from state created danger; (4) violation of Unruh Act for discrimination based on medical condition and genetic status; and (5) violation of Cal. Govt. Code § 11135 for discrimination based on medical condition and genetic status. (See Compl.)

Plaintiffs filed the Application on July 27, 2021. In support of the Application, Plaintiffs filed the following declarations:

- Declaration of Angelina Farella, MD (“Farella Declaration,” Dkt. No. 8 at 36);
- Declaration of Lee Merritt, MD (“Merritt Declaration,” Dkt. No. 8 at 45);
- Declaration of Mike Yeadon, PhD (“Yeadon Declaration,” Dkt. No. 8 at 56);
- Declaration of Peter A. McCullough, MD (“McCullough Declaration,” Dkt. No. 8 at 95);
- Declaration of Simone Gold, MD, JD (“Gold Declaration,” Dkt. No. 8 at 304);
- Declaration of Richard Urso, MD (“Urso Declaration,” Dkt. No. 8 at 308);
- Declaration of Carly Powell (“Powell Declaration,” Dkt. No. 8 at 318); and
- Declaration of Deborah Choi (“Choi Declaration,” Dkt. No. 8 at 321).

Defendants filed an opposition on July 28, 2021. (“Opposition,” Dkt. No. 9.) In support of the Opposition, Defendants filed the following declarations:

- Declaration of Bernadette M. Boden-Albala, MPH (“Boden-Albala Declaration,” Dkt. No. 10);
- Declaration of David Lo, MD, PhD (“Lo Declaration,” Dkt. No. 11);
- Declaration of Susan S. Huang, MD, MPH (“Huang Declaration,” Dkt. No. 12); and
- Declaration of Emily T. Kuwahara (“Kuwahara Declaration,” Dkt. No. 13).

II. FACTS

A. The Policy

On July 15, 2021, the University of California (“University” or “UC”) adopted the SARS-CoV-2 (COVID-19) Vaccination Program (“Policy”) “to facilitate the protection of the health and safety of the University community” in the face of the COVID-19 pandemic. (Kuwahara Decl., Ex. 2.) The Policy requires personnel, students, and trainees (“Covered Individuals”)¹ to provide proof of full vaccination or submit a request for exception or deferral as a condition of physical presence at any campus, medical center, or facility operated by the University. (*Id.* at 5.) Covered Individuals must meet this requirement by two weeks before the first day of instruction. (*Id.*)

¹ Specifically, Covered Individuals include “anyone designated as Personnel, Students, or Trainees ... who physically access a University Facility or Program in connection with their employment, appointment, or education/training.” (*Id.* at 2.)

The Policy provides for limited exceptions based on medical exemption, disability, or religious objections. (Id. at 3.) Deferrals are only available based on pregnancy, for the duration of the pregnancy, and until the individual returns to work or instruction. (Id. at 2.)

Individuals who were recently diagnosed with COVID-19 and/or had an antibody test that shows they have natural immunity may be eligible for a temporary medical exemption:

You may be eligible for a temporary Medical Exemption (and, therefore, a temporary Exception), for up to 90 days after your diagnosis and certain treatments. According to the US Food and Drug Administration, however, “a positive result from an antibody test does not mean you have a specific amount of immunity or protection from SARS-CoV-2 infection ... Currently authorized SARS-CoV-2 antibody tests are not validated to evaluate specific immunity or protection from SARS-CoV-2 infection.” For this reason, individuals who have been diagnosed with COVID-19 or had an antibody test are not permanently exempt from vaccination.

(Id. at 11.)

The Policy provides that “[a]lternative remote instructional programming is not expected to be available in most cases and the availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.” (Id. at 5.) Covered Individuals who do not comply with the Policy by presenting proof of vaccination or requesting an applicable exception or deferral “will be barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including dismissal from educational programs or employment.” (Id. at 12-13.)

In a letter accompanying the Policy, University President Michael V. Drake, MD, explained that the Policy “is the product of consultation with UC infectious disease experts and ongoing review of evidence from medical studies concerning the dangerousness of COVID-19 and emerging variants of concern, as well as the safety and effectiveness of the vaccines for preventing infection, hospitalizations, and deaths from COVID-19, and for reducing the spread of this deadly disease.” (Kuwahara Decl., Ex. 1.) Drake further asserts that the Policy “was arrived at after reviewing the safety and efficacy of the three vaccines approved by the Food and Drug Administration (FDA) for emergency use, and considering the severe risks presented by a virus that has killed more than 600,000 people in the United States alone, as well as the rise of more transmissible and more virulent variants.” (Id.)

B. Plaintiffs’ Position

Plaintiffs challenge the Policy as it applies to individuals who contracted COVID-19 and recovered. Plaintiff Deborah Choi is a second-year law student at UC Irvine, who is also employed by the school as a research assistant. (Choi Decl. ¶ 2.) Choi contracted COVID-19 in November 2020 and recovered. (Id. ¶ 5.) Plaintiff Carly Powell is a senior at UC Riverside.

(Powell Decl. ¶ 2.) Powell contracted COVID-19 in December 2020 and recovered. (Id. ¶ 3.) Individual Plaintiffs assert that they have not provided their “informed consent” to COVID-19 vaccination. (Choi Decl. ¶ 3; Powell Decl. ¶ 6.) They argue that the Policy does not respect their right to work with their doctors to assess their natural immunity to COVID-19 beyond 90 days. (Choi Decl. ¶ 3; Powell Decl. ¶ 6.) AFD asserts that its member physicians provide care to UC students directly impacted by the Policy, which in turn impairs the physician-patient relationships. (Compl. ¶ 6; Gold Decl. ¶ a.) Plaintiffs seek a temporary restraining order enjoining Defendants from enforcing the Policy rejecting prescreening of natural immunity. (See Appl.)

III. LEGAL STANDARD

A temporary restraining order (“TRO”) preserves the status quo and prevents irreparable harm until a hearing may be held on the propriety of a preliminary injunction. See Reno Air Racing Ass’n, Inc. v. McCord, 452 F.3d 1126, 1131 (9th Cir. 2006). The standard for issuing a TRO is identical to the standard for issuing a preliminary injunction. Lockhead Missile & Space Co. v. Hughes Aircraft Co., 887 F. Supp. 1320, 1323 (N.D. Cal. 1995).

“A preliminary injunction is an extraordinary and drastic remedy; it is never awarded as of right.” Munaf v. Geren, 553 U.S. 674, 689 (2008) (citations omitted). An injunction is binding only on parties to the action, their officers, agents, servants, employees, and attorneys and those “in active concert or participation” with them. Fed. R. Civ. P. 65(d)(2).

“A plaintiff seeking a preliminary injunction must establish that he is likely to succeed on the merits, that he is likely to suffer irreparable harm in the absence of preliminary relief, that the balance of equities tips in his favor, and that an injunction is in the public interest.” Winter v. Natural Res. Def. Council, Inc., 555 U.S. 7, 20 (2008). In the Ninth Circuit, “serious questions going to the merits and a balance of hardships that tips sharply towards the plaintiff can support issuance of a preliminary injunction, so long as the plaintiff also shows that there is a likelihood of irreparable injury and that the injunction is in the public interest.” Alliance for Wild Rockies v. Cottrell, 632 F.3d 1127, 1135 (9th Cir. 2011) (internal quotations omitted).

When seeking a temporary restraining order through an ex parte application, a plaintiff must further show that he is without fault in creating the crisis necessitating the bypass of regular motion procedures. See Mission Power Eng’g Co. v. Cont’l Gas Co., 883 F. Supp. 488, 492–93 (C.D. Cal. 1995). The propriety of a temporary restraining order, in particular, hinges on a significant threat of irreparable injury, Simula, Inc. Autoliv, Inc., 175 F.3d 716, 725 (9th Cir. 1999), that must be imminent in nature, Caribbean Marine Serv. Co. v. Baldrige, 844 F.2d 668, 674 (9th Cir. 1988). The Ninth Circuit has cautioned that there are very few circumstances justifying the issuance of an ex parte temporary restraining order. Reno Air Racing Assoc., Inc., 452 F.3d at 1131.

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IV. DISCUSSION

Plaintiffs request that the Court enjoin enforcement of the Policy “unnecessarily rushing Covid-19 vaccination upon already immune students without their informed consent and without the opportunity of their doctors to protect them from risk of physical injury and death.” (Appl. at 2.) To succeed, Plaintiffs must show that (1) they are likely to succeed on the merits of their claim; (2) they are likely to suffer irreparable harm in the absence of emergency relief; (3) the balance of equities tips in their favor; and (4) an injunction is in the public interest. Winter v. Natural Res. Def. Council, Inc., 555 U.S. 7, 20 (2008). As detailed below, Plaintiffs do not meet their burden as to any factor.

A. Likelihood of Success

Plaintiffs claim that the Policy infringes on (1) their Fourteenth Amendment right to bodily integrity, (2) their Fourteenth Amendment right to be free from state created dangers, and (3) the prohibition against discrimination on the basis of medical condition and genetic status under the California Unruh Act and Cal. Govt. Code § 11135.

1. Fourteenth Amendment – Violation of Bodily Integrity

a. Standard of Constitutional Scrutiny

The Supreme Court recognizes a “constitutionally protected liberty interest in refusing unwanted medical treatment[.]” Cruzan v. Dir., Missouri Dep’t of Health, 497 U.S. 261, 278 (1990). Plaintiffs argue that the Policy’s restrictions of that right to free and informed consent is subject to strict scrutiny. (Appl. at 6.) Not so. Where an alleged government deprivation infringes on a fundamental right, courts apply strict scrutiny, the most rigorous form of constitutional scrutiny of the government action. Nunez v. City of L.A., 147 F.3d 867, 871 (9th Cir. 1998); Washington v. Glucksberg, 521 U.S. 702, 721 (1997). Under that standard, the Fourteenth Amendment “forbids the government to infringe ... fundamental liberty interests ... unless the infringement is narrowly tailored to serve a compelling state interest.” Glucksberg, 521 U.S. at 721. However, where the infringed liberties are neither fundamental nor based on suspect classification, rational basis review applies. Sylvia Landfield Tr. v. City of L.A., 729 F.3d 1189, 1191 (9th Cir. 2013); Glucksberg, 521 U.S. at 728. Under rational basis review, “legislation is presumed to be valid and will be sustained if the classification drawn by the statute is rationally related to a legitimate state interest.” City of Cleburne v. Cleburne Living Ctr., 473 U.S. 432, 440 (1985).

None of Plaintiffs’ authorities support their proposition that the right to informed consent is a fundamental right under the Constitution. Rather, Plaintiffs appear to rely on Roman Catholic Diocese of Brooklyn v. Cuomo to support the application of strict scrutiny. 141 S. Ct. 63, 67 (2020). (Appl. at 7-8.) But Cuomo concerned capacity restrictions on religious institutions, which plaintiffs argued were treated less favorably than “essential” businesses. The Court applied strict scrutiny because the law at issue targeted religious practice, and “the

challenged restrictions [we]re not ‘neutral’ and of ‘general applicability[.]’” Cuomo, 141 S. Ct. at 67 (citing Church of the Lukumi Babalu Aye, Inc. v. City of Hialeah, 508 U.S. 520, 546 (1993)). “In addressing the constitutional protection for free exercise of religion,” courts apply strict scrutiny unless the challenged law is neutral and of general applicability. Church of Lukumi, 508 U.S. at 531. However, a law “that is neutral and of general applicability need not be justified by a compelling governmental interest even if the law has the incidental effect of burdening a particular religious practice.” Church of Lukumi, 508 U.S. at 531.

Strict scrutiny is not applicable here. First, Plaintiffs make no showing that the Policy targets the free exercise of religion. Even if that were the case, as Defendants point out, the Policy is in fact neutral and of general applicability. More generally, Plaintiffs make no showing that the interest at issue here (bodily autonomy or informed consent) is fundamental under the Constitution so as to require greater scrutiny. Thus, the Court applies rational basis. See Klaassen, 2021 WL 3073926, at *21 (“Government action that infringes on the liberty interest here ... is subject to rational basis review.”). This is consistent with the longstanding application of rational basis review to assess mandatory vaccination measures. Id. at *24 (listing cases).

b. Application

The Policy is “rationally related to a legitimate state interest.” City of Cleburne, 473 U.S. at 440. The Supreme Court has recognized that “[s]temming the spread of COVID-19 is unquestionably a compelling interest.” Cuomo, 141 S. Ct. at 67. At issue is whether the Policy is rationally related to this compelling state interest. The Policy easily meets this test.

Over a century ago, the Supreme Court held that “a community has the right to protect itself against an epidemic of disease which threatens the safety of its members.” Jacobson v. Commonwealth of Massachusetts, 197 U.S. 11, 27 (1905). California is facing a surge of COVID-19 cases, spurred by the highly contagious Delta variant. (Kuwahara Decl., Exs. 3-7, 12 (recent news report detailing sharp increase in COVID-19 cases and the prevalence of the Delta variant); Lo Decl. ¶ 7.) Extensive data supports vaccination as an effective strategy for preventing severe disease, hospitalization, and death from COVID-19. (Kuwahara Decl., Ex. 8 at 34-36; Huang Decl. ¶¶ 6-7.) The vaccines currently available in the United States were authorized for emergency use after extensive randomized controlled trials, and the U.S. Centers for Disease Control and Prevention (“CDC”) and U.S. Food and Drug Administration (“FDA”) continue to conduct post-authorization safety and monitoring. (Id.)

As stated in the Policy Summary, the Policy’s purpose is “to facilitate protection of the health and safety of the University community.” (Kuwahara Decl., Ex. 2 at 2.) It is “the product of consultation with UC infectious disease experts and ongoing review of evidence from medical studies concerning the dangerousness of COVID-19 and emerging variants of concern, as well as the safety and effectiveness of the vaccines for preventing infection, hospitalizations, and deaths from COVID-19, and for reducing the spread of this deadly disease.” (Id., Ex. 1 at 1.) Susan Huang, MD, MPH, attests that the UC Health infection prevention leadership group was actively consulted regarding the Policy. (Huang Decl. ¶ 5 (endorsing the Policy).) Facing similar

circumstances, several universities resuming on-campus operations have adopted similar policies. (Kuwahara Decl., Exs. 13-21.)

As it pertains to individuals who previously contracted COVID-19, Defendants point to evidence that “ascertainment of prior infection can be unreliable or impractical in some cases, and the duration of protection of prior infection is unknown.” (*Id.*, Ex. 22, at 9-10.²) Data shows that “[v]accination appears to further boost antibody levels in those with past infection and might improve the durability and breadth of protection.” (*Id.*) While this report recognizes that “[i]ndividuals with a history of SARS-CoV-2 may be more likely to experience local and systemic adverse effects (eg, fevers, chills, myalgias, fatigue) after a first vaccine dose[,] ... [t]his is not a contraindication or precaution to a second dose....” (*Id.*)

In fact, in its Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States,³ the CDC has indicated:

Data from clinical trials indicate that the currently authorized COVID-19 vaccines can be given safely to people with evidence of a prior SARS-CoV-2 infection. Viral testing to assess for acute SARS-CoV-2 infection or serologic testing to assess for prior infection is not recommended for the purposes of vaccine decision-making.... While there is no recommended minimum interval between infection and vaccination, current evidence suggests that the risk of SARS-CoV-2 reinfection is low in the months after initial infection but may increase with time due to waning immunity.

Indeed, a recent study suggests that the immunity of individuals who previously had COVID-19 may not be as effective against the surging Delta variant. (Kuwahara Decl., Ex. 24.) Thus, the CDC recommends vaccination for individuals who have already had COVID-19 and recovered. (*Id.*, Ex. 23.)

Plaintiffs, of course, dispute the above evidence, arguing that “emerging data establishes that vaccinating the Covid-19 Recovered causes an immediately higher death rate worldwide for no benefit[.]” (Appl. at 10 (citing Compl. ¶ 27).) But Plaintiffs’ arguments amount to “disputes over the most reliable science,” and the Court will not intervene “as long as [Defendants’] process is rational in trying to achieve public health.” *Klaassen*, 2021 WL 3073926, at *38 (citing *Phillips v. City of New York*, 775 F.3d 538, 542 (2d Cir. 2015) (“[P]laintiffs argue that a growing body of scientific evidence demonstrates that vaccines cause more harm to society than good, but as *Jacobson* made clear, that is a determination for the [policymaker], not the individual

² Kathryn M. Edwards, et al., “COVID-19: Vaccines to prevent SARS-CoV-2 infection,” UpToDate (updated July 26, 2021), <https://www.uptodate.com/contents/covid-19-vaccines-to-prevent-sars-cov-2-infection>.

³ See “People with prior or current SARS-CoV-2 infection,” CDC (updated July 16, 2021) <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>.

objectors.”)). The Court finds that there is clearly a rational basis for Defendants to institute the Policy requiring vaccination, including for individuals who previously had COVID-19. Plaintiffs’ first claim is unlikely to succeed on the merits.

2. Fourteenth Amendment – State Created Danger

Plaintiffs next argue that Defendants have shown “deliberate indifference to the known and obvious danger of vaccine injury,” which creates and exposes Plaintiffs to health dangers that they would not otherwise face, in contravention of the Fourteenth Amendment. (Appl. at 15-16.) The state-created danger exception applies only where “there is affirmative conduct on the part of the state in placing the plaintiff in danger,” and “the state acts with deliberate indifference to a known or obvious danger.” Patel v. Kent Sch. Dist., 648 F.3d 965, 974 (9th Cir. 2011) (internal quotation marks omitted). Plaintiffs fail to make this showing.

Deliberate indifference is “a stringent standard of fault, requiring proof that [the state] actor disregarded a known or obvious consequence of his action.” Id. The state actor must “recognize an unreasonable risk and actually intend to expose the plaintiff to such risks without regard to the consequences to the plaintiff.” Id. at 975. Here, the record supports the opposite conclusion.

The Policy provides that it was adopted to protect the health and safety of the community. (Kuwahara Decl., Ex. 2 at 2.) It was developed in active consultation with infectious disease experts, including the UC Health infection prevention leadership. (Huang Decl. ¶ 5; see also Kuwahara Decl. Ex. 1 (detailing that the Policy was developed in consultation with UC infectious disease experts and after a review of evidence from medical studies).) These experts endorse the Policy, including its application to individuals who previously contracted COVID-19 and recovered, as a crucial measure to protect the University community (including those individuals). (See Boden-Albala Decl.; Lo Decl.; Huang Decl.)

The Policy explicitly accounts for recent COVID-19 diagnoses by providing a temporary medical exemption. (Kuwahara Decl., Ex. 2.) While Plaintiffs point to a danger of “vaccine injury” for individuals with natural immunity, as noted above, the CDC recommends vaccination for those who have contracted and recovered from COVID-19, citing data from clinical trials. (Id., Ex. 23 (CDC, “Frequently Asked Questions about COVID-19 Vaccination”); n.3 infra). The Policy thus stands in harmony with recommendations by the CDC and FDA, which “strongly believes that the known and potential benefits of COVID-19 vaccination greatly outweigh the known and potential risks of COVID-19.” (Id., Ex. 28 (FDA, COVID-19 Vaccine Safety Surveillance, July 12, 2021); Ex. 27 (CDC, Safety of COVID-19 Vaccines) (noting that “serious safety problems are rare”).) This evidence supports Defendants’ conclusion that requiring vaccination is far from an “unreasonable risk” or a “known and obvious danger.” Plaintiffs are unlikely to prevail on the merits of their second claim.

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3. State Law Claims

Finally, Plaintiffs assert state law claims under the California Unruh Act and Cal. Govt. Code § 11135. However, as Defendants point out, these claims are barred by the Eleventh Amendment. (Opp’n at 18.) The Eleventh Amendment bars suits for damages or injunctive relief against a state, an arm of the state, its instrumentalities, or its agencies. Durning v. Citibank, N.A., 950 F.2d 1419, 1422-23 (9th Cir. 1991). Plaintiffs assert state law claims against The Regents of the University of California, as well as UC President, the UC Riverside Chancellor, and the UC Irvine Chancellor, all in their official capacities. However, the Regents of the University of California “are an arm of the state entitled to Eleventh Amendment immunity.” Feied v. The Regents of the Univ. of California, 188 F. App’x 559, 561 (9th Cir. 2006). The Eleventh Amendment also prohibits actions against state officials in their official capacities. Stivers v. Pierce, 71 F.3d 732, 749 (9th Cir. 1995)

A citizen may sue a state in federal court if the state waives its immunity and consents to suit. Welch v. Tex. Dep’t of Highways & Pub. Transp., 483 U.S. 468, 473 (1987). “A State’s consent to suit must be ‘unequivocally expressed’ in the text of the relevant statute.” Sossamon, 563 U.S. at 284. Plaintiffs point to no such statutory waiver. Absent an express and unequivocal waiver of California’s sovereign immunity, Plaintiffs’ state law claims are unlikely to succeed.

B. Irreparable Harm

Next, Plaintiffs must establish that there is a likelihood of irreparable injury absent the Court’s grant of the TRO. Alliance for Wild Rockies v. Cottrell, 632 F.3d 1127, 1135 (9th Cir. 2011). As Plaintiffs point out, “[i]t is well established that the deprivation of constitutional rights ‘unquestionably constitutes irreparable injury.’” Melendres v. Arpaio, 695 F.3d 990, 1002 (9th Cir. 2012) (quoting Elrod v. Burns, 427 U.S. 347, 373 (1976)). But, for the reasons discussed above, Plaintiffs’ constitutional claims are unlikely to succeed. Plaintiffs’ claims that the Policy violates their constitutional rights are thus insufficient to establish irreparable harm.

Plaintiffs further suggest that AFD will suffer irreparable harm because member physicians provide care to UC students impacted by the vaccine mandate, which would irreparably impair their physician-patient relationships. (Appl. at 20 (citing Compl. ¶¶ 6, 11).) In turn, Individual Plaintiffs argue they face “risks of life and limb ... if they are forced to unnecessarily vaccinate[.]” (Appl. at 20.) They add that the vaccine mandate has put them under duress, impaired their ability to exercise informed consent or refusal of the vaccine with physicians of their choice, and imperiled their academic status and livelihood as students. (See Choi Decl.; Powell Decl.) The Court is not persuaded.

First, as Defendants point out, AFD makes no showing that its members are subject to the Policy, or have any role in executing the Policy (such as being required to provide the vaccines to their patients). AFD shows little more than a tenuous connection to the Policy - that some physicians may provide care to UC students who disagree with the Policy. But that is not enough to show harm, much less irreparable harm, to AFD.

Second, Plaintiffs fail to establish that Individual Plaintiffs will be irreparably harmed. Plaintiffs allude to a series of harms resulting from being “forced to unnecessarily vaccinate.” But as Defendants point out, Individual Plaintiffs are not “forced” to vaccinate. Rather, under the Policy, vaccination is a condition of physical presence at the University. All students, including Individual Plaintiffs, have a choice – albeit undoubtedly a difficult one – to get vaccinated, seek an exemption (if applicable), or transfer elsewhere.

It is well established that “[a] delay in collegiate or graduate education isn’t typically irreparable harm.” Klaassen v. Trustees of Indiana Univ., 2021 WL 3073926, at *41 (N.D. Ind. July 18, 2021). Indeed, courts have repeatedly held that delays in education are compensable by monetary damages. See, e.g., Doe v. Princeton Univ., 2020 WL 2097991, at *7 (D.N.J. May 1, 2020) (a delay in plaintiff’s education, analogous to a suspension, can be remedied through monetary compensation); Madej v. Yale Univ., 2020 WL 1614230, at *6–7 (D. Conn. Mar. 31, 2020) (academic withdrawal does not mean plaintiff will never be able to obtain his degree; rather, his ability to do so will be delayed, which can be remedied through monetary compensation; reputational harm assertions are “too speculative to warrant injunctive relief”); Roden v. Floyd, 2018 WL 6816162, at *5 (E.D. Mich. Nov. 13, 2018), report and recommendation adopted, 2018 WL 6815620 (E.D. Mich. Dec. 27, 2018) (delays in education do not constitute irreparable harm); Phillips v. Marsh, 687 F. 2d 620 (2d Cir. 1982) (“We can conceive of no irreparable harm that would accrue to [the plaintiff] in allowing her graduation to await the outcome of the trial on the merits; any damages to her from deferring her career as a military officer in that period of time would surely be compensable by monetary damages.”). Plaintiffs make no showing as to why this case would warrant a different conclusion. The Court finds that Plaintiffs fail to meet their burden to show irreparable harm.

C. Balance of Equities and Public Interest

Finally, the Court finds that the balance of equities and the public interest weighs heavily against the requested relief. Plaintiffs Choi and Powell assert an individual liberty interest in refusing unwanted treatment. (See Appl.) While that is certainly an important liberty interest, “[v]accines address a collective enemy, not just an individual one.” Klaassen, 2021 WL 3073926, at *24. Thus, Plaintiffs’ decision to refuse vaccination does not affect them alone. The UC community includes more than 280,000 students, and more than 227,000 faculty and staff, who are expected to return to its campuses this fall. (Boden-Albala Decl. ¶ 8.) This community includes individuals who may be at higher risk of contracting COVID-19 and/or suffering poor prognostics outcomes for said infection. (Id. ¶ 7.) High vaccine coverage in the community protects the community at large, including those who are particularly vulnerable and those who cannot be vaccinated. (Id.; see also Huang Decl. ¶¶ 6-9; Lo Decl. ¶¶ 6-10.) Facing a sharp surge in COVID-19 cases and the highly contagious Delta variant (Kuwahara Decl., Exs. 3-6), the Policy seeks to “maintain the health and well-being of the campus community and that of the general public” by limiting physical access to the University community to those who are vaccinated (or eligible for limited exemptions). (Kuwahara Decl., Ex. 1.) These public concerns

weigh more heavily than Individual Plaintiffs' interest in refusing unwanted treatment, particularly where they have other options, as discussed above.

Plaintiffs assert that Defendants are "in no way harmed by the issuance of an injunction that prevents the state from enforcing unconstitutional restrictions." Legends Night Club v. Miller, 637 F.3d 291, 302-03 (4th Cir. 2011). (Appl. at 21.) But Plaintiffs fail to show that they are likely to succeed on the merits of their constitutional claims. Similarly, other than a few references to "State sponsored propaganda," Plaintiffs fail to address the public interest in the health and safety of the larger community. As several other courts have held, Plaintiffs have failed to establish that the balance of harms or the public's interest favors the extraordinary remedy of a temporary restraining order. Klaassen, 2021 WL 3073926, at *45-46; Carmichael v. Ige, 470 F. Supp. 3d 1133 (D. Haw. 2020).

V. CONCLUSION

For the reasons above, the Court DENIES Plaintiffs' Application.

IT IS SO ORDERED.

EXHIBIT 6

9/2/2021

FDA Approves First COVID-19 Vaccine | FDA

FDA NEWS RELEASE

FDA Approves First COVID-19 Vaccine

Approval Signifies Key Achievement for Public Health

For Immediate Release:

August 23, 2021

Español (<https://www.fda.gov/news-events/press-announcements/la-fda-aprueba-la-primer-vacuna-contra-el-covid-19>)

Today, the U.S. Food and Drug Administration approved the first COVID-19 vaccine. The vaccine has been known as the Pfizer-BioNTech COVID-19 Vaccine, and will now be marketed as Comirnaty (koe-mir'-na-tee), for the prevention of COVID-19 disease in individuals 16 years of age and older. The vaccine also continues to be available under emergency use authorization (EUA), including for individuals 12 through 15 years of age and for the administration of a third dose in certain immunocompromised individuals.

“The FDA’s approval of this vaccine is a milestone as we continue to battle the COVID-19 pandemic. While this and other vaccines have met the FDA’s rigorous, scientific standards for emergency use authorization, as the first FDA-approved COVID-19 vaccine, the public can be very confident that this vaccine meets the high standards for safety, effectiveness, and manufacturing quality the FDA requires of an approved product,” said Acting FDA Commissioner Janet Woodcock, M.D. **“While millions of people have already safely received COVID-19 vaccines, we recognize that for some, the FDA approval of a vaccine may now instill additional confidence to get vaccinated. Today’s milestone puts us one step closer to altering the course of this pandemic in the U.S.”**

Since Dec. 11, 2020, the Pfizer-BioNTech COVID-19 Vaccine has been available under EUA in individuals 16 years of age and older, and the authorization was expanded to include those 12 through 15 years of age on May 10, 2021. EUAs can be used by the FDA during public health emergencies to provide access to medical products that may be effective in preventing, diagnosing, or treating a disease, provided that the FDA determines that the known and potential benefits of a product, when used to prevent, diagnose, or treat the disease, outweigh the known and potential risks of the product.

FDA-approved vaccines undergo the agency’s standard process for reviewing the quality, safety and effectiveness of medical products. For all vaccines, the FDA evaluates data and information included in the manufacturer’s submission of a biologics license application (BLA). A BLA is a

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FDA Approves First COVID-19 Vaccine | FDA

comprehensive document that is submitted to the agency providing very specific requirements. For Comirnaty, the BLA builds on the extensive data and information previously submitted that supported the EUA, such as preclinical and clinical data and information, as well as details of the manufacturing process, vaccine testing results to ensure vaccine quality, and inspections of the sites where the vaccine is made. The agency conducts its own analyses of the information in the BLA to make sure the vaccine is safe and effective and meets the FDA's standards for approval.

Comirnaty contains messenger RNA (mRNA), a kind of genetic material. The mRNA is used by the body to make a mimic of one of the proteins in the virus that causes COVID-19. The result of a person receiving this vaccine is that their immune system will ultimately react defensively to the virus that causes COVID-19. The mRNA in Comirnaty is only present in the body for a short time and is not incorporated into - nor does it alter - an individual's genetic material. Comirnaty has the same formulation as the EUA vaccine and is administered as a series of two doses, three weeks apart.

“Our scientific and medical experts conducted an incredibly thorough and thoughtful evaluation of this vaccine. We evaluated scientific data and information included in hundreds of thousands of pages, conducted our own analyses of Comirnaty’s safety and effectiveness, and performed a detailed assessment of the manufacturing processes, including inspections of the manufacturing facilities,” said Peter Marks, M.D., Ph.D., director of FDA’s Center for Biologics Evaluation and Research. **“We have not lost sight that the COVID-19 public health crisis continues in the U.S. and that the public is counting on safe and effective vaccines. The public and medical community can be confident that although we approved this vaccine expeditiously, it was fully in keeping with our existing high standards for vaccines in the U.S.”**

FDA Evaluation of Safety and Effectiveness Data for Approval for 16 Years of Age and Older

The first EUA (<https://www.fda.gov/news-events/press-announcements/fda-takes-key-action-fight-against-covid-19-issuing-emergency-use-authorization-first-covid-19>), issued Dec. 11, for the Pfizer-BioNTech COVID-19 Vaccine for individuals 16 years of age and older was based on safety and effectiveness data (<https://www.fda.gov/news-events/press-announcements/fda-takes-key-action-fight-against-covid-19-issuing-emergency-use-authorization-first-covid-19>) from a randomized, controlled, blinded ongoing clinical trial of thousands of individuals.

To support the FDA's approval decision today, the FDA reviewed updated data from the clinical trial which supported the EUA and included a longer duration of follow-up in a larger clinical trial population.

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FDA Approves First COVID-19 Vaccine | FDA

Specifically, in the FDA's review for approval, the agency analyzed effectiveness data from approximately 20,000 vaccine and 20,000 placebo recipients ages 16 and older who did not have evidence of the COVID-19 virus infection within a week of receiving the second dose. The safety of Comirnaty was evaluated in approximately 22,000 people who received the vaccine and 22,000 people who received a placebo 16 years of age and older.

Based on results from the clinical trial, the vaccine was 91% effective in preventing COVID-19 disease.

More than half of the clinical trial participants were followed for safety outcomes for at least four months after the second dose. Overall, approximately 12,000 recipients have been followed for at least 6 months.

The most commonly reported side effects by those clinical trial participants who received Comirnaty were pain, redness and swelling at the injection site, fatigue, headache, muscle or joint pain, chills, and fever. The vaccine is effective in preventing COVID-19 and potentially serious outcomes including hospitalization and death.

Additionally, the FDA conducted a rigorous evaluation of the post-authorization safety surveillance data pertaining to myocarditis and pericarditis following administration of the Pfizer-BioNTech COVID-19 Vaccine and has determined that the data demonstrate increased risks, particularly within the seven days following the second dose. The observed risk is higher among males under 40 years of age compared to females and older males. The observed risk is highest in males 12 through 17 years of age. Available data from short-term follow-up suggest that most individuals have had resolution of symptoms. However, some individuals required intensive care support. Information is not yet available about potential long-term health outcomes. The Comirnaty Prescribing Information includes a warning about these risks.

Ongoing Safety Monitoring

The FDA and Centers for Disease Control and Prevention have monitoring systems in place to ensure that any safety concerns continue to be identified and evaluated in a timely manner. In addition, the FDA is requiring the company to conduct postmarketing studies to further assess the risks of myocarditis and pericarditis following vaccination with Comirnaty. These studies will include an evaluation of long-term outcomes among individuals who develop myocarditis following vaccination with Comirnaty. In addition, although not FDA requirements, the company has committed to additional post-marketing safety studies, including conducting a pregnancy registry study to evaluate pregnancy and infant outcomes after receipt of Comirnaty during pregnancy.

The FDA granted this application Priority Review (<https://www.fda.gov/patients/fast-track-breakthrough-therapy-accelerated-approval-priority-review/priority-review>). The approval was granted to BioNTech Manufacturing GmbH.

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Related Information

- [Comirnaty Prescribing Information \(http://www.fda.gov/vaccines-blood-biologics/comirnaty\)](http://www.fda.gov/vaccines-blood-biologics/comirnaty)
- [Cormirnaty and Pfizer-BioNTech COVID-19 Vaccine | FDA \(/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/comirnaty-and-pfizer-biontech-covid-19-vaccine\)](/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/comirnaty-and-pfizer-biontech-covid-19-vaccine)

###

The FDA, an agency within the U.S. Department of Health and Human Services, protects the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines and other biological products for human use, and medical devices. The agency also is responsible for the safety and security of our nation's food supply, cosmetics, dietary supplements, products that give off electronic radiation, and for regulating tobacco products.

Inquiries

Media:

✉ [FDA Office of Media Affairs \(mailto:fdaoma@fda.hhs.gov\)](mailto:fdaoma@fda.hhs.gov)

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EXHIBIT 7

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CORONAVIRUS INFORMATION

UPLOAD VACCINE DOCUMENTATION

| COVID Vaccination Information |

SECTION MENU

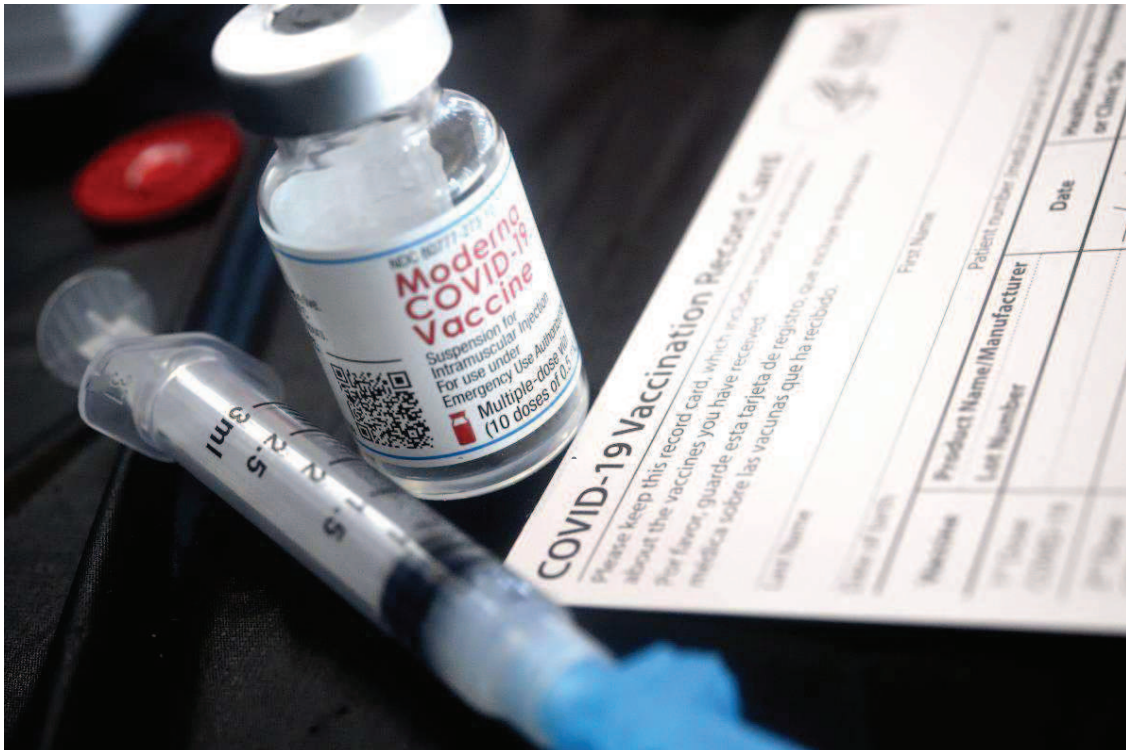


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Ensuring that the overwhelming percentage of our community’s population is vaccinated will greatly reduce the risk of the virus’s spread on our campuses and will also protect our neighbors in Baltimore.

Effective Aug. 1, 2021, COVID-19 vaccination is required for all faculty, staff, postdoctoral fellows, and undergraduate and graduate students who will be working or studying at a Johns Hopkins campus or worksite in the U.S.

This policy includes:

- Individuals working at off-campus worksites such as Keswick, Mount Washington, and Johns Hopkins at Eastern
- Members of non-clinical departments at the School of Medicine (members of clinical departments will be governed by Johns Hopkins Health System vaccination policies)
- Members of collective bargaining units
- Contractors who provide services to the university community and whose primary work location is on university properties located in Maryland or Washington, D.C., regardless of employer

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engaged in work-related travel

- Visitors who fall under the JHU Visitor Policy (e.g., visiting faculty, students, and scholars)

Documentation must be submitted to the [JHU Vaccine Management System](#). Affiliates may also submit an exception request in the VMS.

Exemptions: Fully remote individuals, including staff and online students who are working or studying 100% remotely, are exempt from the vaccination mandate, but they should change their status in [Prodensity](#) to indicate that they will not be coming on campus. If plans change and an individual has to come on campus, work on-site, or participate in a JHU-sponsored residency or field study, they must be vaccinated or have an approved exception.

If a new employee or new/transfer student or visiting scholar has not been vaccinated before the first day of employment, there is a six-week grace period to complete the full vaccination process (including both doses of a two-dose vaccine). Proof of vaccination should be [uploaded to the VMS](#) as soon as possible after their second shot, and no later than six weeks after the first day of employment.

Employees who are not yet fully vaccinated must be tested twice weekly until they are considered fully vaccinated (two weeks after their final dose).

Faculty and staff can take up to two days off to be vaccinated and/or to recover from any side effects. Visit the [Human Resources website](#) for additional details.

EXCEPTIONS TO THE VACCINATION REQUIREMENT

Exceptions may be granted in limited circumstances for:

- Medical or religious reasons (note that the only true contraindications to the COVID-19 vaccine are 1) a severe anaphylactic reaction to a prior dose of one of the mRNA COVID-19 vaccines (requiring the use of epinephrine or EpiPen) or 2) an allergy to a component of the vaccine)

Additionally, the following individuals are exempt:

- Employees who are, with permission of their supervisor, working in a fully remote capacity and do not visit any Johns Hopkins worksite
- Contractors or vendors whose presence at any JHU property is solely limited to the delivery of goods
- Students who are enrolled in entirely online programs and do not utilize Johns Hopkins facilities, and non-degree and non-credit students. (Students who

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order are required to be vaccinated or seek an exception, more details are available directly from Peabody Preparatory.)

- Guests (individuals who are on campus and not subject to the JHU Visitor Policy), which includes those on campus for short periods of time for tours, meetings, and public events

Exception requests were due Aug. 1, 2021.

New employees and new/transfer/visiting students may apply for an exception as soon as they have a JHED ID using the [JHU Vaccine Management System \(VMS\)](#). Additional details on how to request an exception, including required documentation can be found on [this website](#).

Having had COVID-19 in the past is NOT a permissible criterion for an exception.

VACCINATION COMPLIANCE

Any person covered by the vaccine mandate who fails to provide acceptable vaccination documentation, does not receive an approved exception, and/or has an approved exception but does not comply with testing requirements may be denied access to Johns Hopkins property and electronic resources. Those individuals may also be subject to disciplinary action under the Student Conduct Code or the appropriate procedures applicable to faculty and staff.

While Prodensity has integrated real-time compliance with symptom screening, vaccination, and testing mandates, compliance is monitored primarily through weekly reports sent to divisional response teams (composed of divisional leadership including HR managers and divisional business officers) and student affairs staff. Real-time compliance using Prodensity passes should only be used in situations where routine screening can be accomplished by authorized JHU personnel – e.g., a security desk for accessing certain JHU facilities or at a check-in desk for certain on-campus events. Unless authorized by University Administration, faculty, staff, and students are not permitted to make any demands to view Prodensity passes of any JHU affiliates or restrict activities based upon this information. If you have a concern or complaint regarding noncompliance of JHU COVID-19 safety measures by a member of the Hopkins community, please make a confidential report immediately via the [online form](#) or by calling 844-SPEAK2US (844-773-2528).

Affiliates may submit requests for exceptions to the vaccine requirement through VMS, the same system through which vaccine documents are submitted. Affiliates who receive an exception are required to test twice per week (once per week for School of Medicine affiliates). Affiliates who are granted

receive a red campus pass in Proximity and will not have access to campus.

GETTING VACCINATED AT HOPKINS

Johns Hopkins Medicine has established several convenient walk-in clinics in communities across Baltimore and Maryland. The Spot Van at Northeast Market (2101 E. Monument St., Baltimore, MD 21205) operates two mornings per week and is just two blocks from the Bloomberg School of Public Health and School of Nursing.

- **Also see:** [Full list of Johns Hopkins Medicine walk-in clinics](#)

In addition to any scheduled clinics, all Johns Hopkins affiliates in Maryland and Washington, D.C., can schedule a vaccination appointment through Johns Hopkins Medicine in [MyChart](#). MyChart is a secure website and mobile app used by Johns Hopkins Medicine that can be used to schedule COVID-19 tests and vaccinations. [More information is available at hopkinsmedicine.org.](#)

FREQUENTLY ASKED QUESTIONS

▶ **Will Johns Hopkins provide vaccinations for JHU affiliates?**

▶ **Is there anything I need to do before I can schedule a vaccination at a Johns Hopkins physician office or JHM clinic?**

VACCINATION MANDATE - GENERAL INFORMATION

▶ **Why is Johns Hopkins University requiring the COVID vaccine?**

▶ **Who is included in the vaccination mandate?**

▶ **Who is exempt from the vaccination mandate?**

▶ **When will the mandate take effect?**

VACCINATION MANDATE - FACULTY AND STAFF

▶ **Can I take time off to get vaccinated?**

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exception, or if I choose to be tested voluntarily)?

▶ **How do the vaccination policies apply to faculty, students, or staff who may be returning to Johns Hopkins' U.S.-based worksites from abroad?**

▶ **Does the mandate apply to university contractors?**

▶ **Will vaccinated individuals need to continue with COVID-19 safety protocols?**

▶ **Can I ask my colleagues/can they ask me about my status?**

▶ **Who will know my status if I upload my vaccine information to the Vaccine Management System?**

▶ **What are the vaccination requirements for new employees who start after Aug. 1, 2021?**

▶ **Will influenza vaccination be required this year?**

VACCINATION EXCEPTIONS - FACULTY AND STAFF

▶ **Are there exceptions to the vaccination mandate?**

▶ **What are the medical criteria for COVID vaccination exceptions?**

▶ **What additional requirements will be in place for faculty/staff with vaccination exceptions?**

▶ **If I have an exception, can I work from home to avoid masking/testing?**

VACCINATION MANDATE - STUDENTS

▶ **Are vaccinations required for students?**

▶ **What should I do if I am arriving on campus and am not yet fully vaccinated, e.g. not 2 weeks post my final vaccination date?**

▶ **Should students who are unvaccinated arrive earlier in order to get the vaccine?**

VACCINATION MANDATE - INTERNATIONAL STUDENTS

▶ **Is it safe to be revaccinated if I previously received a non-FDA-approved vaccine?**

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COVID Vaccination Information | Coronavirus Information

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other languages?

- ▶ **Is the university contemplating an antibody test (or some other proof of immunity) after vaccination?**

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Office of Communications

3910 Keswick Rd., Suite N-2600 Baltimore, MD

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UPLOAD VACCINE DOCUMENTATION

EXHIBIT 8

7/27/2021

Vaccine Update for Students | President John J. DeGioia | Georgetown University

[\(http://www.georgetown.edu/\)](http://www.georgetown.edu/)

[\(http://www.georgetown.edu/\)](http://www.georgetown.edu/)

[President John J. DeGioia \(https://president.georgetown.edu\)](https://president.georgetown.edu)

Vaccine Update for Students

April 14, 2021

Dear Members of the Georgetown University Community:

As I shared in my [message](#)

<http://links.georgetown.mkt6170.com/els/v2/erz3fLXgmAfx/K1BwS0JLd1A5N115MUNjTjNZSGtBem5UYUovVnlvTlpOe3Z5ZVAzVzldqWdLMHh5R2dRWWo1NVhCNUVFMzBmbkIYUGk1c3AySnN>

March 25, we anticipate that the conditions will be in place this fall to bring our community back and resume more regular life on our campuses. Our gradual return is beginning this summer, with a full return of our community for the fall.

I write today to share an important update on vaccines, which will play a significant role in enabling our return. Following the guidance of our Chief Public Health Officer, Dr. Ranit Mishori, and our Public Health Advisory group, and in consultation with student, staff, and faculty leaders, we will require undergraduate and graduate students at the Main Campus, Medical Center, and Law Center to receive a COVID-19 vaccination for the fall semester.

More than 75 million people in the United States have been vaccinated, and beginning on Monday, April 19, vaccines will be available to all adults in the U.S. Vaccination rates have already begun to have an impact in decreasing the number of COVID-19 cases, hospitalizations, and deaths.

For international students and students living abroad, we will be providing additional information in the coming weeks—recognizing that there are different vaccines and differing levels of access to vaccines for those living outside the United States.

Our COVID-19 [Vaccines web page](#)

<http://links.georgetown.mkt6170.com/els/v2/RaE9TzK6DLTY/K1BwS0JLd1A5N115MUNjTjNZSGtBem5UYUovVnlvTlpOe3Z5ZVAzVzldqWdLMHh5R2dRWWo1NVhCNUVFMzBmbkIYUGk1c3AySnN>

<http://links.georgetown.mkt6170.com/els/v2/baGdTz423bS8/K1BwS0JLd1A5N115MUNjTjNZSGtBem5UYUovVnlvTlpOe3Z5ZVAzVzldqWdLMHh5R2dRWWo1NVhCNUVFMzBmbkIYUGk1c3AySnN>

some additional details on our approach. We will provide updated information on issues such as timing, verification process, and exemptions, once it becomes available. As with all of our existing vaccination requirements for students, medical and religious exemptions will be granted in accordance with federal and local law.

As we look at the additional public health measures that will enable our safe return this fall, we are closely reviewing whether we will establish a vaccine requirement for faculty and staff. We are consulting with our faculty and staff leadership bodies as we consider this decision.

Thank you for your continuing efforts to protect the health and safety of our community. We will share additional updates in the coming weeks.

You have my very best wishes.

Sincerely,

John J. DeGioia



President John J. DeGioia

37th and O Streets, N.W.
Washington DC

7/27/2021

COVID-19 FAQs - Georgetown University

(<https://www.georgetown.edu>)

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COVID-19 FAQs - Georgetown University

Vaccines

Are Georgetown students, faculty and staff required to be vaccinated against COVID-19?

Yes. As President DeGioia shared in his [April 14 message \(https://president.georgetown.edu/vaccine-update-for-students-april-2021/\)](https://president.georgetown.edu/vaccine-update-for-students-april-2021/) and [June 17 message \(https://president.georgetown.edu/vaccine-requirement-faculty-and-staff-june-2021/\)](https://president.georgetown.edu/vaccine-requirement-faculty-and-staff-june-2021/), following the guidance of our chief public health officer, Dr. Ranit Mishori, and our Public Health Advisory group, and in consultation with student, staff and faculty leaders, all students, faculty and staff who will be on one of Georgetown's campuses or in a University-owned or operated building in Washington, DC, this fall must be fully vaccinated against COVID-19.

Medical and religious exemptions will be granted in accordance with federal and local law.

Georgetown University is now able to vaccinate students, faculty and staff on campus, at no cost to community members. Vaccines will be available by appointment only on a rolling basis. If you are interested in getting vaccinated on campus, [sign up for a vaccination appointment \(https://docs.google.com/forms/d/e/1FAIpQLSc3ZaelYix7D4Xf7DqYxVQ9mqGzpjB_3z7FtKgGVPZAKDHpWg/viewform\)](https://docs.google.com/forms/d/e/1FAIpQLSc3ZaelYix7D4Xf7DqYxVQ9mqGzpjB_3z7FtKgGVPZAKDHpWg/viewform). [Widespread access to vaccines \(https://www.vaccines.gov/\)](https://www.vaccines.gov/) in our region means that no employee should be concerned about access to vaccines in order to adhere to this requirement.

Please visit the University's [COVID-19 Vaccines web page \(https://www.georgetown.edu/coronavirus/covid-19-vaccines/\)](https://www.georgetown.edu/coronavirus/covid-19-vaccines/) for more information.

Why is the University requiring students, faculty and staff to be vaccinated?

Vaccination is the most important tool to protect members of our community and to prevent the spread of the virus that causes COVID-19. COVID-19 vaccines offer significant protection to individuals from becoming seriously ill from COVID-19, from being hospitalized and from dying. Research also suggests that fully vaccinated individuals are much less likely to become infected or spread the virus to others. COVID-19 vaccines are safe and effective.

Community members can get vaccinated for free by signing up for an [on-campus vaccination appointment \(https://docs.google.com/forms/d/e/1FAIpQLSc3ZaelYix7D4Xf7DqYxVQ9mqGzpjB_3z7FtKgGVPZAKDHpWg/viewform\)](https://docs.google.com/forms/d/e/1FAIpQLSc3ZaelYix7D4Xf7DqYxVQ9mqGzpjB_3z7FtKgGVPZAKDHpWg/viewform) or by going to a [nearby vaccination clinic \(https://www.vaccines.gov/\)](https://www.vaccines.gov/).

Staff may use [COVID-19 PTO \(https://georgetown.app.box.com/s/s3zg9h1yom8i3c9etz54irxocr2zp1zp\)](https://georgetown.app.box.com/s/s3zg9h1yom8i3c9etz54irxocr2zp1zp) for their vaccination appointment and to recover from any short-term side effects of the vaccine. If a staff member has already used all of their COVID-19 PTO, they may [request to use donated PTO \(https://georgetown.app.box.com/s/oy1rmnta32bzz683frgemz4j2xw60nky\)](https://georgetown.app.box.com/s/oy1rmnta32bzz683frgemz4j2xw60nky) by completing a time off request in [GMS \(https://gms.georgetown.edu/\)](https://gms.georgetown.edu/) through the Request Donated PTO time off plan.

When does the COVID-19 vaccine requirement for students take effect?

Students need to submit documentation showing that they are fully vaccinated through the GU360 mobile app or [GU360 website \(https://gu360.georgetown.edu/s/\)](https://gu360.georgetown.edu/s/) by August 1, 2021. Students enrolled in online programs that do not have any on-campus components are exempt from this requirement.

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COVID-19 FAQs - Georgetown University

Individuals who have received a COVID-19 vaccine that is not currently authorized by the FDA or the WHO will need to be re-vaccinated with a FDA-authorized vaccine upon arrival on campus. Please email covidcarenavigator@georgetown.edu (<https://www.georgetown.edu>) scheduling an appointment and receiving a deadline extension, and submit proof of your prior vaccination (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>) through the GU360 mobile app or GU360 website (<https://gu360.georgetown.edu/s/>).

Individuals who will not be fully vaccinated when they arrive on campus for the Fall 2021 semester because COVID-19 vaccines are not available or widely accessible in their home country, or to their age group, will need to be vaccinated with a FDA-authorized vaccine upon arrival on campus. Please email covidcarenavigator@georgetown.edu for guidance on scheduling an appointment and receiving a deadline extension.

Individuals who are being re-vaccinated, are in between doses, have received two doses but two weeks have not passed since their final dose or are being vaccinated for the first time on campus will need to request a deadline extension, and they must email covidcarenavigator@georgetown.edu to coordinate their vaccination plan.

Individuals who receive a deadline extension will be able to participate in in-person activities and classes on campus while they are receiving their vaccination, but they will need to wear a mask at all times (indoors and outdoors, except in very limited circumstances such as when eating, or in their personal residence or a private office with a closed door) and participate in enhanced testing protocols until they have submitted documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>) showing they are fully vaccinated.

When does the COVID-19 vaccine requirement for employees take effect?

All employees need to submit proof of vaccination, through GU360 as described below, by August 9, 2021. If you need to request a medical or religious exemption, please follow the process described below. If you do not need to request a medical or religious exemption but extenuating circumstances will prevent you from being fully vaccinated by August 9, 2021, please contact the Public Health team at covidcarenavigator@georgetown.edu to coordinate your vaccination plan and request a deadline extension. While you complete the vaccination process, you will need to wear a mask at all times while on campus (indoors and outdoors) and participate in an enhanced testing protocol until you have submitted documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/#>) showing that you are fully vaccinated.

Which COVID-19 vaccines will meet Georgetown's COVID-19 vaccine requirement?

Georgetown will accept vaccines either authorized for emergency use or granted approval by the U.S. Food and Drug Administration (<https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines>), (FDA) or the World Health Organization ([https://www.who.int/news-room/q-a-detail/coronavirus-disease-\(covid-19\)-vaccines](https://www.who.int/news-room/q-a-detail/coronavirus-disease-(covid-19)-vaccines)), (WHO). As of June 17, 2021, this combined list includes Pfizer-BioNTech, Moderna, Johnson & Johnson (Janssen), AstraZeneca, COVISHIELD, Sinopharm and Sinovac. The FDA and WHO may authorize additional vaccines in the coming weeks and months.

How do I provide documentation of my vaccination?

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COVID-19 FAQs - Georgetown University

All members of our community should submit documentation of their COVID-19 vaccination (e.g., CDC COVID-19 Vaccination Record Card) through the GU360 mobile app or GU360 website (<http://gu360.georgetown.edu/>). Please follow these instructions to submit your documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>). If you have already shared it with the Care Navigator team, you do not need to submit it again through GU360.

Will Georgetown host vaccination clinics for students, faculty and staff?

Georgetown University is now able to vaccinate students, faculty and staff on campus, at no cost to community members. Vaccines will be available by appointment only on a rolling basis.

If you are interested in getting vaccinated on campus, sign up for a vaccination appointment (https://docs.google.com/forms/d/e/1FAIpQLSc3ZaeIYix7D4Xf7DqYxVQ9mqGzpjB_3z7FtKgGVPZAKDHpWg/viewform).

We are deeply grateful to our partners at the DC Department of Health for enabling us to offer this opportunity to our community.

How do I request a medical or religious exemption?

Requests for a medical or religious exemption from the COVID-19 vaccination requirement must be submitted by Monday, July 19, 2021, for students, and Monday, July 26, 2021, for employees. Additional requests will be considered on a rolling basis after these dates. However, all students and employees are encouraged to submit any exemption requests as soon as possible.

Students may request a medical or religious exemption from the COVID-19 vaccination requirement by completing the exemption request form (<https://georgetown.studenthealthportal.com/>), and submitting the information required. The student will need to log in using their netID and password and navigate to the My Forms section and complete the COVID-19 Vaccine Documentation electronic form. They will need to indicate religious or medical exemption and upload supporting documentation within the form.

Faculty and staff may request a medical exemption to the COVID-19 vaccination requirement by completing the Disability Accommodation Request for Employees form (<https://docs.google.com/forms/d/e/1FAIpQLSdROftX4EI9xF40rUg4-mFbRALklqxbaqM-554aKh-VAqsGNg/viewform>) and submitting the information required.

Faculty and staff may request a religious exemption by completing the Religious Accommodation form (https://docs.google.com/forms/d/e/1FAIpQLSfK1Th6k0XoA_OIO91aI2gROP5SxC31PgxafgNYJ-NhbZ_71w/viewform).

Please visit the Office of Institutional Diversity, Equity and Affirmative Action website (<https://ideaa.georgetown.edu/ada/>), for more information about requesting accommodations.

If a medical or religious waiver is granted, the student or employee will receive an individualized accommodation with information on the public health measures that they will need to take, which will include following the University's COVID-19 Testing Protocol (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>) and COVID-19 Mask Guidelines (<https://georgetown.app.box.com/s/ohbuff9qrjpo6etuqtesx1nzuf1ynjgjd>) for unvaccinated individuals.

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COVID-19 FAQs - Georgetown University

Will students or employees who are exempt from the COVID-19 vaccine requirement be able to return to campus?

(<https://www.georgetown.edu>)
Yes. If a medical or religious waiver is granted, the student or employee will receive an individualized accommodation with information on the public health measures that they will need to take, which will include following the University's [COVID-19 Testing Protocol](https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/) (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>) and [COVID-19 Mask Guidelines](https://georgetown.app.box.com/s/ohbuff9qrj06etuqtex1nzuf1ynjgjd) (<https://georgetown.app.box.com/s/ohbuff9qrj06etuqtex1nzuf1ynjgjd>) for unvaccinated individuals.

I have been vaccinated but I have a compromised immune system and may not be fully protected. What should I do?

If you believe you are immune-compromised please consult your physician and take additional precautions such as mask wearing and physical distancing even in situations where these are not required.

If you are a student and think you require accommodations, please consult your campus disability services office ([Academic Resource Center](https://academicsupport.georgetown.edu/academic-support/academic-accommodations-students/) (<https://academicsupport.georgetown.edu/academic-support/academic-accommodations-students/>), for the Main Campus, or [Office of Disability Services](https://www.law.georgetown.edu/your-life-career/campus-services/office-of-disability-services/) (<https://www.law.georgetown.edu/your-life-career/campus-services/office-of-disability-services/>), for the Law Center). If you are a faculty or staff member, please consult the [Office of Institutional Diversity, Equity and Affirmative Action](https://ideaa.georgetown.edu/ada/) (<https://ideaa.georgetown.edu/ada/>).

What if I am designated as a telework employee for the Fall 2021 semester?

Vaccination is required for everyone who returns to campus, in any capacity, this fall. An employee's work mode has been determined based on the nature of their position, rather than vaccination status. If an employee's mode of work has been designated as fully telework, and they do not anticipate regularly accessing campus or participating in any in-person University-related activity, they do not need to be vaccinated, but we strongly encourage all members of our community to get vaccinated to protect themselves and others. If a fully-telework employee needs to visit campus this fall, they will need to follow all visitor protocols in place at the time.

What if I do not get vaccinated?

As required by law, we will ensure that there is a process for those who may wish to pursue medical or religious exemptions to this requirement. Individuals who are granted accommodations will be required to comply with appropriate workplace restrictions, including the wearing of masks, social distancing indoors and participating in frequent COVID-19 testing.

For employees who remain unvaccinated and do not qualify for an accommodation, on a case-by-case basis, the University may offer reassignment to an alternative position or the employee may take a period of unpaid leave or use accrued paid time off.

What if I need to take time off to get vaccinated or recover from any side effects?

Staff may use [COVID-19 PTO](https://georgetown.app.box.com/s/s3zg9h1yom8i3c9etz54irxecr2zp1zp) (<https://georgetown.app.box.com/s/s3zg9h1yom8i3c9etz54irxecr2zp1zp>) for their vaccination appointment and to recover from any short-term side effects of the vaccine. If a staff member has already used all of their COVID-19 PTO, they may [request to use donated PTO](https://georgetown.app.box.com/s/oy1rmnta32bzz683frgemz4j2xw60nky) (<https://georgetown.app.box.com/s/oy1rmnta32bzz683frgemz4j2xw60nky>) by completing a time off request in [GMS](https://gms.georgetown.edu/) (<https://gms.georgetown.edu/>) through the Request Donated PTO time off plan.

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COVID-19 FAQs - Georgetown University

I am a student in an online program that includes no on-campus presence. Do I need to be vaccinated?

(<https://www.georgetown.edu>)
No. If you are a student in an online course or program that does not require on-campus presence, you do not need to be vaccinated, but we strongly encourage you to get vaccinated to protect yourself and others.

I am a student in a hybrid online/on-campus program. Do I need to be vaccinated?

Yes. If you are a student in a course or program that requires on-campus presence, you will need to be fully vaccinated and submit documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>), of your COVID-19 vaccination.

I am a visiting student attending Georgetown University through the Consortium of Universities in the Washington Metropolitan Area. Do I need to be vaccinated?

Yes. If you are a student enrolled in a course or program at Georgetown that requires on-campus presence, you will need to be fully vaccinated prior to the Fall 2021 semester and submit documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>), of your COVID-19 vaccination.

I am fully vaccinated. Will I need to continue wearing a mask, participating in the Georgetown COVID-19 testing program, and completing the COVID-19 Daily Check-In?

Yes. Individuals, regardless of vaccination status, will wear a mask indoors on campus, except when eating or drinking, when alone in a private office, when in your personal residence, or when, if a faculty member who is fully vaccinated, you are lecturing in a classroom setting. We expect to ease the indoor mask requirement if public health conditions remain favorable.

All University community members, regardless of vaccination status, will need to take an arrival test (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>), prior to resuming work or study on campus in order to establish a baseline understanding of public health conditions at the beginning of the Fall semester. Fully vaccinated individuals will not be required to participate in routine asymptomatic testing after they complete their arrival test.

In order for Georgetown to effectively monitor public health conditions on campus, individuals who are not fully vaccinated will need to complete the COVID-19 Daily Check-In survey, (<https://uis.georgetown.edu/coronavirus/checkin/>) through the GU360 app or GU360 website (<https://gu360.georgetown.edu/s/>), one to two hours before they arrive each day that they come to campus. GOCard access will be linked to regular completion of the COVID-19 Daily Check-In survey, at least through the beginning of the Fall semester. If you have not completed a COVID-19 Daily Check-In survey in the previous 24 hours, your GOCard will temporarily be deactivated until you complete a new survey. Please allow one to two hours for your GOCard to be reactivated.

Fully vaccinated individuals are expected to complete the COVID-19 Daily Check-In survey any time that they experience symptoms consistent with COVID-19 (<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>), or are exposed to someone infected with COVID-19.

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COVID-19 FAQs - Georgetown University

Georgetown will use information from this survey to provide health guidance and quarantine information to anyone with symptoms or who may have had an exposure to COVID-19. Community members are expected to stay home or in their on-campus residence if they have any symptoms. If you have any symptoms, contact the Student Health Center (<https://studenthealth.georgetown.edu/medical-care/>), (if a student) or their physician, schedule a COVID-19 test, and self-isolate until cleared by their physician or after a consultation with the Care Navigator team.

I have been vaccinated and recently been exposed to somebody who tested positive.

Do I still need to quarantine?

According to CDC guidelines (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>), fully vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine (<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>), unless they show symptoms of COVID-19. Individuals are considered fully vaccinated 14 days after they receive their final vaccine dose.

Persons who do not meet all of the above criteria should continue to follow current quarantine guidance (<https://www.georgetown.edu/coronavirus/quarantine-and-isolation/#quarantine>).

I already had COVID-19. Should I still receive the vaccine?

Yes. The CDC recommends getting vaccinated even if you have been sick with COVID-19 or infected with the SARS-CoV-2 virus. While you will probably have some natural immunity, it is unclear how long it may last. Therefore, you can get vaccinated as soon as you finish isolation (generally 10 days after being infected).

I live outside the United States and have received a COVID-19 vaccine that is not authorized by the FDA or WHO. What should I do? Will I need to be re-vaccinated?

If you have received a COVID-19 vaccine that is not currently authorized by the FDA or the WHO, you will receive a deadline extension and will need to be re-vaccinated with an FDA-authorized vaccine upon arrival on campus. Please email covidcarenavigator@georgetown.edu for guidance on scheduling an appointment and receiving a deadline extension, and submit proof of your prior vaccination (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>), through the GU360 mobile app or GU360 website (<https://gu360.georgetown.edu/s/>).

You will be able to participate in in-person activities and classes on campus while you are receiving your vaccination, but you will need to wear a mask at all times (indoors and outdoors, except in very limited circumstances such as when eating or in your personal residence or a private office with a closed door) and participate in enhanced testing protocols until you have submitted documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/#>), showing that you are fully vaccinated.

I won't be fully vaccinated when I arrive on campus for the Fall 2021 semester because COVID-19 vaccines are not available or widely available in my country, or to my age group. Will I have to study remotely and be unable to participate in campus activities until I am fully vaccinated?

7/27/2021

COVID-19 FAQs - Georgetown University

Please email covidcarenavigator@georgetown.edu for guidance on scheduling an appointment and receiving a deadline extension. You will be able to participate in in-person activities and classes while you are receiving your vaccination, but you will need to ~~(<https://www.cdc.gov/media/releases/2021/s0810-covid19-mask-guidance.html>)~~ wear a mask at all times indoors and outdoors, except in very limited circumstances such as when eating or in your personal residence or a private office with a closed door) and participate in enhanced testing protocols until you have submitted documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/#>), showing that you are fully vaccinated.

I am an international student and my country allows for the mixing of two COVID-19 vaccines (e.g., AstraZeneca and Pfizer). Will I be considered “fully vaccinated”?

Yes. As long as you submit documentation (<https://uis.georgetown.edu/coronavirus-instructions-for-uploading-your-vaccination-documentation/>) of having received two different WHO or FDA-approved vaccines within the right interval, you will be considered fully vaccinated.

I am only able to receive one dose of a WHO-approved vaccine in my country? Should I wait to get the vaccine in the US?

Please get whichever vaccine is available to you at your earliest opportunity, so you at least have some protection. Please contact chiefpublichealthofficer@georgetown.edu to review your individual situation and decide on a course of action once you arrive in the U.S.

I had COVID-19 and received only one dose of a two-dose vaccine because my doctor said that was enough. Will I be considered fully vaccinated?

This practice is not consistent with CDC guidelines, which recommend that everyone, regardless of prior infection status, receive the full 2-doses of a 2-dose vaccine or one dose of the J&J vaccine. If you are seeking an exemption from the requirement that you receive the second dose of a 2-dose vaccine, please submit a medical exemption request through Student Health (for students (<https://georgetown.studenthealthportal.com/Forms/ViewForm?patientFormId=49221>)) and IDEAA (for faculty and staff) (<https://docs.google.com/forms/d/e/1FAIpQLSdROftX4EI9xF40rUg4-mFbRA1klqxbqgM-554aKh-VAqsGNg/viewform>).

Individuals who are being re-vaccinated, are in between doses and and planned to obtain a second dose, have received two doses but two weeks have not passed since their final dose, or are being vaccinated for the first time on campus will need to request a deadline extension by emailing covidcarenavigator@georgetown.edu to coordinate their vaccination plan.

I need to receive the COVID-19 vaccine, but I am also due for some other vaccines. Will I be able to receive them at the same time?

Based on CDC guidance, COVID-19 vaccines may be co-administered with other vaccines without regard to timing. This includes simultaneous administration of COVID-19 and other vaccines on the same day, as well as co-administration within 14 days.

Will I know who is and who is not vaccinated?

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COVID-19 FAQs - Georgetown University

No, in order to protect personal privacy, you will not know who has or has not been vaccinated, unless the individual discloses that information to you directly. The vast majority of Georgetown community members on campus this fall will be fully vaccinated, which will provide significant protection to our campus community. In addition, please do not assume that because someone is wearing a mask on campus that they are not fully vaccinated. Individuals may choose to wear a mask when it is not required for various reasons (e.g., they have a compromised immune system, have a family member with a compromised immune system, or have a family member who cannot be vaccinated).

I was vaccinated more than six months ago. Should I get a booster shot?

We will follow guidelines from the Centers for Disease Control and Prevention and the CDC's Advisory Committee on Immunization Practices about boosters. Scientific evidence suggests the duration of immunity conferred by COVID-19 vaccines is long. At this time, booster shots have not been recommended.

How will Georgetown protect my privacy?

Georgetown will continue to comply with all applicable privacy, confidentiality and public health laws relating to collection and maintenance of health-related records. The University recognizes the importance of protecting private health information and will protect faculty, student and staff privacy by limiting what sensitive information is collected, who has access to it, how it is used and how long it is retained to the extent possible while protecting public health.

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Testing

Who is required to be tested for COVID-19?

All University community members, regardless of vaccination status, will need to take an [arrival test](https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/) (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>) prior to resuming work or study on campus in order to establish a baseline understanding of public health conditions at the beginning of the Fall semester. Fully vaccinated individuals will not be required to participate in routine asymptomatic testing after they complete their arrival test. Individuals who are not fully vaccinated will be tested twice per week. Anyone with symptoms consistent with COVID-19 will be expected to get tested prior to resuming campus activities. Georgetown has partnered with One Medical to provide COVID-19 testing at no charge to University community members.

After their arrival test, can fully vaccinated students, faculty, and staff continue to get tested on campus, even though it's not required?

Yes. Fully vaccinated students, faculty, and staff may schedule an on-campus test through the One Medical app at any time during the Fall 2021 semester. We also urge anyone with symptoms, even the most minor ones, to get tested.

How does the COVID-19 testing work?

Please visit Georgetown's [COVID-19 Testing Protocol](https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/) (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>) webpage for more information.

If I get a COVID-19 test through my healthcare provider or at an off-campus testing facility, does that count?

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Yes, you may choose to schedule a PCR test with a third-party healthcare provider, if the testing occurs within the time frame specified in the University's [COVID-19 Testing Protocol](https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/) (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>). Payment for third-party testing is your responsibility.

It is also your responsibility to report your test results to Georgetown in a timely manner. You, or your provider, may send your test results directly to Georgetown's chief public health officer at covid19-test-results@georgetown.edu.

Will students, faculty, and staff be charged for COVID-19 testing?

Georgetown will provide free COVID-19 tests, administered by One Medical, to students, faculty, and staff. Georgetown will not cover testing conducted at other facilities, such as your primary care provider. Family of live-in Georgetown faculty and staff members who reside with them on campus or who live in Georgetown-owned properties are eligible to register with One Medical to receive free testing, but the University cannot offer testing to family members of non-residential faculty and staff.

What is One Medical?

Georgetown has partnered with One Medical, a leading primary care provider network, to provide COVID-19 testing at no charge to our University community members.

Who needs to use the One Medical app?

Students, faculty and staff who will be on any university-owned, managed, or controlled properties must follow Georgetown's [COVID-19 Testing Protocol](https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/) (<https://www.georgetown.edu/coronavirus/georgetown-university-covid-19-testing-protocol/>), including testing scheduled via the One Medical app. Georgetown will email instructions about signing up for the mobile app to students, faculty, and staff who are required to use it.

Why am I being asked for a registration code or to pay a registration fee during One Medical registration?

The University is working with One Medical, a leading primary care provider network, to provide on-campus COVID-19 testing at no charge to eligible community members.

Each Georgetown community member who is eligible for COVID-19 testing through One Medical is pre-approved for their One Medical membership. At the time of registration, One Medical matches your NetID email address to a list of pre-approved community members provided by Georgetown.

If you are prompted to apply a code or pay a registration fee, this is a sign that One Medical has not been able to match you to the list of pre-approved community members for one of the following reasons:

- You are not using your NetID email address. FirstName.LastName@georgetown.edu and personal email addresses are NOT provided to One Medical.
- You are not using the sponsored membership link. You must use a [sponsored membership link](https://app.onemedical.com/registration/enterprise) (<https://app.onemedical.com/registration/enterprise>), so One Medical knows to look for your NetID email address and route you to the Georgetown registration process.
- Your email address will be added to One Medical's pre-approved list in the next one to two days. Georgetown provides a new list of approved community members to One Medical every evening. When you receive approval from Georgetown, either from your manager or as an eligible student who indicates they will come to

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campus in the Summer 2021 Affirmation, you will be added to the list of approved community members provided to One Medical that day. If your approval takes place after that day's data transfer, you will be added to the next day's list and appear the following day (<https://www.georgetown.edu>).

- You are not eligible to register for One Medical membership. Only approved faculty and staff, on-campus residents, students living in the Neighborhoods of Georgetown, Burlingame and Foxhall and some undergraduate, graduate and professional students are eligible for free One Medical memberships. If you are still unable to register for One Medical for free after trying these trouble-shooting steps above, then check again with your manager or program director/advising dean to confirm your on-campus and/or One Medical membership eligibility, even if you have received an email from the University concerning your One Medical eligibility.

If you confirm you are eligible for a free One Medical membership but you continue to run into registration issues, please contact One Medical at 1-888-ONEMED1 (1-888-663-6331) or hello@onemedical.com (<mailto:hello@onemedical.com>).

How do I register for a One Medical account?

Using the browser on your computer or mobile phone, you can follow the direct link provided by Georgetown to the registration page for One Medical. You will then enter your NetID Georgetown email address and follow the prompts to complete the registration process. Please note that, if you use a browser to register, One Medical will use cookies and other tracking technologies, as described in the One Medical [Privacy Policy](#). (<https://www.onemedical.com/privacy/#cookies-and-other-tracking-technologies>).

More detailed instructions are available for [browser-based registration](#) (<https://uis.georgetown.edu/coronavirus/register-computer/#>).

How do I get the One Medical app?

You can download the free One Medical app by going to either the Apple App Store (iOS) or Google Play (Android).

Will One Medical share my COVID-19 test results with Georgetown?

When you register as a One Medical member, you will need to submit a [consent form](#) (<https://app.onemedical.com/health-information-release/employer-release?>) authorizing One Medical to release COVID-19 test results to Georgetown. Please indicate that "Georgetown University" is the party to receive the information covered under the authorization.

What does One Medical do with my COVID-19 test results?

Once you submit the consent form, your COVID-19 test results and testing administration information (e.g., dates of testing) will only be shared between One Medical and Georgetown, as authorized by you. Your individual information may also be shared by One Medical or Georgetown with testing laboratories, as necessary to perform COVID-19 testing, and with health authorities, as required by law.

Georgetown will continue to comply with all applicable privacy, confidentiality, and public health laws relating to collection and maintenance of testing and other health-related records. The University recognizes the importance of protecting private health information and will protect faculty, student, and staff privacy by limiting what sensitive information is collected, who has access to it, how it is used, and how long it is retained to the extent possible while protecting public health.

EXHIBIT 9



Explore More



[News\(https://www.harvard.edu/president/category/news/\)](https://www.harvard.edu/president/category/news/)

COVID-19 Updates

Dear Members of the Harvard Community,

Last week Governor Baker announced that he will lift all remaining COVID-19 restrictions in Massachusetts effective May 29. This welcome news reflects an improving public health situation that permits the state to ease restrictions and enable communities to reopen more fully. For the Harvard community, this represents another step forward in safely resuming more on-campus academic and work activities.

With this timeline now established, we are assessing Harvard's guidelines and protocols. We write today to update you on summer operations and activities, as well as planning for the fall semester.

Changes to Health and Safety Guidelines and Protocols

The following guidelines reflect information available now. As we obtain data indicating higher levels of COVID vaccination within the Harvard community, we expect to be able to resume additional activities. Restrictions may be relaxed earlier in some settings and Schools that have demonstrated higher vaccination rates.

Crimson Clear: Beginning May 29, we will no longer require daily Crimson Clear attestation for everyone coming to campus. However, you should complete **Crimson Clear (<http://crimsonclear.harvard.edu/>)** if you are concerned that you have been exposed to the coronavirus, have tested positive for the coronavirus, or are experiencing symptoms. Harvard University Health Services (HUHS) will then contact you to provide guidance and support. You may need to use Crimson Clear if you work in a setting that specifically requires it (e.g., a hospital-based research lab). Please note that the Massachusetts Department of Public Health still requires persons working in a healthcare setting to complete self-attestation every day they are on-site.

Masks and Face Coverings: Outdoors, fully vaccinated persons are no longer required to use masks, regardless of distancing. For unvaccinated persons, outdoor use of masks is only required if they cannot maintain distance from others.

Harvard will continue to require masks indoors, regardless of vaccination status, until we can determine the level of COVID vaccination across our community. With confirmation of high vaccination levels, we expect to issue revised indoor mask-wearing policies. Meanwhile, all community members should carry a mask when coming to campus in the event it becomes necessary to wear it. Individuals may also choose to wear masks in settings where masks are not required.

Physical Distancing: With exceptions as noted below, physical distancing is required inside Harvard buildings for the time being. This policy is subject to revision when we receive confirmation of higher vaccination levels. As noted above, fully vaccinated persons are no longer required to maintain distancing outdoors, but unvaccinated persons should maintain distancing if unmasked. Details regarding indoor and outdoor gathering sizes are being reviewed and will be announced soon.

COVID-19 Testing Requirements: Beginning May 29, the frequency of testing for anyone residing in undergraduate on-campus housing will be reduced from three times per week to twice per week (on nonconsecutive days). All others who are authorized to come to campus for work or academic activities will be required to submit a test once per week.

Labs and Healthcare Facilities: Research laboratories were among the first spaces reopened on campus and by design are highly controlled settings. Some restrictions that have been in place there, such as physical distancing, can be safely lifted. Harvard-operated healthcare settings continue to be governed by restrictions from the Massachusetts Department of Public Health, but some restrictions will also be loosened. Details are being communicated directly to the laboratory and healthcare communities.

For more updates and information, please see the latest interview with the leadership of HUHS and Environmental Health and Safety in the [Harvard Gazette \(https://urldefense.proofpoint.com/v2/url?u=http-3A_hvd.gs_327470&d=DwMFaQ&c=WO-RGvefibhHBZq3fl85hQ&r=DySY961_Q2e96dFIOZrScP51jxJ05CiJWVhA5YLd-Qo&m=2CH17n-RjLAK_Eq3hrPm1gzWFslxp01b8_aD_E47q70&s=CDQEXYLEoboVI2pt6zzmU67KJpX1cDzFn3jhOeo4mbli\)](https://urldefense.proofpoint.com/v2/url?u=http-3A_hvd.gs_327470&d=DwMFaQ&c=WO-RGvefibhHBZq3fl85hQ&r=DySY961_Q2e96dFIOZrScP51jxJ05CiJWVhA5YLd-Qo&m=2CH17n-RjLAK_Eq3hrPm1gzWFslxp01b8_aD_E47q70&s=CDQEXYLEoboVI2pt6zzmU67KJpX1cDzFn3jhOeo4mbli)

Vaccination Requirements

As previously announced, Harvard will require COVID vaccination for all students who will be on campus this fall. As we work to reach the high levels of vaccination needed to protect our community, we are now extending that **vaccination requirement to all Harvard community members, including faculty, staff, and researchers**, who will have any on-campus

presence. Exceptions will be provided for medical or religious reasons. Note that unvaccinated individuals may be subject to additional public health measures (e.g., masking, testing) above and beyond what is required of vaccinated individuals. Updates and information regarding the University's vaccine requirement can be found at the University's [vaccine webpage \(http://www.harvard.edu/coronavirus/covid-19-vaccine-information/\)](http://www.harvard.edu/coronavirus/covid-19-vaccine-information/), and additional details will be added when available.

Community members are advised to complete their vaccination as soon as possible and **submit verification of vaccination to HUHS by July 15. Any community member who is already vaccinated and has not yet submitted verification of vaccination to HUHS should submit this information immediately because these data will inform additional policy decisions.** You can submit a copy of your vaccination card via email to [mrecords@huhs.harvard.edu \(mailto:mrecords@huhs.harvard.edu\)](mailto:mrecords@huhs.harvard.edu) or use one of the encrypted options described on the University's [Verify Your Vaccine \(http://www.harvard.edu/coronavirus/verify-your-vaccination/\)](http://www.harvard.edu/coronavirus/verify-your-vaccination/) webpage. Persons who have been vaccinated by HUHS do not need to submit such documentation, which is already on file there. HUHS keeps individual medical information secure and confidential.

Harvard Vaccine Clinics

HUHS will hold a COVID vaccine clinic on June 2 at the [Murr Center \(http://huhs.harvard.edu/sites/default/files/Directions_Murr_Center_Vaccination_Site.pdf\)](http://huhs.harvard.edu/sites/default/files/Directions_Murr_Center_Vaccination_Site.pdf) and then weekly at HUHS (75 Mount Auburn Street, Cambridge) throughout June and July. More dates will be added for August. Vaccine appointments are open to all students, staff, faculty, researchers, and HUHS patients and can be scheduled through the [HUHS patient portal \(http://patient.uhs.harvard.edu/login_dualauthentication.aspx\)](http://patient.uhs.harvard.edu/login_dualauthentication.aspx) with your HarvardKey. More information, including [scheduling instructions \(http://huhs.harvard.edu/sites/default/files/Instructions_COVID_Vaccine_Appointment.pdf\)](http://huhs.harvard.edu/sites/default/files/Instructions_COVID_Vaccine_Appointment.pdf), clinic dates and times, and FAQs, can be found on the [HUHS vaccine webpage \(http://huhs.harvard.edu/covid-vaccine-info\)](http://huhs.harvard.edu/covid-vaccine-info).

Planning for the Fall Semester

Our planning for the fall semester is ongoing. We are eager for the return to more robust on-campus activities, but we also realize that many questions remain regarding what we should expect when we come back to our classrooms, residential facilities, and workplaces. With that in mind, we will continue to assess and update our guidance over the course of the summer and to share updates with the community, including through the [University's Coronavirus webpage \(http://www.harvard.edu/coronavirus/\)](http://www.harvard.edu/coronavirus/).

The resilience of our community over these past 15 months has been extraordinary. You have adapted to a seemingly endless set of challenges and continued to find ways to fulfill our academic and research mission. Thank you again for all that you have done and continue to do as we take steps to expand activities on campus this summer and look to the full return of our

students in the fall.

Sincerely,

Lawrence S. Bacow
President

Alan M. Garber
Provost

Katie Lapp
Executive Vice President

Giang T. Nguyen
Executive Director, Harvard University Health Services

Published on May 28, 2021

[https://www.harvard.edu/president/news/2021/covid-19-updates](#)

[in](#) (<http://www.linkedin.com/shareArticle?mini=true&url=https%3A%2F%2Fwww.harvard.edu%2Fpresident%2Fnews%2F2021%2Fcovid-19-update-5-28-21%2F&title=COVID-19+Updates>)

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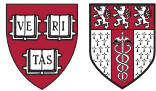
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HARVARD UNIVERSITY
Health Services

COVID-19 Vaccine Requirement FAQs

As previously announced, Harvard will require COVID vaccination for all students who will be on campus this fall. As we work to reach the high levels of vaccination needed to protect our community, Harvard has now extended that **vaccination requirement to all Harvard community members, including faculty, staff, and researchers**, who will have any on-campus presence. Read the [full message \(5/28/21\)](#) on the updated vaccine requirement and find more information in the COVID-19 Vaccine Requirement Frequently Asked Questions below.

Please visit the [HUHS Vaccine Information webpage](#) and the [University Coronavirus website](#) for more information on vaccines and vaccine availability.

COVID-19 Vaccine Requirement FAQs

— WHY IS HARVARD REQUIRING VACCINATION FOR ALL HARVARD COMMUNITY MEMBERS, INCLUDING STUDENTS, FACULTY, STAFF, AND RESEARCHERS?

A high vaccination rate across the Harvard community is a critical aspect of our anticipated return to full on-campus activity in the fall, public health conditions permitting. To reach the high levels of vaccination needed to protect our community, Harvard is requiring COVID-19 vaccination for all Harvard community members, including students, faculty, staff, and researchers, who will have any on-campus presence. Exceptions will be provided only for medical or religious reasons. Note that unvaccinated individuals may be subject to additional public health measures (e.g., masking, testing) above and beyond what is required of vaccinated individuals. Updates and information regarding the University's vaccine requirement can be found on the [University's vaccine webpage \(https://www.harvard.edu/coronavirus/covid-19-vaccine-information/\)](https://www.harvard.edu/coronavirus/covid-19-vaccine-information/), and additional details will be added when available.

Community members are advised to complete their vaccination as soon as possible and **submit verification of vaccination to HUHS by July 15. Any community member who is already vaccinated and has not yet submitted verification of vaccination to HUHS should submit this information immediately because these data will inform**

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COVID-19 Vaccine Requirement FAQs | Harvard University Health Services

additional policy decisions. You can submit a copy of your vaccination card via the **HUHS Patient Portal** (https://patient.uhs.harvard.edu/login_dualauthentication.aspx). Instructions to submit your record can be found on the University's **Verify Your Vaccine** (<https://www.harvard.edu/coronavirus/verify-your-vaccination/>) webpage. Persons who have been vaccinated by HUHS do not need to submit such documentation, which is already on file there. HUHS keeps individual information secure and confidential.

Students should plan to be fully vaccinated before returning to campus for the fall semester, meaning that at least two weeks have passed since the final dose of an FDA-authorized or approved vaccine (currently Pfizer, Moderna, or Johnson & Johnson) or **vaccines that have been authorized for emergency use** ([https://www.who.int/news-room/q-a-detail/coronavirus-disease-\(covid-19\)-vaccines](https://www.who.int/news-room/q-a-detail/coronavirus-disease-(covid-19)-vaccines)) by the World Health Organization (e.g., AstraZeneca/Oxford). You can read more about the requirement and how to submit documentation on the **Harvard University Health Services (HUHS) website** (</med-recs-immunizations/immunizations-0>).

+ WHAT VACCINES WILL HARVARD ACCEPT?

+ I RECEIVED A COVID-19 VACCINE IN ANOTHER COUNTRY (NOT ONE OF THE APPROVED IN THE U.S. OR BY THE WHO) AND WILL BE COMING TO HARVARD. SHOULD I BE RE-VACCINATED WHEN I GET TO THE U.S.?

+ I WAS UNABLE TO GET VACCINATED AT HOME BEFORE TRAVELING TO CAMPUS. CAN I BE VACCINATED WHEN I ARRIVE AT HARVARD?

+ I RECEIVED ONE DOSE OF A TWO-DOSE VACCINE IN ANOTHER COUNTRY. CAN I GET THE SECOND DOSE AT HARVARD?

+ IF I HAVE NOT BEEN VACCINATED, WHERE CAN I GET INFORMATION ON VACCINE SOURCES AVAILABLE TO ME?

+ WHAT ABOUT INTERNATIONAL STUDENTS WHO MAY HAVE TROUBLE ACCESSING VACCINE BEFORE THEY TRAVEL TO CAMPUS?

+ WILL THERE BE MORE GUIDANCE COMING FOR INTERNATIONAL STUDENTS? FOR INSTANCE, IF THEY CAN'T GET VACCINATED BEFORE THEY TRAVEL AND WILL NEED IT WHEN THEY ARRIVE, SHOULD THEY JUST BE IN TOUCH WITH HUHS DIRECTLY? DO THEY HAVE TO ADVISE THEIR SCHOOL? HIO?

+ HOW WILL HARVARD VERIFY IF A COMMUNITY MEMBER IS VACCINATED?

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+ DOES THE MANDATE APPLY TO ALL LEARNERS, INCLUDING EXECUTIVE EDUCATION, CONTINUING EDUCATION, ETC., WHO WILL BE ON CAMPUS, OR JUST TO ENROLLED STUDENTS?

- DOES THE VACCINE REQUIREMENT APPLY ONLY TO RESIDENTIAL STUDENTS OR UNDERGRADUATE STUDENTS OR ALL HARVARD STUDENTS?

The vaccination requirement announced on 5/5/21 applies to all enrolled students at any Harvard University school, regardless of graduate level or status (i.e., full- and part-time) if there is any component of their study that involves being on campus. **The [updated requirement announced on 5/28/21](https://www.harvard.edu/president/news/2021/covid-19-update-5-28-21/) (<https://www.harvard.edu/president/news/2021/covid-19-update-5-28-21/>) includes all Harvard community members, including all enrolled students at any of Harvard's Schools, faculty, staff, and researchers, who will have any on-campus presence.**

+ WILL THE UNIVERSITY ACCEPT VACCINES GIVEN IN RUSSIA OR CHINA?

+ IF I WANT TO ASK FOR AN EXCEPTION TO THIS REQUIREMENT FOR RELIGIOUS OR OTHER REASONS, HOW DO I MAKE THAT EXCEPTION REQUEST?

+ WHAT ARE THE CONSEQUENCES IF I CHOOSE NOT TO GET VACCINATED?

- AM I REQUIRED TO GET VACCINATED IF I'VE HAD COVID-19?

Yes. Harvard University requires all faculty, staff, and researchers to be vaccinated, including those who have previously tested positive for COVID-19.

+ WILL NEWLY HIRED FACULTY, STAFF, AND RESEARCHERS HIRED AFTER THE VACCINATION SUBMISSION DEADLINE HAVE TO COMPLETE THE VACCINE ATTESTATION?

+ WHEN WILL FACULTY AND STAFF WHO ARE RETURNING FROM AN APPROVED LEAVE (SABBATICAL, RESEARCH, MEDICAL, FAMILY) BE REQUIRED TO COMPLETE THE VACCINE ATTESTATION?

+ IS THERE ANY CHARGE TO GET VACCINATED?

+ DO I NEED TO REMAIN IN THE ASYMPTOMATIC TESTING PROGRAM IF VACCINATED?

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+ DO I NEED TO QUARANTINE AS A CLOSE CONTACT IF I HAVE BEEN VACCINATED?

+ I HAVE QUESTIONS ABOUT MY SPECIFIC SITUATION. WHO SHOULD I CONTACT TO DISCUSS THIS?

EXHIBIT 10

7/27/2021

Important Message from the President Regarding COVID-19 Vaccination Requirements for the Fall 2021 Semester

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Dear Morehouse College Community:

As we look forward to welcoming the men of Morehouse back to campus this fall, the health and safety of our campus community remains our first priority. Each of us must do our part to keep ourselves and each other safe from the COVID-19 virus, and that individual responsibility includes a mandatory requirement that all faculty, staff, and students receive an approved vaccine. Except for limited accommodations made for health and religious reasons, everyone must be fully vaccinated by the start of the fall semester. Before you arrive on campus this fall, two or more weeks must have passed since receipt of the second dose in a two-dose series or since receipt of a single-dose vaccine.

This decision has been made in concert with the other Atlanta University Center Consortium institutions and the AUC Robert W. Woodruff Library, which will each mandate similar requirements. It is informed by science-based [guidance](#) from the Centers for Disease Control and Prevention (CDC) encouraging vaccination as the best way to protect yourself and others from contracting and spreading COVID-19 and its variants, with benefits including:

- Getting a COVID-19 vaccine will help prevent serious illness even for those who contract the virus.
- Individuals getting vaccinated may also protect others, particularly people at increased risk for severe illness, including older adults, those who are pregnant, and those with medical conditions.

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Important Message from the President Regarding COVID-19 Vaccination Requirements for the Fall 2021 Semester

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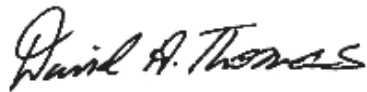
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AUCC Joint Letter

We encourage you to get vaccinated as soon as possible using your local resources. In addition, vaccinations will be available through the AUCC Student Health and Wellness Center and on campus. This is the surest and most expeditious way for us to get back to our in-person intellectual discourse, vibrant residential student life, and most engaging traditions.

I continue to thank you for your conscientiousness and the thoughtfulness you have shown in protecting yourself and those you care about, including others in the Morehouse family. If we each continue to do our part, we will all see each other in person again very soon.

Sincerely,



David A. Thomas, Ph.D.
President

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Vaccination Requirement FAQs : Morehouse College



(/)

COVID-19

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VACCINATION REQUIREMENTS FAQs

- General Questions
- Student Questions
- Employee Questions

GENERAL QUESTIONS

Do Morehouse students, faculty, and staff have to be vaccinated against COVID-19?

- Yes. Morehouse College requires all faculty, staff, new students, and returning students to be fully vaccinated before arriving on campus in the fall.

Our requirement mirrors policies at all Atlanta University Center Consortium institutions— Morehouse, Clark Atlanta University, Morehouse School of Medicine, and Spelman College, as well as the AUC Robert W. Woodruff Library — all of which are requiring vaccination. The vaccination requirement is also being implemented at many other institutions as a best practice protocol to protect the health of their campus communities, including Emory University, Rutgers University, Duke University, Yale University, Columbia University, Brown University, Cornell University, Georgetown University, American University and more.

Why do I need to be vaccinated?

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Vaccination Requirement FAQs : Morehouse College



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- Morehouse is committed to fostering a safe campus living and learning environment where the spread of COVID-19 is mitigated to the fullest extent possible. We do not want you to be sick with COVID-19 or make others sick. The Centers for Disease Control and Prevention (CDC) encourages vaccination (<https://www.cdc.gov/vaccines/covid-19/vaccinate-with-confidence.html>) as the best way to protect yourself and others from contracting and spreading COVID-19 and its variants, with benefits including:
 - Getting a COVID-19 vaccine will help prevent serious illness even for those who contract the virus.
 - Individuals getting vaccinated may also protect others, particularly people at increased risk for severe illness, including older adults, those who are pregnant, and those with medical conditions.

What does “fully vaccinated” mean?

- Before you arrive on campus this fall, two or more weeks must have passed since receipt of the second dose in a two-dose series (such as the Pfizer-BioNTech or Moderna vaccines) or since receipt of a single-dose vaccine (such as the Johnson and Johnson vaccine).

Note that if you receive a two-dose vaccine, such as Pfizer BioNTech or Moderna, you will generally have to wait between three weeks and four weeks for your second shot. You cannot come to campus if you have only had your first shot of a two-dose vaccine. In this case, you may want to make sure you receive your first shot of a two-dose vaccine at least six weeks before you plan to arrive on campus.

Which vaccines qualify?

- You must have received a vaccine authorized and recommended by the Centers for Disease Control and Prevention (CDC) and the Federal Drug Administration (FDA) to prevent COVID-19.

Currently, authorized vaccines are:

- Pfizer-BioNTech
- Moderna
- Johnson and Johnson/ Janssen

How do I know if I qualify to receive a vaccine?


- All Americans aged 16 and older are currently eligible to receive a vaccine.

Where can I get the vaccine?

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Vaccination Requirement FAQs : Morehouse College



- Check with your state's public health department or local government to find local locations where you can receive the vaccine. Many major pharmacies also administer the vaccine. You can also use online tools like the ones below: 

(/)

- Vaccine Finder (<https://vaccinefinder.org/>)
- Georgia Department of Public Health (<https://dph.georgia.gov/covid-vaccine>)
- CVS (<https://www.cvs.com/immunizations/covid-19-vaccine?icid=cvb-home-hero1-banner-1-coronavirus-vaccine>)
- Publix (<https://www.publix.com/covid-vaccine>)
- Kroger (<https://www.krogerhealth.com/services/covid/vaccinations>)
- Walgreens (https://www.walgreens.com/topic/promotion/covid-vaccine.jsp?ban=covid_vaccine_vanity)
- Walmart (<https://www.walmart.com/cp/1228302>)

Do I have to pay to receive the vaccine?

- No. The vaccine can be obtained through your health care provider or state and federal governments at no cost to you. However, some providers charge a small fee, so check with the vaccine provider you plan to use before you arrive to make sure you have any needed documentation and understand if they are charging any fees. If they are charging and you do not want to pay, contact your local public health department to find a no-cost provider or visit Vaccine Finder (<https://vaccinefinder.org/>).

The vaccines have only been approved for emergency use by the FDA. How do I know that they are safe?

- The Centers for Disease Control and Prevention asserts that vaccines authorized and recommended by the CDC and the FDA are safe and effective (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/safety-of-vaccines.html>).
- Over 189 million doses of the COVID-19 vaccine were administered in the United States from Dec. 14, 2020 through April 12, 2021 under the most intense safety monitoring in U.S. history.
- COVID-19 vaccines were evaluated in tens of thousands of participants in clinical trials. The vaccines met FDA's rigorous scientific standards for safety, effectiveness, and manufacturing quality needed to support emergency use authorization (EUA).
- Short-term side effects have proven to be mild, and long-term side effects are unlikely.
- You can also contact your doctor or medical provider to answer more direct questions about the safety of the vaccines.

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Vaccination Requirement FAQs : Morehouse College



Many Blacks are hesitant about taking a vaccine because of medical history in America, which includes the Tuskegee Experiment and biomedical research using the cells of Henrietta Lacks

(<https://www.hopkinsmedicine.org/henrietalacks/index.html>) without her informed consent. How can I trust the vaccines and the entities that created and authorized them?

- We understand that many Blacks are understandably cautious about biomedical treatments given the dishonesty associated with some research in the past. It is important to note, however, that neither the Tuskegee Experiment syphilis study nor the research using Henrietta Lacks's cells involved actual injection of any disease into the body of a human.

Nevertheless, there is no doubt that public health has historically been influenced by the same systemic racism found elsewhere in American society. That's why respected Black health and science leaders have been highly involved in the development and distribution of the vaccines, including educators and administrators from the Atlanta University Center.

Unlike the Tuskegee Experiment, when Black men were not given treatment that might make them better, the life-saving COVID-19 vaccine is being made available to everyone, including communities of color. We are now in a public health crisis, which has disproportionately impacted communities of color. Thousands of Blacks and other people of color were included in the clinical trials before any vaccines were authorized, and millions have now received the vaccine safely.

Many Black medical and science professionals have been involved in the oversight of the vaccine authorizations, including access to results from clinical trials. Other people of color have been instrumental in the development of the vaccines, such as Dr. Kizzmekia Corbett, a 34-year-old Black doctor who led the team at the National Institutes of Health, which oversaw the development of the Moderna vaccine. The safety and efficacy of these vaccines have been affirmed (<https://blackcoalitionagainstcovid.org/loveletter-read-more/>) by many trusted Black medical leaders who have deep experience in public health in communities of color, including the presidents of Charles R. Drew University of Medicine and Science, the National Black Nurses Association, Meharry Medical College, the National Medical Association, and Morehouse School of Medicine. The National Medical Association, in particular, established a task force that reviewed (<https://www.nmanet.org/news/544970/NMA-COVID-19-Task-Force-on-Vaccines-and-Therapeutics.htm>) the clinical trial data and found that "both the percentage and number of Black people enrolled are sufficient to have confidence in health outcomes of the clinical trials."

I'd rather take the risk, and after all, it's my body. Do I still have to get the vaccine?

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Vaccination Requirement FAQs : Morehouse College



(/)

- Everyone who lives, learns, and works at Morehouse College is part of an interconnected environment. Something that impacts one of us impacts us all, which is why we require many different immunizations and vaccinations for members of the community who have frequent interactions with others.



COVID-19 is a deadly virus that will not eradicate itself overnight. If you do not receive the vaccine and then, in turn, contract the virus, you put anyone who comes into contact with you in danger, including health care workers who might have to treat you if you are sick, students and faculty you may come into contact with you if you are asymptomatic, and employees who might have to help you quarantine or isolate. If you then trigger a need for contact tracing, where others who have come into contact with you must be identified, tested, and quarantined, significant resources must be expended, and numerous lives disrupted. Vaccinated people have a low risk of contracting the virus, but it is still a risk; and even if everyone around you is vaccinated, you may still pass it on to someone who is susceptible to a related illness.

Being vaccinated not only protects you, but it also protects the Morehouse community of which you are an integral part.

My religious beliefs prevent me from taking vaccinations like the ones for COVID-19. Can I be exempt from the mandatory vaccine?

- Requests for exemptions based on religious beliefs will be evaluated on a case-by-case basis, and where a bona fide religious objection is properly demonstrated, an exemption may be granted. If you wish to request a religious exemption, please contact the Morehouse College Office of Human Resources for further guidance. Note that a religious exemption is not the same as a philosophical, moral, or conscientious exemption.

I have a medical condition that makes it risky for me to take the COVID-19 vaccine. Can I be exempt from the mandatory vaccine?

- Like most medical and pharmacological treatments, research indicates that individuals with certain preexisting medical conditions may have an enhanced risk of negative side effects from the COVID-19 vaccine. If you are concerned about the potential negative side effects of taking one of the vaccines, we encourage you to consult your physician for further guidance. Requests for medical exemptions will be evaluated on a case-by-case basis, and where a bona fide medical objection is properly demonstrated, an exemption may be granted. If you wish to request a medical exemption, please contact the Morehouse College Office of Human Resources for further instruction.

If you wish to request a medical exemption, please note that you should not disclose the nature of your medical condition unless explicitly asked to do so. In many cases, documentation from your treating physician certifying their recommendation that you abstain from receiving the vaccine on the basis of a preexisting condition will be sufficient to grant a request for a medical exemption.

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Vaccination Requirement FAQs : Morehouse College



I am pregnant or breastfeeding. Do I still have to receive the vaccine?



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- You should consult your doctor or medical provider for guidance on receiving the vaccine if you are pregnant or breastfeeding. You will need a medical exemption if your medical provider recommends that you not receive the vaccine.

I do not have a religious or medical exemption, would rather not get vaccinated.

How does this impact my role at Morehouse?

- The safety of the community is our top priority, which is why we've mandated the vaccination for all faculty, staff, and students. The only exemptions we will make are religious or medical. Not getting vaccinated could result in the loss of your position or suspension if a special exception is not recognized.

If I lost or did not receive documentation after I received an approved vaccine, what do I do?

- Most states require the provider who administered your shot to provide the state with a record of your vaccination. You can contact your health care provider or the state's health department for assistance obtaining documentation.

If you live in Georgia, for instance, you can request a record of all vaccinations through the Georgia Department of Public Health by submitting a Request for State of Georgia Official Immunization Record. They will send you a record of all of your vaccinations, including COVID-19, within three to five business days.

Learn more from the Georgia Department of Public Health at <https://dph.georgia.gov/immunization-section> (<https://dph.georgia.gov/immunization-section>).

Is it legal for Morehouse to require me to be vaccinated?

- Absolutely—and we do not offer this answer lightly. Morehouse and all Atlanta University Center Consortium institutions received extensive legal guidance on this question prior to announcing the mandatory vaccination policy, and just like any other vaccination requirement, we are permitted to make COVID-19 vaccination mandatory, subject to standard exemptions for medical and religious reasons. The fact that the approved COVID-19 vaccinations were approved via Emergency Use Authorization (rather than the standard FDA approval process) does not preclude us from making the COVID-19 vaccination mandatory, so long as the public health emergency posed by the novel coronavirus persists.

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Vaccination Requirement FAQs : Morehouse College



I received the Johnson & Johnson vaccine, but I have heard there are issues with it. Does this still meet the requirement?



(/)

- Yes. The CDC and FDA have recommended a pause in the use of Johnson & Johnson's J&J/Janssen COVID-19 Vaccine in the United States out of an abundance of caution because of a small number of reports of a rare and severe type of blood clot happening in people who got this vaccine. If you have already received the vaccine or receive it after the CDC and FDA lift the pause, you are still considered fully vaccinated.

Will I still need to physically socially distance, wear a mask, and practice hand hygiene after I receive the vaccine?

- Yes, at least for now. Although the vaccines are very effective in preventing illness associated with the virus, authorities and scientists are unsure if you can still carry the virus and infect others. In addition, though there is a low risk of becoming ill if you have received a vaccine, a low risk is still a risk, and we want you to be as careful and healthy as possible.

Will I still need to use the symptom tracker after I receive the vaccine?

- Yes, we anticipate maintaining the daily symptom tracker as part of our safety protocols.

Will I still have to be frequently tested for COVID-19 after I receive the vaccine?

- Yes, we anticipate maintaining COVID-19 testing as part of our safety protocols.

Is Morehouse the only college with this requirement?

- No. All Atlanta University Center Consortium institutions— Morehouse, Clark Atlanta University, Morehouse School of Medicine, and Spelman College— are requiring vaccination. The AUC Robert W. Woodruff Library is also implementing a requirement. There is some form of vaccination requirement at other institutions (<https://www.bestcolleges.com/blog/list-of-colleges-that-require-covid-19-vaccine/>), including Rutgers University (<https://coronavirus.rutgers.edu/covid-19-vaccine/>), Emory University (<https://www.emory.edu/forward/covid-19/vaccine.html>), Duke University (<https://coronavirus.duke.edu/2021/04/vaccination-requirements-for-fall-semester/>), Yale University (<https://covid19.yale.edu/community-messages/requiring-students-be-vaccinated-against-covid-19>), Columbia University (<https://covid19.columbia.edu/content/faqs-regarding-sars-cov-2-vaccine>), Brown University (<https://healthy.brown.edu/vaccinations>), Cornell University (<https://covid.cornell.edu/vaccines/vaccination-cornell/>), Georgetown University (<https://www.georgetown.edu/coronavirus/covid-19-vaccines/>), and American University (<https://www.american.edu/ocl/healthcenter/covid-19-vaccine-faq.cfm#:~:text=Yes.,residential%20and%20non%2Dresidential%20students.>).

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Vaccination Requirement FAQs : Morehouse College



Once I submit my vaccination information, how can I be sure my private personal health information is protected?



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- We are finalizing the process for receiving vaccination information to ensure there are confidentiality measures in place.

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STUDENT QUESTIONS

Which students are required to receive the vaccine?

- All residential students. This includes new students who will be freshmen this fall as well as returning students.

I thought young people were immune to COVID-19. Why do I have to be vaccinated?

- Younger people as a whole have never been immune to contracting COVID-19, although the rate of illness among younger people has been lower. Nevertheless, many young people have become ill after contracting the virus, and some have died. In addition, some young people who contract the virus develop “long haul” symptoms, which may not show up until weeks after your initial symptoms subside.

How can I submit my vaccination documentation?

- You will submit your vaccine documentation through the Medicat portal. You will be required to upload a front and back copy of your Covid-19 Vaccination Card.

When should I submit my vaccination documentation?

- Once you are fully vaccinated (received both shots), you are encouraged to upload your vaccination information into the Medicat portal. The deadline to submit your vaccination information is July 30, 2021.

Can I submit my vaccination documentation along with all of my immunization information?

- Yes, you can upload with your immunization information. The updated health records and immunization form for new students and transfers has an area identified for Covid-19 vaccination information.

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Vaccination Requirement FAQs : Morehouse College



If I don't want to receive a vaccine, can I continue to just take classes online?



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- Morehouse will do its best to provide classes that meet the needs of all students, whether in-person or online. However, we may not be able to offer the full range of course options to online-only students as we anticipate doing for in-person students.

An announcement will happen in the early summer, enabling students to know the teaching modality of their Fall classes. Students will be able to make informed adjustments at that time.

The recommendation is that all individuals get vaccinated, but as long as you are not coming onto Morehouse College's campus, you are not required to be vaccinated.

I already had COVID-19. Do I still need to show proof of vaccination for in-person attendance?

- Yes. The science is not clear on how long COVID-19 antibodies will last if you've had COVID-19. The science is clear on how long the antibodies last in individuals that have been fully vaccinated.

Will I be able to register for classes for Fall 2021 without having been vaccinated yet?

- Yes, you will be able to register for classes prior to vaccination, but you will have to show proof of vaccination (or receive an exemption) before coming to campus to attend classes or live in a residence hall this fall.

I am an international student and have not had access to a vaccine. What should I do?

Strategies regarding international students will be forthcoming.

I am an international student and have received the AstraZeneca vaccine, which is not authorized in the United States. Does this meet the Morehouse requirement?

- No, not right now. AstraZeneca has not been approved for Emergency Use Authorization (EUA) in the United States. Therefore, it will not meet the Morehouse requirements.

I am a fully online student. Do I need to be vaccinated?

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Vaccination Requirement FAQs : Morehouse College



(/)

You may forego vaccination if you do not plan to come to the Morehouse campus at all, will not participate in any in-person activities, or interact in the same physical space as anyone affiliated with Morehouse. However, if you want to experience any of these aspects of the Morehouse community, you must be vaccinated.



The recommendation is that all individuals get vaccinated but as long as you are not coming onto Morehouse College's campus, you are not required to be vaccinated.

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EMPLOYEE QUESTIONS

How can I submit my vaccination documentation?

- We are developing the process for submitting documentation and will inform employees when it is complete.

When should I submit my vaccination documentation?

- We are developing the process for submitting documentation and will inform employees about the timeline.

I already had COVID-19. Do I still need to show proof of vaccination to come to work on campus?

- Yes.

Some other colleges with vaccination requirements are applying them only to students. Why am I being required to receive the vaccine as an employee?

- We believe that the safest protocol is to ensure that we have a highly vaccinated population, not only among students but also among faculty, staff, and our on-campus vendors, as we can all carry and transmit the virus.

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EXHIBIT 11

7/27/2021

An update on Penn's plans for the fall semester | Penn Today

An update on Penn's plans for the fall semester

April 22, 2021

Amy Gutmann, President; Wendell Pritchett, Provost; and Craig Carnaroli, Executive Vice President

The widespread distribution of the COVID-19 vaccine now taking place and the many safeguards we have established across campus reinforce our expectation to return to an in-person teaching, research and residential environment for the fall of 2021, as we indicated in our March 16 message. We write today to provide an update and to share new information on what will be involved in our return to a more normal campus experience.

Vaccination requirement for students

With the safety and effectiveness of the COVID-19 vaccines now well-established, and with the importance of mass vaccination so central to our commitment to having a safe campus environment, the most significant new element of our plans for the fall is a requirement that all students be vaccinated. Exceptions will only be provided for medical or religious reasons. Students should plan on being fully vaccinated (i.e., two weeks after the last dose of the vaccine) before they return to campus for the fall semester. For any students who have not been vaccinated by the time they return to campus, the University will provide vaccination clinics, however students will need to quarantine for two weeks after receiving their first dose. Further guidance will be forthcoming for international students who received vaccines not currently approved in the United States. In addition to COVID-19 vaccines, flu vaccines will also be mandatory, beginning later in the fall. Information regarding current student immunization requirements can be found on the Student Health Service website (<https://shs.wellness.upenn.edu/immreq/>).

Specific details regarding vaccination expectations for faculty and staff are under consideration and will be provided in the near future. With increasing availability of highly effective vaccines, at this time the University strongly encourages faculty and staff to become vaccinated for your safety and for the long-term safety of our community.

Additional safety requirements

Even with increasing numbers of people being vaccinated, we still expect that masks will be required in many campus settings, testing and contact tracing for COVID-19 may still be necessary, and large gatherings may still be limited or modified. Everyone on campus will need to be mindful of social distancing, hand washing and completing their daily PennOpen Pass (<https://pennopen.med.upenn.edu/>). The Student Campus Compact (<https://coronavirus.upenn.edu/content/student-campus-compact>) will be updated with any changes in expectations for student conduct early in the fall. All students should remain familiar with the standards for behavior that it outlines.

The academic year

Barring any significant new developments in the course of the pandemic, we expect to begin the fall semester on time, with Move-In beginning on August 25 and New Student Orientation occurring August 25-30. In recognition that our returning sophomores did not have an in-person orientation this past fall, we also will have an orientation program for them along with the Second Year Experience programming. More information about NSO will be shared in the near future. Convocation for the first-year students will take place on August 30, and the first day of classes will be August 31.

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An update on Penn's plans for the fall semester | Penn Today

We expect that undergraduate class instruction will be primarily delivered in-person, although online and hybrid delivery is expected in some cases for large classes. Our academic policies regarding grading will return to their regular, pre-COVID standards. Graduate and professional students will be contacted directly by their schools and programs with information relating to their classroom and research experience.

Housing and dining

Residence halls will return to their normal occupancy in the fall, and dining options will be expanded and should resemble pre-pandemic configurations, although some social distancing and other health considerations will still be in place. We will continue to follow established health guidelines and best practices in our College Houses and dining facilities and will update our policies as needed. Extra cleaning and ventilation checks will continue in all Penn facilities.

Campus visitors

As we begin this summer to repopulate the campus, schools, centers, and departments can again consider bringing in scholars and visitors to campus in accordance with social distancing and facility planning guidelines. Visitors must comply with all Penn health guidelines and policies and participate in PennOpen Pass (<https://pennopen.med.upenn.edu/>). All Penn identification holders will have access to testing and vaccination opportunities in accordance with University and municipal and state health policy guidelines.

Domestic and international travel

Beginning May 18, 2021, Penn will move from suspended to restricted travel. All domestic and some international travel will no longer require a petition if the travelers are fully vaccinated. International travel will still require registration in MyTrips (<https://global.upenn.edu/travel-guidance/register-your-trip>) but will not require petitions if it is to a CDC Level 1 or 2 country. Non-vaccinated travelers and travelers to CDC Level 3 or 4 countries will continue to require a petition. Group travel (defined as 5 people or more traveling on the same itinerary) cannot commence before July 1, 2021. All travelers are expected to follow local and state guidelines regarding quarantine, testing, masking, etc., and should be prepared for changes and modifications. As government restrictions and guidelines pertaining to domestic and international travel continue to evolve, we encourage anyone planning to travel to consult the Penn Global Travel Guidance website (<https://global.upenn.edu/travel-guidance/travel-guidelines-and-procedures>) for the most up-to-date information.

Research

Academic research will return to full operations in the fall semester, in alignment with University policies on general space use, gathering, and travel. New practices that evolved to support safe engagement in the internal and external research community will continue to inform the expansion of research activity in the fall. We look forward to welcoming more faculty, undergraduate students, graduate students, postdocs, and research staff to in-person research on campus in the fall.

Returning to on-campus work

For more than a year, most faculty and staff have been working remotely. This was necessary to ensure health and safety on campus as the pandemic continued to spread. With vaccines now plentiful and the possibility of safe campus workplaces ahead of us, we expect to begin to repopulate campus with most faculty and staff returning to their pre-COVID work schedules on campus beginning in July. This will continue to be based on guidance from the city and Commonwealth health officials. The University continues to evaluate hybrid work options and will provide more information as we begin to phase-in the return to campus plans this summer. Penn's Division of Human Resources has developed a comprehensive guide (<https://www.hr.upenn.edu/docs/default-source/return-to-campus-covid/faculty-staff-return-to-campus-guide.pdf>) for the return to in-person work, which will be updated as the guidance continues to evolve.

Conclusion

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An update on Penn's plans for the fall semester | Penn Today

We remain enormously grateful to everyone in the Penn community for the resilience you have demonstrated as we have managed our way through the many challenges presented by the pandemic. This has been a huge undertaking. The conscientiousness of students, faculty, and staff in complying with our COVID-19 safety procedures has been inspiring, as have been your creativity and determination in together getting through this past year. As we look ahead to the fall, we see the opportunity for a return to campus activities and interactions that are much more in keeping with what we have always known at Penn. We await that with great anticipation.

Visit [Testing Sites and Hours](#) for the status of the tent at Du Bois due to inclement weather.



Student FAQs

[Announcements](#) | [President's Messages](#) | [Dashboard](#) | [FAQs](#) | [Contact](#) | [PennOpen Pass](#)

This information is continually updated based on current public health guidance.

COVID-19 Vaccination

Vaccine Requirements

Is the vaccine mandatory for Penn students? ^

Students are required to receive the COVID-19 vaccination for the Fall 2021 semester. Exceptions will only be provided for medical or religious reasons.

Am I required to have screening testing if I have been vaccinated against COVID-19? v

Will Penn offer the COVID-19 vaccine in the Fall 2021? v

Which vaccines will be accepted? v

Should I delay getting the vaccine offered in my home country and wait until I arrive at Penn? v

I received a COVID-19 vaccine that is not available in the US, should I be re-vaccinated here? v

Where should I upload my vaccine record?



How many doses will I need to get?



Do I have to get the same type of vaccine for my second dose?



How will I know when it's time to come back for my second dose?



About the COVID-19 Vaccine

What have we learned about the vaccine since December when the first shots were administered?



How many doses will I need to get?



Do I have to get the same type of vaccine for my second dose?



Do the Pfizer or Moderna vaccines contain blood products?



Does the Johnson & Johnson vaccine contain the COVID-19 virus?



Will the COVID-19 vaccine change my DNA?



No. This myth may have arisen from the fact that the Pfizer-BioNTech and Moderna vaccines contain messenger RNA. RNA is a type of genetic material, but it's not the same as DNA. The RNA does not enter the cell nucleus, which is where your DNA lives. It does all of its work in your cell cytoplasm. That's the outer portion of the cell. Plus, the instructions mRNA ([created here at Penn](#)) carries to your cells are only for a piece of SARSCoV-2, not the whole virus.

Can I get COVID-19 from the vaccine?



Are the COVID-19 vaccines that are currently being used in the United States developed using fetal tissue?



I've already had COVID-19. Am I required to get the vaccine?



Yes. Due to the severe health risks associated with COVID-19 and the fact that reinfection with COVID-19 is possible, people are advised to get a COVID-19 vaccine even if they have already been sick with COVID-19. At this time, experts do not know how long someone is protected from getting sick again after recovering from COVID-19. The immunity someone gains from having an infection, called natural immunity, varies from person to person, and the evidence suggests natural immunity may not last long in some people.

Should I be concerned the vaccine will negatively impact my health?

The safety of our students, faculty, staff, and postdocs are our highest priority. More than 1.6 billion vaccine doses have been administered worldwide. The risk of side effects from the vaccine is rare and outweighed by the risk of dying from COVID-19. In fact, the vaccines have been proven to be highly effective and safe. Very few recipients of the vaccine have developed COVID-19, and the vaccine has proven to be highly effective in preventing hospitalizations, death, and the spread of the virus.

Public Health Measures

What is the University's current public health guidance? 

Do I need to continue using PennOpen Pass even if I have been fully vaccinated? 

How should I enter my symptoms in PennOpen Pass in the first 48 hours after receiving my COVID-19 vaccine? 

Now that I'm fully vaccinated, do I still have to wear a mask? 

Where can I find COVID-19 academic information and resources? 

Testing

What is Gateway testing? 

If I am fully vaccinated, do I need to participate in Gateway Testing? 

What happens if I test positive during my Gateway or Screening Tests? 

What should I do if I have symptoms of COVID-19 or have had an exposure? 

What is screening testing? 

What are the guidelines for scheduling a screening test? 

What is saliva-based screening? 

What method is used for SARS-CoV-2 testing in the Penn Cares program? 

Does the test method used in the Penn Cares program have an Emergency Use Authorization (EUA)? 

Why are we testing saliva for SARS-CoV-2 and how does it compare to nasal swab? 

What does a "Not Detected" result mean? 

What does a "Positive" result mean? 

How are false positive results managed? 

What does an "Inconclusive" result mean? 

What is diagnostic testing? 

Does the testing method used for Penn Cares detect currently known circulating variants of the SARS-CoV-2 virus? 

When can I cancel or reschedule a test?

How safe are the testing sites?

Contact Tracing

What happens to close contacts?

I just found out I may have been exposed to a potential or confirmed COVID-19 case. What do I do now?

My peer is a confirmed case, why hasn't anyone contacted me?

Life During Quarantine and Isolation

How long do I need to quarantine if I have exposure?

Can I see and be around anyone else living in my home during my quarantine?

How are you going to monitor off campus students to ensure they stick to quarantines?

I have previously tested positive; do I still need to be tested and/or quarantine/isolate?

What support will be available for me during my quarantine, whether I live on campus or off campus?

What happens to my meals if I am on the dining plan? 

If I live on campus and test positive for COVID-19, where will I spend my isolation period? 

If I live off campus and test positive for COVID-19, where should I be isolating? 

Travel

What is the University's travel quarantine policy? 

Why won't the University provide me travel documentation? 

Additional Resources

- [Vaccination Information](#)
- [Getting Vaccinated](#)
- [Student Compliance with Testing](#)
- [Student Testing Positive, Contact Tracing, Quarantine & Isolation](#)
- [Glossary of COVID-19 terms](#)
- [COVID-19 & Wellness](#)
- [Student Health Service](#)
- [PennOpen Pass](#)

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covidresource@upenn.edu »

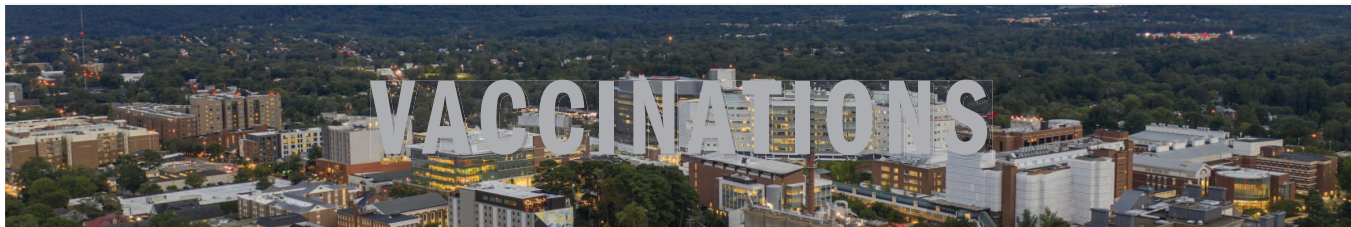
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EXHIBIT 12

CORONAVIRUS INFORMATION



EMPLOYEE COVID-19 VACCINE INFORMATION

Vaccination is required for UVA Health team members by November 1, 2021, unless granted a medical or religious exemption. All Academic Division faculty and staff are expected to be vaccinated. Faculty and staff members unable to provide proof of vaccination will be subject to mandatory saliva PCR testing at least once each week beginning August 2 or as otherwise directed by the University unless they have an exemption because they are working remotely 100% (and documented as such) or tested positive for COVID-19 within 150 days. For details, please see the [HR proof of vaccination webpage](#) and the [HR COVID Prevalence Testing webpage](#).

STUDENT COVID-19 VACCINE REQUIREMENTS

WHAT: Policy Requirements

All students who live, learn, or work in person at the University of Virginia during the 2021-2022 academic year must be fully vaccinated. Students may seek a medical or religious exemption to

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Vaccinations | Coronavirus Information

the vaccination requirement. Students with approved medical or religious exemptions will be subject to pre-arrival and weekly prevalence testing requirements and other public health measures. Students who are not vaccinated and do not qualify for an exemption are not permitted to come to Grounds as of July 1, 2021.

WHY: Rationale for Policy Requirement

According to the [Centers for Disease Control and Prevention \(CDC\)](#) and the Food and Drug Administration (FDA), the COVID-19 vaccines are safe and effective; studies have shown they prevent severe illness and death from the virus. Like hundreds of colleges and universities around the country, the University is following this public health guidance and the advice of our medical experts by mandating vaccination for students. This approach will allow us to return to in-person instruction and student residential life and keep our community safe.

- **Can the University mandate vaccines that are currently only subject to Emergency Use Authorizations?**

Yes. The Virginia Attorney General issued an [official opinion](#) that Virginia colleges and universities “may condition in-person attendance on receipt of an approved COVID-19 vaccine” during the time of pandemic to keep their students, faculty, staff, and surrounding communities safe and healthy. As the AG opinion noted, no federal law bars Virginia institutions of higher education from mandating the COVID-19 vaccine. Additionally, the Equal Employment Opportunity Commission (EEOC) has provided guidance that employers may mandate the COVID-19 vaccine even though it is only under an Emergency Use Authorization (EUA).

- **Are faculty and staff required to show proof of vaccination?**

Yes, all faculty and staff are required to show proof of vaccination before the start of the Fall

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Vaccinations | Coronavirus Information

2021 semester or participate in weekly prevalence testing. Details of this process are located on the [HR website](#).

WHERE: Vaccination Sites, Where can I get vaccinated?

- **Where can I be vaccinated in the United States?**

Vaccine supply is now plentiful in the United States and authorized for use in individuals above the age of 12. There are several ways to find vaccine providers near you, including [these methods](#) published by the CDC.

- **Will I have to pay to be vaccinated?**

No. There is no out-of-pocket cost to get a COVID-19 vaccine in the United States. If you have health insurance, your insurance company may be billed, but costs will not be passed on to you.

WHO: Defining “Student” for Purposes of the Vaccine Requirement

All students who will live, learn, or work in person at the University of Virginia during the 2021-2022 academic year must be fully vaccinated or have an approved medical or religious exemption on file at Student Health and Wellness.

EMPLOYEES

- **What if I am an employee taking one or more University courses?**

You are subject to this requirement if you are enrolled in any course that meets in person during the 2021-2022 academic year.

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Vaccinations | Coronavirus Information

EXECUTIVE FORMAT PROGRAMS

- **What if I am enrolled in an executive-format, degree-granting program and only come to Grounds a few times a year, with the remainder of my course of study occurring online?**

Students in executive-format, degree-granting programs are subject to this requirement if they come to Grounds in person during the 2021-2022 academic year.

EXECUTIVE EDUCATION

- **I am not a student, but I will attend a short, non-degree executive education program or meeting. Am I subject to this requirement?**

No. However, we strongly encourage all visitors to Grounds to be vaccinated. Unvaccinated visitors are subject to public health requirements as outlined in [University Policy SEC-045](#).

ONLINE PROGRAMS

- **What if my entire course of study occurs online?**

You are not subject to the vaccine requirement unless you plan to come to Grounds to utilize in-person resources, such as the library or collaboration spaces. However, please note that this is not the case for most UVA students. Consult your program director if you are unsure whether your program is classified as an online program.

Will there be a fully remote/virtual option for students who are enrolled in the fall but are not vaccinated?

No. Only students enrolled in our online programs will have a fully remote/virtual experience. All other programs will resume in-person instruction.

Will there be remote/virtual classes offered for students other than those who are enrolled in online programs?

There may be several remote course offerings, but these will be offered for single courses rather than entire programs. Most courses will resume in-person instruction.

PREVIOUSLY POSITIVE

<https://coronavirus.virginia.edu/vaccinations>

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Vaccinations | Coronavirus Information

- **What if I had COVID-19? Do I still need to be vaccinated?**

Yes, you can contract COVID-19 more than once. You are still subject to the vaccine requirement.

HOW: Process for Uploading Vaccine Record or Exemption Request Form

- **How do I upload my COVID-19 vaccination record?**

Students must upload their complete COVID-19 vaccination record to the Student Health and Wellness [Healthy HOOS patient portal](#) (using NetBadge). Once logged in:

- Click “Uploads.”
- Choose “COVID-19 Vaccine Immunization Information” for the document you are uploading.
- Take a photo of your COVID-19 vaccine card and complete the upload process as instructed.

- **How do I request an exemption from the mandatory COVID-19 vaccination?**

Students may request exemption from the vaccination requirement for medical or religious reasons only. The [medical exemption form](#) and the [religious exemption form](#) are available on the [Student Health and Wellness website](#). Please note that students who are granted exemptions will be required to participate in pre-arrival testing and mandatory weekly prevalence testing, as well as other public health measures.

- Students requesting an exemption for religious reasons will be required to submit a written statement, signed by the student or a parent or legal guardian if the student is a minor (under age 18), explaining how the vaccination requirement conflicts with the student’s sincerely-held religious beliefs. A religious exemption is not the same as a philosophical, moral, or conscientious exemption.

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Vaccinations | Coronavirus Information

- Students requesting a temporary or permanent exemption for medical reasons will be required to submit a statement signed by a health care professional. If approved, the exemption will apply for the period of time designated by the health care professional.

WHEN: Deadlines, Consequences for Non-Compliance

- **When is the deadline for uploading my complete COVID-19 vaccination record or exemption request?**

Students must upload this documentation via the Student Health and Wellness [HealthyHoos patient portal](#) (using NetBadge) by July 1, 2021.

- **What are the consequences for non-compliance?**

All students who plan to live, learn, or work in person at the University during the 2021-2022 academic year must be vaccinated and submit proof of vaccination or request a medical or religious vaccine exemption no later than Thursday, July 1, 2021.

As of July 1, students are not permitted on Grounds unless they are vaccinated or have a medical or religious exemption request approved by Student Health and Wellness. Students who are still in the process of being vaccinated should upload their documentation as soon as possible and are not permitted on Grounds for any reason until they have done so.

Failure to have this documentation loaded by early July could result in delays/disruptions to program start dates in August. Beginning in the first week of July, students not in compliance will have their ID cards deactivated and will be unable to access resources on Grounds. Once the documentation is submitted and approved, cards will be reactivated.

This reactivation usually occurs within 48 hours of submission.

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Vaccinations | Coronavirus Information

COMMUNITY UPDATES

MAY 20, 2021 - Message to the University community

APRIL 9, 2021 - Letter to students from Dean of Students Allen W. Groves

APRIL 1, 2021 - Community Update

QUESTIONS?

Domestic - 833-454-6902

covidinformation@virginia.edu

International - +1 202 800-2408

2420 Old Ivy Road
P.O. Box 400229
University of Virginia
Charlottesville, VA 22904-4229

PHONE (434) 924-1400
FAX (434) 924-0938
EMAIL University Communications

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EXHIBIT 13



Health and Safety Protocols

(<https://www.vanderbilt.edu/coronavirus/>)

Student vaccination requirement

New and returning students are required to be fully vaccinated against COVID-19 for the 2021–22 academic school year. The requirement applies to all undergraduate, graduate and professional students this fall, and it will be handled in a manner consistent with other university policies governing student vaccine requirements.

Students can request accommodations for medical exemptions through the [Student Access office](https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php) (https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php) and religious exemptions through the [Equal Opportunity and Access office](https://www.vanderbilt.edu/eoa/) (<https://www.vanderbilt.edu/eoa/>).

Students must submit their vaccination record through the university's [vaccine tracker submission form](http://vu.edu/submit-vaccine) (<http://vu.edu/submit-vaccine>), including those who received their vaccine from Student Health, VUMC or a VUMC clinic, no later than Friday, August 6. A hold will be placed on a student's course registration until the vaccination record has been verified unless they have an approved (or in-process request for) accommodation. Non-compliant international students with the hold will receive a survey from the ISSS office to determine their status.

International students

If a [World Health Organization approved COVID-19 vaccination](https://extranet.who.int/pqweb/vaccines/covid-19-vaccines) (<https://extranet.who.int/pqweb/vaccines/covid-19-vaccines>) is not available in a student's home country before returning to campus, the student will be able to receive a vaccination once they arrive on campus. Consistent with CDC guidance, they should only perform essential activities, mask and physical distance for seven days after travel.

International students can request accommodations for medical exemptions through the [Student Access office](https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php) (https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php) and religious exemptions through the [Equal Opportunity and Access office](https://www.vanderbilt.edu/eoa/) (<https://www.vanderbilt.edu/eoa/>).

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Student vaccination requirement | Health and Safety Protocols | Vanderbilt University

More information about receiving a COVID-19 vaccination and other requirements upon arriving to campus will be shared directly with international students.

COVID-19 Vaccine

COVID-19 vaccines have been shown to be safe and effective (https://www.cdc.gov/coronavirus/2019-ncov/vaccines/vaccine-benefits.html?s_cid=10465:why%20should%20i%20get%20a%20covid-19%20vaccine.sem.ga.p:RG:GM:gen:PTN:FY21) at preventing infection by the virus, and experts believe getting the vaccine prevents serious illness and reduces potential transmission to others even if you do get infected. The rapid development and expansion of the vaccine is an unprecedented achievement in the history of medicine and is one in which scientists and clinicians at Vanderbilt University and Vanderbilt University Medical Center played (<https://news.vanderbilt.edu/2020/12/18/vanderbilt-researchers-take-leadership-role-in-covid-19-vaccine-development/>) leading roles. This underscores the power of our university's relentless pursuit of innovation and our mission to be of service to our community.

In partnership with VUMC, the university has worked to offer students, faculty and staff ongoing opportunities to receive the vaccine, including making appointments available to all students beginning in mid-April. The Student Health Center has also announced that it will offer the Johnson & Johnson vaccine beginning Monday, May 24, by appointment only. In addition, the Student Health Center will also offer the Pfizer vaccine beginning on Monday, August 9. Students may call Student Health at 615-322-2427 to schedule an appointment.

All World Health Organization-authorized vaccines will be acceptable; Moderna, Pfizer-BioNTech and Johnson & Johnson are included. Information will be provided for international students with difficulty accessing vaccines in their home country before they come to campus this fall.

Additional FAQ

Which vaccines are approved?

All World Health Organization-authorized vaccines (<https://extranet.who.int/pqweb/vaccines/covid-19-vaccines>) are acceptable; Moderna, Pfizer-BioNTech and Johnson & Johnson are included.

Am I required to get vaccinated if I've had COVID-19 or have the presence of antibodies?

Yes. In line with CDC recommendations (<https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Ffaq.html&data=04%7C01%7Cvutesting%40vanderbilt.edu%7C3bf19e7795d743d9421708d9205703d0%7Cba5a7f39e3be4ab3b45067fa80>)

<https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Ffaq.html&data=04%7C01%7Cvutesting%40vanderbilt.edu%7C3bf19e7795d743d9421708d9205703d0%7Cba5a7f39e3be4ab3b45067fa80>

Vanderbilt University requires all students to be vaccinated, including those who have previously tested positive for COVID-19.

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Student vaccination requirement | Health and Safety Protocols | Vanderbilt University

How do I submit my vaccination record?

Vanderbilt students, faculty, postdoctoral fellows and staff should submit their vaccination records to the Public Health Command Center using a password-protected, self-service portal. To submit a vaccination record, please visit the following link. (<https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09>)

[url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09)

[redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09)

I received my vaccination at VUMC/Student Health/Occupational Health, do I need to submit my record to VU?

Yes, you will still need to submit your record to the university even if you received your vaccination at Student Health, Occupational Health, VUMC or a VUMC clinic. VUMC (which includes Student Health and Occupational Health) does not automatically share your medical record with VU.

What is needed to submit a vaccination record? What do I do if I lost my vaccine card?

A picture or screenshot of the vaccination card, documentation, or an online medical record showing the dates of the vaccine doses is needed. If you were vaccinated at VUMC or another medical provider, we can accept a screenshot of your vaccination record in MyHealth at Vanderbilt or from another medical provider's online system. Otherwise, you will need to contact the location in which you received your vaccine to obtain some form of documentation that shows your name and dates of the vaccine dose(s). You are welcome to upload documentation directly into the vaccine portal at the following link (<https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09>)

[https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09)

[ss0%2Fapi%2Fmazik-vaccine-his-](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09)

[redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvacc-ss0.app.vanderbilt.edu%2Fvacc-ss0%2Fapi%2Fmazik-vaccine-his-redirect&data=04%7C01%7Camanda.n.maynord%40Vanderbilt.Edu%7Cd0aeb2d5f9a94d48ce5808d91f92ae6c%7Cba5a7f39e3be4ab3b45067fa80faecad%7C09) or you can email it to commandcenter@vanderbilt.edu (<mailto:commandcenter@vanderbilt.edu>) and they can add it for you.

I am having trouble entering my vaccination information into the tracker/system. (Any questions regarding how they can only enter one dose or can't upload an image, etc.)

Email the Command Center at commandcenter@vanderbilt.edu (<mailto:commandcenter@vanderbilt.edu>) if any problems are encountered submitting vaccination information to the system. Include a picture or screenshot of the vaccination card, documentation, or an online medical record showing the dates of the vaccine doses and they will assist you behind the scenes.

For international students – I have not been vaccinated yet and do not have access to a WHO approved vaccine in my home country. What are my options for vaccination upon arrival? Should I consider obtaining a non-WHO approved vaccine in my country and then a WHO approved upon arrival?

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The Johnson & Johnson one-dose vaccine is currently available through Student Health. In addition, the Pfizer two-dose vaccine will also be available through Student Health after August 9.

It is not necessary for international students to arrive early for their vaccination. Those living in on-campus housing can contact OHARE with any questions regarding their move in.

Students interested in receiving the Johnson & Johnson or Pfizer vaccines at Student Health can call the Student Health Center at (615) 322-2427 to speak with one of their nurse managers to schedule an appointment. Scheduling will not be available through myHealth.

Students who prefer to receive Moderna, can receive Moderna at Metro Nashville or other community locations. More information is provided at <https://www.asafenashville.org/> (<https://www.asafenashville.org/>) (for vaccination through Metro Nashville Public Health) and at <https://www.vaccines.gov/> (<https://www.vaccines.gov/>) (for vaccines at other community locations).

For international students – I do not have access to a WHO approved vaccine and am trying to determine how to handle

The university accepts all World Health Organization (WHO) authorized vaccines. The WHO continues to update decisions on vaccines routinely and will continue to do so in the future. You can find more details [here](https://nam04.safelinks.protection.outlook.com?url=https%3A%2F%2Fextranet.who.int%2Fpqweb%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2FStatus_COVID_VAX_04May2021.pdf&data=04%7C01%7Cvutes) ([https://nam04.safelinks.protection.outlook.com/?](https://nam04.safelinks.protection.outlook.com?url=https%3A%2F%2Fextranet.who.int%2Fpqweb%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2FStatus_COVID_VAX_04May2021.pdf&data=04%7C01%7Cvutes)

[url=https%3A%2F%2Fextranet.who.int%2Fpqweb%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2FStatus_COVID_VAX_04May2021.pdf&data=04%7C01%7Cvutes](https://nam04.safelinks.protection.outlook.com?url=https%3A%2F%2Fextranet.who.int%2Fpqweb%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2FStatus_COVID_VAX_04May2021.pdf&data=04%7C01%7Cvutes)
on the main WHO website: <https://www.who.int/>. (<https://www.who.int/.%E2%80%AF>)

If the vaccine available to you will not be approved in advance of the vaccine submittal deadline, we would recommend getting a WHO approved vaccine wherever you are located or doing so upon arrival in Nashville (if you are currently out of the country and one is not available to you).

If you are considering getting a non-WHO approved vaccine at your current location and following up with a WHO approved after arrival, we would first recommend that you consult with your local healthcare provider to get their perspective on mixing two different vaccines before making a decision.

Students interested in receiving the Johnson & Johnson or Pfizer vaccines at Student Health can call the Student Health Center at (615) 322-2427 to speak with one of their nurse managers to schedule an appointment. Scheduling will not be available through myHealth.

Students who prefer to receive Moderna, can receive Moderna at Metro Nashville or other community locations. More information is provided at <https://www.asafenashville.org/> (<https://www.asafenashville.org/>) (for vaccination through Metro Nashville Public Health) and at <https://www.vaccines.gov/> (<https://www.vaccines.gov/>) (for vaccines at other community locations).

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Student vaccination requirement | Health and Safety Protocols | Vanderbilt University

For international students – I have already received a non-WHO approved vaccine in my home country and my healthcare provider has advised that I wait a period of time before receiving a WHO approved vaccine. What should I do?

You may consider applying through the medical accommodation process to seek an accommodation until such time that either the vaccine you received becomes WHO approved or the waiting period recommended by your doctor concludes and you can be revaccinated with a WHO-approved vaccine. Students can apply for medical accommodation through Student Access at the following link: https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php. Faculty, staff and postdoctoral fellows can apply through the [Equal Opportunity and Access office](https://www.vanderbilt.edu/eoa/) (<https://www.vanderbilt.edu/eoa/>).

For international students – I have access to Pfizer or Moderna in my home country. However, I will only be able to receive one dose prior to arrival. What should I do?

If you have received one dose of a two dose vaccine (Pfizer or Moderna) before arriving in the United States, you have a few options to consider when arriving in the United States.

You can schedule a second dose of Pfizer at Student Health. Students interested in receiving the Pfizer vaccine at Student Health can call the Student Health Center at (615) 322-2427 to speak with one of their nurse managers to schedule an appointment. Scheduling will not be available through myHealth.

You can also receive a second dose of Moderna at Metro Nashville or other community locations. More information is provided at <https://www.asafenashville.org/> (<https://www.asafenashville.org/>) (for vaccination through Metro Nashville Public Health) and at <https://www.vaccines.gov/> (<https://www.vaccines.gov/>) (for vaccines at other community locations).

I understand Student Health will offer the Johnson & Johnson vaccine; however, I prefer to receive Pfizer or Moderna. Do you have those options?

Students interested in receiving the Pfizer vaccine at Student Health can call the Student Health Center at (615) 322-2427 to speak with one of their nurse managers to schedule an appointment. Scheduling will not be available through myHealth. You can also receive Moderna at Metro Nashville or other community locations. More information is provided at <https://www.asafenashville.org/> (for vaccination through Metro Nashville Public Health) and at <https://www.vaccines.gov/> (for vaccines at other community locations).

My vaccination information/card is in a language other than English. Do you accept records in other languages?

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A picture or screenshot of the vaccination card, documentation, or an online medical record showing the dates of the vaccine doses is needed. Individuals can submit official documentation of the vaccination in whatever form provided in their country as long as it shows the person's name clearly in English, the manufacturer and date of each vaccine dose. While records in English are preferred, the Command Center will accept other languages as long as the name is in English and it clearly shows the manufacturer and date of each dose.

What is the deadline for submitting vaccination records?

Students should submit their vaccination records no later than August 6.

Should I upload my first dose before receiving my second?

If you have received your first dose of a two-dose vaccine, please upload to the system as soon as possible. You can then update your record after you receive your second dose. Students without any documentation on file for a first or second dose will receive an impact hold and starting July 21st, they will be unable to register for classes. Students who have uploaded their information for the first dose will receive a non-impact hold while they are completing their series. These students will be able to make changes to their schedule on and after July 21st.

Do students in online programs need to submit vaccination records?

If the education program in which you are enrolled has any sort of on-campus or in-person component (even if you visit campus for one hour on one day or only 3 days during a semester), then you must fulfill the vaccination requirement.

How do I submit an accommodation request?

Students can request accommodations for medical exemptions through the [Student Access office](https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php) (https://www.vanderbilt.edu/student-access/how_to/get_accommodations/index.php) and religious exemptions through the [Equal Opportunity and Access office](https://www.vanderbilt.edu/eoa/) (<https://www.vanderbilt.edu/eoa/>).

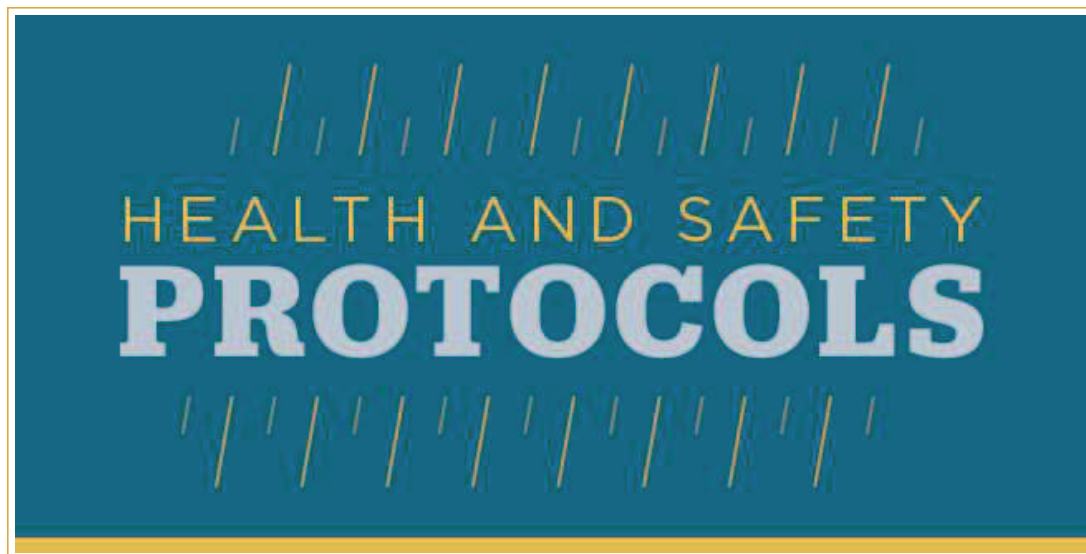
 [VU COVID-19 Dashboard](https://www.vanderbilt.edu/coronavirus/covid19dashboard/) (<https://www.vanderbilt.edu/coronavirus/covid19dashboard/>)

[Vaccine Information](https://www.vanderbilt.edu/coronavirus/covid-19-vaccine-information/) (<https://www.vanderbilt.edu/coronavirus/covid-19-vaccine-information/>)

[Positive case / close contact form](http://vu.edu/vucommandcenter) (<http://vu.edu/vucommandcenter>)

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[View all community](#)

[messages »](https://www.vanderbilt.edu/coronavirus/category/community-messages/)

Latest Updates

New Sept. 3: COVID-19 Update: Dashboard, sentinel testing program, academic support and gatherings (<https://news.vanderbilt.edu/2021/09/03/covid-19-update-dashboard-sentinel-testing-program-academic-support-and-gatherings/>)

New Aug. 30: COVID Updates: Dining, Rec Center, masking, testing (<https://news.vanderbilt.edu/2021/08/30/covid-updates-town-hall-dining-rec-center-masking-testing/>)

Updated Aug. 12: Masking and physical distancing (<https://www.vanderbilt.edu/coronavirus/faqs/masking-and-physical-distancing/>)

New Aug. 1: COVID-19 testing (<https://www.vanderbilt.edu/coronavirus/faqs/covid-19-testing-2/>)

Information for

[Undergraduate Students](https://www.vanderbilt.edu/coronavirus/community/undergraduate-students/)

[Graduate and Professional Students](https://www.vanderbilt.edu/coronavirus/community/graduate-and-professional-students/)

[International Students](https://www.vanderbilt.edu/coronavirus/community/international-students/)

[Faculty](https://www.vanderbilt.edu/coronavirus/community/faculty/)

[Postdocs](https://www.vanderbilt.edu/coronavirus/community/postdocs/)

[Staff](https://www.vanderbilt.edu/coronavirus/community/staff/)

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Visitors and Suppliers (<https://www.vanderbilt.edu/coronavirus/community/visitors-and-suppliers/>)



Support the COVID-19 Research and Innovation Fund (<https://giving.vanderbilt.edu/covid19fund.php>)



Vanderbilt Responds to COVID-19 (<https://news.vanderbilt.edu/vanderbilt-responds-to-covid-19/>)

Resources for journalists » (<https://news.vanderbilt.edu/expert-search-result/?tags=COVID-19>)

Resources for VU communicators » (<https://www.vanderbilt.edu/coronavirus/community/resources/resources-for-vu-communicators/>)

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Vanderbilt University faculty sharing their expertise on a range of topics related to COVID-19

(<https://www.vanderbilt.edu/coronavirus/ask-an-expert/>)

CDC's COVID-19 Hub » (<https://www.cdc.gov/coronavirus/2019-ncov/index.html>)

© (<https://www.vanderbilt.edu/coronavirus/wp-login.php?>

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EXHIBIT 14

9/3/2021

Wake Forest COVID-19 Vaccine Policy - Our Way Forward

COVID-19 information, including a dashboard, is available on [Our Way Forward](#) »



[Our Way Forward](#)

Wake Forest COVID-19 Vaccine Policy

May 26, 2021

Dear Wake Forest students,

On April 20, Wake Forest administrators communicated the University's intent to require all students enrolled in the Fall 2021 semester to be fully vaccinated. We all look forward to the return of a more vibrant campus in the fall, and vaccinations are a key tool in accomplishing that vision.

Mounting evidence has demonstrated that the vaccines are as effective in real-world use as they were in earlier trials at limiting the spread of infection and the severity of symptoms among the few who do get infected. The CDC and the North Carolina Department of Health and Human Services continue to urge individuals 12 years and older to get vaccinated as soon as possible.

Wake Forest University COVID-19 Vaccine Policy

Wake Forest has published its [COVID-19 Vaccine Policy](#) on the Our Way Forward website. The policy applies to all Wake Forest students (undergraduate, graduate and

RECENT POSTS

- ▶ [Vaccination documentation required; on-campus clinic available](#)
August 23, 2021
- ▶ [Documentation of second vaccine dose required; on-campus clinic available](#)
August 23, 2021
- ▶ [Mask requirement reminder](#)
August 22, 2021

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Wake Forest COVID-19 Vaccine Policy - Our Way Forward

professional school) who reside in University housing, are enrolled in in-person classes, and/or who participate in any in-person activities on the Reynolda, Brookstown, Wake Downtown, and Charlotte campuses, and/or who participate in any Wake Forest-sponsored study abroad or study-away programs.

Search Archive



Students must submit documentation providing proof of full COVID-19 vaccination to the Student Health Portal by July 1, 2021. Students may submit a request for a medical or religious exemption; however, such exemptions will not apply to students studying abroad on Wake Forest-sponsored programs.

Information for Students Traveling from Abroad

The University will assist student efforts to receive a COVID-19 vaccine if they have been unable to obtain the vaccine in their state or country of residence or have received a vaccine not authorized by the FDA. The Office of International Student and Scholar Services will continue to communicate immigration and travel-related changes to international students directly. Students traveling from abroad should continue to communicate any questions related to the vaccine to shs@wfu.edu.

Additional Information for First-Year Students

Students beginning the first year of Wake Forest degree programs, at the undergraduate or graduate level, also are required by North Carolina state law to provide documentation of state-mandated immunizations (such as measles, mumps; see full list) prior to registration.

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Incoming first-year students can provide documentation of the COVID-19 vaccination on the required Health Information and Immunization Form ([HIIF](#)). If the COVID-19 vaccination documentation is provided by submitting this form, no further documentation is necessary.

Related Policies, Protocols, Procedures, Guidelines and Other Resources:

- ▶ [WFU Immunization Policy](#)
- ▶ [WFU Vaccine FAQ](#)

Your health and safety continue to be a top priority for Wake Forest. Getting this safe and effective vaccine offers an added layer of protection against COVID-19 that could also protect your family, friends and community. Please take care of yourself this summer, and Wake Forest looks forward to welcoming you in the fall.

– *Communications and External Relations*

Categories: [Communications & External Relations](#)

COVID-19 information, including a dashboard, is available on [Our Way Forward](#) »

Our Way Forward

🏠 / [Faculty & Staff](#) / COVID-19 FAQs

COVID-19 FAQs

Student Vaccination Requirement

Wake Forest requires COVID-19 vaccinations for students for the 2021 fall semester. [Message](#) | [Policy](#).

Exemptions: Information concerning how to submit a request for a medical or religious exemption can be found on the [Student Health Service website](#).

International students: If you were unable to obtain an FDA-authorized vaccine before arriving in the United States, you will need to provide:

- ▶ documentation of either a one-dose vaccination (Johnson & Johnson) or the first dose of a two-dose vaccination series (Moderna / Pfizer) no later than Sept. 10. If you do not provide this documentation, you will be withdrawn from fall courses and your assigned housing (if applicable) on Sept. 13.
- ▶ AND documentation of either a one-dose vaccination (Johnson & Johnson) or both doses of a two-dose vaccination series (Moderna / Pfizer) no later than Oct. 1. If you do not provide this

Vaccine information

- ▶ Vaccination opportunities are available with [Forsyth County Public Health Department](#), [Wake Forest Baptist Health](#), [Novant Health](#), [Walgreens](#), [CVS](#) and other sources.
- ▶ Read the [latest information](#) from the CDC

Top Five Things to Know

1. **COVID-19 vaccines are safe.** Millions of people in the United States have received COVID-19 vaccines

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documentation, you will be withdrawn from fall courses and your assigned housing (if applicable) on Oct. 4.

Checking Your Status: After submitting your documentation, please allow 24-48 hours before checking the status of your record online as individual vaccination records are reviewed by medical professionals.

The status of your documentation will be available in the student portal under My Profile > Immun. History.

- ▶ **Vaccinations:** If you see the name of the vaccine(s) you received and the date(s) you received them on your Immun. History page, this means that your documentation has been reviewed and accepted, and that you're in compliance with the policy.
- ▶ **Exemptions:** If your exemption request is accepted, you will see "exempt" or "exemption" on the Immun. History page. If it is denied, you will receive a secure message in the portal stating that it's denied.

Faculty & Staff Vaccination Requirement

Wake Forest is requiring all faculty and staff to provide their vaccination status to the university and submit documentation if they have been vaccinated. Specific positions at Wake Forest which require travel and/or in-person interaction with the public as essential requirements of the position may be subject to vaccination requirement. [Policy](#)

under the most intense safety monitoring in US history. These vaccines cannot give you COVID-19.

2. **COVID-19 vaccines work.** Getting a COVID-19 vaccine can help protect you from getting sick or severely ill with COVID-19. It may also help protect people around you, like your friends, your family, our school, and our community.
3. **You may have side effects after vaccination, but these are normal.** You may have some side effects after receiving a COVID-19 vaccine, such as pain, redness or swelling at the injection site. You may also have tiredness, headache, muscle pain, chills, fever, or nausea. These are normal signs that your body is building protection.

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Exemptions: An exemption process for positions which are subject to the Employee Vaccination Policy will be available soon.

Submitting Your Documentation: Faculty and staff who need to provide or update their vaccination status to the university should do so via Workday using these [instructions](#).

Information subject to change based upon the latest CDC recommendations.

GENERAL QUESTIONS

▶ [Is the vaccination required for WFU faculty, staff, or students?](#)

▶ [Will WFU be tracking the number of immunized individuals on campus?](#)

▶ [How can I talk to someone about this policy to share my feedback about it?](#)

FOR STUDENTS

▶ [What does a student need to do to be considered fully vaccinated by WFU?](#)

These side effects may affect your ability to do daily activities, but they typically go away in a few days. Some people have no side effects.

4. It takes 2 weeks after vaccination for you to be considered “fully vaccinated,” meaning your body has built protection against the virus that causes COVID-19.

People are considered fully vaccinated:

- ▶ 2 weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or
- ▶ 2 weeks after a single-dose vaccine, such as Johnson & Johnson’s Janssen vaccine.

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▶ If I'm not vaccinated, what should I expect in the fall?

▼ I have test results showing I have antibodies for COVID-19. Can that be used in lieu of a vaccination?

Antibodies are not recommended to be used as evidence of immunity by the CDC nor the FDA and will not be permitted as proof of nonsusceptibility to COVID. All students must have an FDA-authorized vaccine (unless they have been granted a medical or religious exemption)

▶ Can students engage in campus activities or move into WFU housing before they receive both doses of the vaccine?

▶ Are there risks and/or safety concerns related to receiving more than one COVID vaccine? (i.e., if they get one in their home country that is not FDA authorized and need to get another when returning to Wake Forest in the fall).

▶ If a student received a vaccine in their home country, what do they need to do when returning to WFU?

▶ Will quarantine be required for students traveling internationally?

FOR FACULTY & STAFF

▶ If I'm not vaccinated, what should I expect in the fall?

▶ What should staff do if they experience side effects after receiving the vaccine?

- ▶ You should keep using all the tools available to protect yourself and others until you are fully vaccinated.

5. **After you are fully vaccinated, you can start to do some things that you had stopped doing because of the pandemic.**

COVID-19 vaccines are the key to getting back to normal. If you are fully vaccinated, you can resume activities that you did prior to the pandemic. More details about what you can do can be found on the [CDC's webpage](#).

Faculty & Staff Questions

If you have a question related to COVID-19 vaccines, vaccine documentation, or asymptomatic testing for Wake Forest faculty and staff that was not

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▶ Can the university require me to disclose my vaccination status?

▶ What happens if I refuse to provide my vaccination status to the university?

▶ Is there a protocol for reporting failure to comply with masking requirements?

▶ How do I submit my vaccination documentation to the university?

answered here, please submit your question(s) to Human Resources using [this form](#).

EXHIBIT 15

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Requiring Students to be Vaccinated Against COVID-19 | COVID-19 Information

Yale University

COVID-19 Information

HOME > COMMUNITY MESSAGES > [REQUIRING STUDENTS TO BE VACCINATED AGAINST COVID-19](#)

Requiring Students to be Vaccinated Against COVID-19

April 19, 2021

Dear Members of the Yale Community,

Last month, we wrote to you about our preliminary plans for the 2021-2022 academic year: a full residential program for undergraduates, on-campus studies for graduate and professional school students, and a return to on-campus activities for faculty and staff. Realization of these plans will depend on favorable public health conditions and the guidance of public health experts. Today we are writing to provide you with some additional information.

Although the course of the COVID-19 pandemic over the coming months remains uncertain, vaccination is the strongest tool for preventing transmission of the virus. There is abundant evidence of the vaccines' effectiveness and growing confidence that vaccines will be widely available by early summer.

Therefore, we are requiring all undergraduate, graduate, and professional school students who plan to be on campus to be fully vaccinated against COVID-19 at the start of the fall 2021 semester. Additionally, we expect students who plan to study or work on campus this summer to be inoculated as soon as vaccinations are available to them.

Students on campus or in the New Haven area may make vaccination appointments by following the steps outlined in [Dr. Christine Chen's April 16 message \(https://yalehealth.yale.edu/special-message-upcoming-dedicated-student-vaccination-clinics\)](https://yalehealth.yale.edu/special-message-upcoming-dedicated-student-vaccination-clinics) or the appointment scheduling information on the [Yale COVID-19 Vaccine Program website \(https://yalehealth.yale.edu/yale-covid-19-vaccine-program\)](https://yalehealth.yale.edu/yale-covid-19-vaccine-program).

Students who are not currently in the New Haven area should consult their state and local authorities for information about vaccination availability and scheduling. We understand that a small number of students may not be able to obtain vaccination appointments before they return to campus, and we are making provisions to vaccinate them on arrival. We also will make reasonable accommodations for

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medical and religious exemptions from vaccination. More information, including how students should document their vaccination status or seek exemptions and the vaccines that will satisfy the requirement, will be provided in the coming weeks.

We are considering whether we also will require faculty and staff to be vaccinated in order to return to campus. To inform our deliberations, we have asked a working group, including faculty experts in public health, to make recommendations. We expect to receive the group's report in the coming weeks and make a determination in June.

From the beginning of the pandemic, we have worked together as a community to develop and follow measures to promote the health and safety of our colleagues, families, and friends. Now we share the opportunity and the responsibility to take the next important step toward putting the pandemic behind us. We encourage everyone who is eligible to [sign up for vaccination](https://view.message.yale.edu/?qs=4e967c15e614c91371ceb73e90f2826209d4f343c00d30095a5d5b8c116e2a312a5ee0077a155a272972210ffd087e96e0377d577840eb5cef308ada75ab3c49ce5a523d0c1163ebcb944b8748d29d24) (<https://view.message.yale.edu/?qs=4e967c15e614c91371ceb73e90f2826209d4f343c00d30095a5d5b8c116e2a312a5ee0077a155a272972210ffd087e96e0377d577840eb5cef308ada75ab3c49ce5a523d0c1163ebcb944b8748d29d24>) as soon as possible and join the millions of people who have already received a vaccine.

Sincerely,

Peter Salovey

President

Chris Argyris Professor of Psychology

Scott Strobel

Provost

Henry Ford II Professor of Molecular Biophysics & Biochemistry

Yale

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COVID-19 Vaccine Exemption Requests | Yale Health

Yale University

Yale HEALTH



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COVID-19 Vaccine Exemption Requests

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COVID-19 Vaccine Exemption Requests | Yale Health

The university's COVID-19 vaccine requirement is critical for the health of our community and a safe return to in-person university operations. Faculty, staff,

postdoctoral/postgraduate trainees, and students may request exemptions from the requirement for medical, religious, or, in the case of faculty, staff and postdoctoral/postgraduate trainees, strongly held personal beliefs.

Anyone requesting an exemption must access, complete and upload the request forms through the [Yale Vaccine Portal \(https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program\)](https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program) (the portal) by August 1. Once completed and uploaded on the portal, requests are submitted to the university's COVID-19 vaccine exemption review committees.

Individuals who are not vaccinated against COVID-19 **will be required to follow additional health and safety precautions not applicable to fully vaccinated individuals** which may include but are not limited to:

- Regular asymptomatic testing
- Masking and social distancing
- Daily health checks
- Quarantine if identified as a close contact of a person who tests positive
- Restrictions on university-sponsored travel, and required testing and/or quarantine following personal travel
- Limitations of access to certain events, spaces, roles and activities

Medical Exemption Requests (Faculty, Staff, Postdoctoral/Postgraduate Trainees, and Students)

Faculty, staff, postdoctoral/postgraduate trainees, and students seeking a medical exemption must access, complete and upload the request form on the [portal \(https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program\)](https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program). The medical exemption request must include a signed form from a medical provider confirming the basis for the request. The university's COVID-19 Vaccine Medical Exemption Review Committee will review the request and reach out to the requestor to schedule a conversation with a university representative. The purpose of the conversation is to review the request and provide additional information as may be needed.

The Medical Exemption Review Committee may require additional information to complete its review and the process may take approximately two weeks. Medical exemptions may be granted on a temporary basis and are subject to reassessment.

Reasons for a medical exemption include:

- Documented history of severe allergic reaction to a [component](#)

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COVID-19 Vaccine Exemption Requests | Yale Health

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/specific-groups/allergies.html>) of each currently available COVID-19 vaccine

- Documented history of severe or immediate-type hypersensitivity allergic reaction to a COVID-19 vaccine, and separate contraindication to other available formulations
- Receiving immunosuppressive (weakens the immune system) treatment and advised by a medical provider to defer vaccination until a future date
- Another medical condition where it is advised by a medical provider to forgo vaccination or to defer vaccination until a future date.

Examples of conditions that are **NOT** considered for a medical exemption include:

- History of severe allergic reactions to foods, oral medications, latex, pets, insects, and environmental triggers
- History of immunocompromising conditions where the vaccine may be less effective
- Fear of needles
- A history of vaccine side effects or general avoidance of vaccines.

Other considerations:

- While COVID-19 vaccine is considered safe in pregnancy, persons who are pregnant or breastfeeding are encouraged to speak with their medical provider to discuss if it is appropriate to pursue a medical exemption request.
- People who were treated for COVID-19 with monoclonal antibodies or convalescent plasma or who were diagnosed with multisystem inflammatory syndrome should wait 90 days before getting a COVID-19 vaccine.
- A history of COVID -19 infection or positive antibody screen is not considered a substitute for vaccination.

Religious Exemption Requests (Faculty, Staff, Postdoctoral/Postgraduate Trainees, and Students)

Faculty, staff, postdoctoral/postgraduate trainees, and students seeking a religious exemption must access, complete and submit an exemption request form through the [portal \(https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program\)](https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program). The university's COVID-19 Religious and Strongly Held Personal Belief Exemption Review Committee will review the request and the Public Health Ambassador team will reach out to the requestor to schedule a conversation.

The purpose of this conversation is to review the exemption request and provide additional information as may be needed, not to assess religious beliefs, practices or observances.

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COVID-19 Vaccine Exemption Requests | Yale Health

This process may take approximately two weeks.

Individuals who receive a religious exemption have the opportunity to change their mind at any time and receive a COVID-19 vaccination free of charge through the Yale COVID-19 Vaccine Program.

Strongly Held Personal Belief Exemption Requests (Faculty, Staff and Postdoctoral/Postgraduate Trainees)

Faculty, staff, or postdoctoral/postgraduate trainees seeking a strongly held personal belief exemption must access, complete and submit the exemption request form through the [portal \(https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program\)](https://yalehealth.yale.edu/reporting-covid-19-vaccine-outside-yale-program). The university's COVID-19 Vaccine Strongly Held Personal Belief and Religious Exemption Review Committee will review the request and the Public Health Ambassador team will reach out to the requestor to schedule a conversation.

The purpose of this conversation is to review the exemption request and provide additional information as may be needed, not to assess the strongly held personal belief.

This process may take approximately two weeks.

Individuals who receive a strongly held personal belief exemption have the opportunity to change their mind at any time and receive a COVID-19 vaccination free of charge through the Yale COVID-19 Vaccine Program.

Updated July 8, 2021

Yale Health

55 Lock Street
P.O. BOX 208237
New Haven, CT 06520-8237

Directions and Parking

Acute Care 203 432 0123
Member Services 203 432 0246

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Yale University

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COVID-19 Vaccine FAQ for Yale Students | Yale Health

Will Yale require students to be immunized against COVID-19?

Yes. Yale has determined that all students must be fully vaccinated in advance of arriving on campus for the fall semester. In the [April 20, 2021 community message](https://covid19.yale.edu/community-messages/requiring-students-be-vaccinated-against-covid-19) (<https://covid19.yale.edu/community-messages/requiring-students-be-vaccinated-against-covid-19>) from President Salovey and Provost Strobel, all undergraduate, graduate, and professional school students who plan to be on campus are required to be fully vaccinated against COVID-19 at the start of the fall 2021 semester. Additionally, students who plan to study or work on campus this summer are expected to be inoculated as soon as vaccinations are available to them.

Will Yale offer vaccinations in the fall?

[Full vaccination](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html) (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>) prior to arrival on campus is required. For those students who were unable to access vaccine in their home locations, vaccine will be available through Yale Health; however, Yale Health strongly recommends completing vaccination before arrival. Unvaccinated or partially vaccinated students will be required to quarantine on arrival, participate in required testing and potentially have other limitations on activities until fully vaccinated.

Which vaccines will be accepted?

Vaccines approved in the U.S. will be accepted, currently Johnson & Johnson (Janssen), Pfizer and Moderna. Additional vaccines may be approved in the coming months. See below for information regarding international vaccines.

How can I upload my vaccination documentation once I have been fully vaccinated?

Please upload your information to the [Yale Vaccine Portal](https://yale.medicatconnect.com/%20%20) (<https://yale.medicatconnect.com/%20%20>). Please don't submit until you have completed BOTH doses of Pfizer or Moderna or other two-dose vaccine.

Will there be exemptions to immunizations against COVID-19?

Students may request an exemption from the vaccination requirement for medical or religious reasons by submitting a waiver request available on the [Yale Vaccine Portal](https://yale.medicatconnect.com/%20%20) (<https://yale.medicatconnect.com/%20%20>). Medical waivers are not automatically granted but must be reviewed and approved by Yale Health on a case-by-case basis. Additional specialist consultation may be required by Yale Health. Religious waivers require a statement describing how immunization conflicts with the student's religious beliefs. Students granted medical or religious waivers will need to meet testing and other public health requirements that vaccinated students do not.

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COVID-19 Vaccine FAQ for Yale Students | Yale Health

I already had COVID-19. Do I still need to show proof of vaccination for in-person attendance?

Yes. Vaccination is required regardless of previous illness or test results.

Will I be able to register for classes for Fall 2021 without having been vaccinated yet?

Yes, you will be able to register for classes prior to vaccination, but you will have to provide proof of vaccination or receive an exemption to remain on campus this fall.

Will there be a full-remote/virtual option for students who are enrolled in the Fall but aren't vaccinated?

No. While there may be some remote options, Yale is planning to return to full campus activity and most classes will be offered only in-person.

For any student who wants to attend in Fall 2021 and refuses to be vaccinated, what will their options be?

Students who wish to enroll in Fall 2021 must either be vaccinated, or be granted a medical or religious waiver from vaccination. Those refusing vaccine, or who fail to meet the vaccination requirement by the determined deadline, will not be allowed to remain on campus.

What is the university's stance on international students who received a vaccine that may not be approved or authorized for use in the United States?

Recommendations for international students who have received vaccines that are not approved or authorized in the United States are based on guidance from the [Centers for Disease Control and Prevention](https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2Fclinical-considerations%2F covid-19-vaccines-us.html%23people-vaccinated-outside-us&data=04%7C01%7Cclisa.kimmel%40yale.edu%7C47687678be0148be8e2208d94608369b%7Cdd8cbebb21394df8b4114e3e87abeb5c%7C0%7C0%7C637617823365046319%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C1000&sdata=QG54YN6krzMVWqycXDdXcCpl1ADID%2Bua9SNM4C2ASjc%3D&reserved=0)

(<https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2Fclinical-considerations%2F covid-19-vaccines-us.html%23people-vaccinated-outside-us&data=04%7C01%7Cclisa.kimmel%40yale.edu%7C47687678be0148be8e2208d94608369b%7Cdd8cbebb21394df8b4114e3e87abeb5c%7C0%7C0%7C637617823365046319%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C1000&sdata=QG54YN6krzMVWqycXDdXcCpl1ADID%2Bua9SNM4C2ASjc%3D&reserved=0>) (CDC), the [World Health Organization](https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fextranet.who.int%2Fpqweb%2Fvaccines%2F covid-19-vaccines&data=04%7C01%7Cclisa.kimmel%40yale.edu%7C47687678be0148be8e2208d94608369b%7Cdd8cbebb21394df8b4114e3e87abeb5c%7C0%7C0%7C637617823365056309%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C1000&sdata=iwXatCZYJsofzmf%2F%2FYiGznrHnsm93S5wNvkx5a7wv%2)

(<https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fextranet.who.int%2Fpqweb%2Fvaccines%2F covid-19-vaccines&data=04%7C01%7Cclisa.kimmel%40yale.edu%7C47687678be0148be8e2208d94608369b%7Cdd8cbebb21394df8b4114e3e87abeb5c%7C0%7C0%7C637617823365056309%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C1000&sdata=iwXatCZYJsofzmf%2F%2FYiGznrHnsm93S5wNvkx5a7wv%2>)

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[F0%3D&reserved=0](https://yalehealth.yale.edu/covid-19-vaccination-faq-international-students-and-scholars)) and evolving data. [Read this FAQ \(https://yalehealth.yale.edu/covid-19-vaccination-faq-international-students-and-scholars\)](https://yalehealth.yale.edu/covid-19-vaccination-faq-international-students-and-scholars) for the most current information

about these recommendations, arrival timing, quarantine and testing requirements.

In the interim, please submit proof of vaccination you have received abroad to the [Yale Vaccine Portal \(https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyale.mediatconnect.com%2F%2520%2520&data=04%7C01%7Clisa.kimmell%40yale.edu%7C47687678be0148be8e2208d94608369b%7Cdd8cbabb21394df8b4114e3e87abeb5c%7C0%7C0%7C637617823365066304%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQJljoIjV2luMzliLCJBTil6Ik1haWwiLCJXVCi6Mn0%3D%7C1000&sdata=5galo9n5mYXpe%2B90FQcfmKUxBTdj%2BBtXLn9E2CbIHwo%3D&reserved=0\)](https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyale.mediatconnect.com%2F%2520%2520&data=04%7C01%7Clisa.kimmell%40yale.edu%7C47687678be0148be8e2208d94608369b%7Cdd8cbabb21394df8b4114e3e87abeb5c%7C0%7C0%7C637617823365066304%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQJljoIjV2luMzliLCJBTil6Ik1haWwiLCJXVCi6Mn0%3D%7C1000&sdata=5galo9n5mYXpe%2B90FQcfmKUxBTdj%2BBtXLn9E2CbIHwo%3D&reserved=0), even if it is not approved or authorized by the U.S. Food and Drug Administration at this point. Individuals who are not able to obtain vaccination prior to arrival for the fall semester, or whose vaccination is not recognized in the United States will be vaccinated through the Yale COVID-19 Vaccine Program upon arrival to campus. Those who have received an international vaccine may be asked to revaccinate based on CDC guidance.

You can discuss your individual situation with a member of the Student Health team by emailing yhvaccine@yale.edu (mailto:yhvaccine@yale.edu) OR immunization@yale.edu (mailto:immunization@yale.edu).

Why should I get vaccinated?

Currently available COVID-19 vaccines are all safe and effective, and studies have shown they prevent severe illness and death from the virus. See the [CDC's Frequentl Asked Questions about COVID-19 Vaccination \(https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Ffaq.html&data=04%7C01%7Clisa.kimmell%40yale.edu%7C3c0c0f2ab133404269ef08d90a8021ea%7Cdd8cbabb21394df8b4114e3e87abeb5c%7C0%7C0%7C637552367696100611%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQJljoIjV2luMzliLCJBTil6Ik1haWwiLCJXVCi6Mn0%3D%7C1000&sdata=3NWcGwAjrGmRdbpFySoGDsAPE2xint5GUolz5vxGYWA%3D&reserved=0\)](https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Ffaq.html&data=04%7C01%7Clisa.kimmell%40yale.edu%7C3c0c0f2ab133404269ef08d90a8021ea%7Cdd8cbabb21394df8b4114e3e87abeb5c%7C0%7C0%7C637552367696100611%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQJljoIjV2luMzliLCJBTil6Ik1haWwiLCJXVCi6Mn0%3D%7C1000&sdata=3NWcGwAjrGmRdbpFySoGDsAPE2xint5GUolz5vxGYWA%3D&reserved=0) for more information.

Can Yale mandate vaccines that are currently only subject to Emergency Use Authorizations?

The University's position is that Emergency Use Authorization supports having a vaccination requirement.

Why are faculty and staff not required to show proof of vaccination?

Yale strongly urges all faculty and staff to get vaccinated as soon as they can, and

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COVID-19 Vaccine FAQ for Yale Students | Yale Health

will continue to provide vaccine to all at no cost. The university's policy for faculty and staff is under active discussion but has not been finalized at this time. Faculty and staff vaccinated outside of Yale Health's vaccine site should [submit](#)

[documentation of vaccination \(https://yalehealth.yale.edu/voluntary-reporting-covid-19-vaccine-outside-yale-program\)](https://yalehealth.yale.edu/voluntary-reporting-covid-19-vaccine-outside-yale-program) once completed.

My child is only 17 but headed to Yale in the fall. Is a vaccine available?

The Pfizer vaccine may be administered to 16- and 17-year-olds. A parent or legal guardian must sign and return this [Authorization for Medical Care and Treatment for Minors form to be vaccinated at Yale.](#)

[:///C:/Users/lk253/Downloads/authorization_to_treat_minors.pdf](///C:/Users/lk253/Downloads/authorization_to_treat_minors.pdf) Each of the vaccines given emergency use authorization in the U.S. may be administered to those 18 and older

I am fully vaccinated! Do I still have to participate in the [Yale COVID-19 testing program](#) (https://covid19.yale.edu/screening)?

Students who are fully vaccinated do not need to test through the weekly, asymptomatic Yale COVID-19 testing program. However, if you have any symptoms suggestive of COVID-19, testing remains critical, as vaccine is not 100% effective and breakthrough cases can occur.

I am fully vaccinated! Do I still need to wear a face covering and watch my distance?

[Environmental Health and Safety's website \(https://ehs.yale.edu/mask-guidance\)](https://ehs.yale.edu/mask-guidance) reflects the most current mask guidance for the Yale community.

Updated August 23, 2021

Yale Health

55 Lock Street
P.O. BOX 208237
New Haven, CT 06520-8237

Directions and Parking

9/3/2021

COVID-19 Vaccine FAQ for Yale Students | Yale Health

Acute Care 203 432 0123

Member Services 203 432 0246

Hours

8:30 A.M. to 5:00 P.M.

Unless otherwise noted

See all hours

See all departments

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Patient Safety

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Accreditation

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Translation Services

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EXHIBIT 16

/ Requirements & Exemptions

Requirements & Exemptions

Requirements By Group

All Duke undergraduate, graduate and professional students must present proof of vaccination or have an approved exemption (see process below) by Monday, August 23 in order to attend classes and other campus activities during the 2021 Fall semester. Failure to do so may result in the revocation of campus access. Students should upload their proof of COVID-19 immunization for verification to [Student Health \(https://shc.duhs.duke.edu/\)](https://shc.duhs.duke.edu/). Do NOT submit documentation if you have already sent it to Student Health.

All University faculty and staff members, regardless of work location, must receive and show documentation of their completed COVID-19 vaccination by 10 a.m. on Oct. 1, 2021. University faculty and staff may apply for a medical or religious exemption, but anyone approved for an exemption will be subject to daily symptom monitoring, weekly surveillance testing, continued masking and other protocols applicable to those who have not been vaccinated.

All School of Medicine faculty and staff are required to be vaccinated against COVID-19 or receive an approved medical or religious exemption by 10 a.m. on September 21, 2021. This includes faculty and staff in clinical and basic science departments, centers, institutes, and School of Medicine administrative units. This includes all faculty and staff working on campus, in off-campus facilities, and those working remotely. More information about the exemption process and answers to frequently asked questions can be found on the [School of Medicine website. \(https://portal.dh.duke.edu/som/administration/HR/SitePages/COVID-19%20Vaccination%20Resources.aspx\)](https://portal.dh.duke.edu/som/administration/HR/SitePages/COVID-19%20Vaccination%20Resources.aspx)

All School of Nursing faculty and staff are required to be vaccinated against COVID-19 or receive an approved medical or religious exemption by 10 a.m. on Tuesday, Sept. 21, 2021. More information about the exemption process and answers to frequently asked questions can be found on the [School of Nursing website \(https://nursing.duke.edu/sites/default/files/2021-07/SON_Vaccination_Requirements_FAQ_7-22-21_final.pdf\)](https://nursing.duke.edu/sites/default/files/2021-07/SON_Vaccination_Requirements_FAQ_7-22-21_final.pdf).

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Requirements & Exemptions | COVID Vaccine | Duke

All Duke University Health System team members must receive and show documentation of their completed COVID-19 vaccination(s) by 10 a.m. on Tuesday, Sept. 21, 2021. More information about the exemption process and answers to frequently asked questions can be found on the DUHS website (<https://covid-19.dukehealth.org/vaccine-information>).

Exemptions

Students should email immunizations@duke.edu to request a medical or religious exemption form.

University faculty and staff may apply for a medical or religious exemption. (**Note:** School of Medicine and DUHS team members should follow the process described on the [Duke Health website](https://covid-19.dukehealth.org/vaccine-information) (<https://covid-19.dukehealth.org/vaccine-information>)). Individuals granted medical or religious exemptions will be subject to daily symptom monitoring, regular testing, masking while indoors and other protocols applicable to those who have not been vaccinated:

- All students who have obtained an exemption from vaccination will be required to participate in surveillance testing twice a week. Faculty and staff who have not been vaccinated will be required to participate in surveillance testing once per week.
- Anyone who has not been vaccinated, regardless of the circumstances, will be required to complete daily symptom monitoring.
- Anyone who has not been vaccinated will be required to wear a mask indoors at all times.

Applications for medical or religious exemptions should be submitted by Wednesday, August 25, 2021.

Medical Exemption

To apply for a medical exemption, have your medical provider **complete and sign this form** (</sites/default/files/Request%20for%20Medical%20Exemption%20from%20COVID-19%20Vaccine.pdf>). Submit a scanned copy of the completed form to Employee Occupational Health & Wellness at EOHWCovidVac@duke.edu (<mailto:EOHWCovidVac@duke.edu>).

Religious Exemption

To apply for a religious exemption, **complete and submit this form** (</sites/default/files/Request%20for%20Religious%20Exemption%20from%20COVID-19%20Vaccine.pdf>) to Staff and Labor Relations by email to hrrslrpolicies@duke.edu (<mailto:hrrslrpolicies@duke.edu>) or by fax to 919-681-7924.

The deadline for policy compliance is September 1, 2021.

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Requirements & Exemptions | COVID Vaccine | Duke

Outside Vaccination Reporting

If you received the COVID-19 vaccine outside of the Duke Employee/Student vaccination clinic (e.g. pharmacy, health department, other institution), please submit your completed vaccination card to [Duke Employee Health \(https://duke.qualtrics.com/jfe/form/SV_0pqJEXc139ahoi\)](https://duke.qualtrics.com/jfe/form/SV_0pqJEXc139ahoi) or [Duke Student Health \(https://shc.duhs.duke.edu/\)](https://shc.duhs.duke.edu/) so your records can be updated accordingly.

COVID Vaccine

(/)

Duke COVID-19 Employee Hotline

919-385-0429, option 1

Available daily from 8 a.m. – 6 p.m.

Have questions about the vaccine or need scheduling assistance?

Contact Employee Occupational Health & Wellness:

919-681-0509 (Monday - Friday 8 a.m. - 4:30 p.m.)

eohwcovidvac@dm.duke.edu (<mailto:eohwcovidvac@dm.duke.edu>)

[Duke University \(https://duke.edu\)](https://duke.edu)

[Working@Duke \(https://today.duke.edu/working\)](https://today.duke.edu/working)

9/1/2021

Frequently Asked Questions | COVID Vaccine | Duke

/ Frequently Asked Questions

Frequently Asked Questions

+ How do I provide documentation to Employee Health or Student Health of my COVID-19 vaccination from another provider?

+ Will all Duke community members be eligible for the vaccine?

+ Will the vaccine be mandatory for Duke community members?

+ How many doses will I need to get?

+ How will I know when I can receive the vaccine?

+ How long will the vaccine appointment take?

+ What do I need to bring with me to my vaccine appointment?

+ If I get the vaccine, do I still need to wear a mask on campus?

+ Are the COVID-19 vaccines safe?

+ Do the vaccines cause side effects?

+ Should I get the vaccine if I have allergies?

- If I had COVID-19 and recovered, should I get the vaccine?

Yes. Early findings suggest natural immunity from COVID-19 may not last long. More studies are needed. We generally recommend getting vaccinated three months after recovering from COVID-19 infection. Your natural immunity should protect you during this and it may allow non-immune people to get the vaccine sooner. There is no harm in getting vaccinated before 90 days as long as you are beyond your isolation period.

+ Are the COVID-19 vaccines safe and effective for pregnant people and their babies?

+ Should I get the vaccine if I am breastfeeding?

+ Can the COVID-19 vaccine make me infertile/sterile?

+ Is COVID-19 similar to the flu?

9/1/2021

Frequently Asked Questions | COVID Vaccine | Duke

+ Does the vaccine change my DNA?

COVID Vaccine

(/)

Duke COVID-19 Employee Hotline

919-385-0429, option 1

Available daily from 8 a.m. – 6 p.m.

Have questions about the vaccine or need scheduling assistance?

Contact Employee Occupational Health & Wellness:

919-681-0509 (Monday - Friday 8 a.m. - 4:30 p.m.)

eohwCOVIDvac@dm.duke.edu (<mailto:eohwCOVIDvac@dm.duke.edu>)

[Duke University \(https://duke.edu\)](https://duke.edu)

[Working@Duke \(https://today.duke.edu/working\)](https://today.duke.edu/working)

EXHIBIT 17

UNITED STATES DISTRICT COURT

SOUTHERN DISTRICT OF TEXAS

United States District Court
Southern District of Texas

Jennifer Bridges, *et al.*,

Plaintiffs,

versus

Houston Methodist Hospital, *et al.*,

Defendants.

§
§
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§
§
§
§
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Civil Action H-21-1774

ENTERED

June 07, 2021

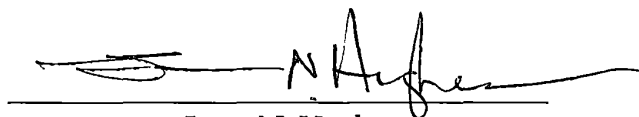
Nathan Ochsner, Clerk

Order Denying Temporary Restraint

1. Houston Methodist Hospital announced a policy requiring employees be vaccinated against COVID-19 by June 7, 2021. Jennifer Bridges and 115 other employees sued, arguing that the hospital is forcing its employees to be injected with one of the currently-available vaccines or be fired.
2. On June 4, 2021, the plaintiffs moved to enjoin the hospital from enforcing the vaccination deadline. To obtain a temporary restraining order, the plaintiffs must show: (a) substantial likelihood of success on the merits; (b) a substantial threat of immediate and irreparable harm for which it has no adequate remedy at law; (c) that greater injury will result in denying the temporary restraining order than from granting it; and (d) that a temporary restraining order will not disserve the public interest. None of these are met in this case.
3. Assuming that there is a substantial likelihood of success on the merits, the plaintiffs have an adequate remedy at law. If they are wrongfully terminated, the plaintiffs can sue the hospital on those grounds to recover monetary damages.

4. Greater injury will result from denying the temporary restraining order than from granting it, and a temporary restraining order will disserve the public interest. The public's interest in having a hospital capable of caring for patients during a pandemic far outweighs protecting the vaccination preferences of 116 employees. The plaintiffs are not just jeopardizing their own health; they are jeopardizing the health of doctors, nurses, support staff, patients, and their families.
5. The motion for temporary restraining order is denied. (6, 7)

Signed on June 4, 2021, at Houston, Texas.

A handwritten signature in black ink, appearing to read "Lynn N. Hughes", written over a horizontal line.

Lynn N. Hughes
United States District Judge

EXHIBIT 18

9/3/21, 10:13 AM

Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers | AAMC



PRESS RELEASES (/SUB-TYPE/PRESS-RELEASES) | HEALTH CARE (/TOPIC/HEALTH-CARE) | NEWS (/TOPIC/NEWS)

Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers

July 26, 2021

Groups include American Medical Association, American Nurses Association, American Academy of Pediatrics, Association of American Medical Colleges, and National Association for Home Care and Hospice

With COVID-19 case counts rising amid the spread of the Delta variant, more than 50 health care professional societies and organizations called for all health care employers to require their employees to be vaccinated against COVID-19 in a joint statement released today. These societies and organizations represent millions of workers throughout health and long-term care – from doctors and nurses to pharmacists and physician assistants, from public health workers and epidemiologists to long-term care, home care, and hospice workers.

Commentary: Mandating COVID-19 vaccination for health care workers

Ezekiel Emanuel, MD, vice provost for global initiatives at the University of Pennsylvania, and David J. Skorton, MD, AAMC president and CEO, have co-authored a commentary published in *Annals of Internal Medicine* examining the rationale for mandating COVID-19 vaccinations for health care workers.



[READ MORE](https://www.acpjournals.org/doi/10.7326/M21-3150)  ([HTTPS://WWW.ACPJOURNALS.ORG/DOI/10.7326/M21-3150](https://www.acpjournals.org/doi/10.7326/M21-3150)).

Their endorsement of mandatory COVID-19 vaccination for health care workers aims to protect the safety of patients and residents of long-term care facilities and make the health care sector a leader in COVID-19 vaccination just as cases, hospitalizations, and deaths are once again rising throughout the United States.

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Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers | AAMC

initiatives at the **University of Pennsylvania**, who organized the statement. Employer vaccine mandates are effective and lifesaving, and they are especially appropriate in health care and long-term care settings. No patient should have to worry that they could become infected by one of their care providers, and no provider should put their patient at risk.”

Although vaccination rates among health care workers have been better than that of the general population, by the end of May, [one-in-four hospital workers](https://www.webmd.com/vaccines/covid-19-vaccine/news/20210628/huge-number-of-hospital-workers)  (<https://www.webmd.com/vaccines/covid-19-vaccine/news/20210628/huge-number-of-hospital-workers>) had not been vaccinated. This leaves patients – especially unvaccinated children, the elderly, and the immunocompromised – facing a growing risk of infection as the Delta variant surges. If implemented, this mandate would cover [17 million health care workers](https://www.kff.org/other/state-indicator/total-health-care-employment/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D)  (<https://www.kff.org/other/state-indicator/total-health-care-employment/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>).

“As the number of cases, hospitalizations and deaths continue to rise due to the COVID-19 Delta variant, especially among unvaccinated persons, requiring that all health care workers who can get vaccinated receive a COVID-19 vaccine will help protect them, their patients, loved ones and others who are vulnerable and immunocompromised,” said **George M. Abraham**, MD, MPH, FACP, President, **American College of Physicians**.

“As COVID-19 variants emerge and proliferate, it’s critical that we protect everyone who lives and works in long-term care, by ensuring staff are fully vaccinated. Throughout the pandemic, long-term care providers have demonstrated their dedication, commitment and bravery in the face of unprecedented, challenging circumstances. They must heed the scientific evidence and do everything possible to deliver safe, quality care to the older adults and others they serve,” said **Katie Smith Sloan**, president and CEO, **LeadingAge**.

“As frontline providers, PAs are committed to protecting our patients and the health of the public. Receiving the vaccine is a necessary step for fulfilling this commitment. AAPA supports requiring vaccinations for health workers to keep both the public and healthcare workforce safe,” said **Jennifer M. Orozco**, MMS, PA-C, DFAAPA, president of the **American Academy of PAs**.

“Employers have a fundamental responsibility to take all reasonable measures to ensure the safety and well-being of their employees and the people they serve,” said **Sandra Leal**, PharmD, MPH, FAPhA, CDCES, president, **American Pharmacists Association**. “Due to the nature of the times we live in, this must include requiring their employees be vaccinated, to protect themselves and others from the COVID-19 virus.”

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Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers | AAMC

Elena Rios, MD, MSPH, FACP, president and CEO, National Hispanic Medical Association. Now, the most important thing health care workers can do is get the COVID-19 vaccine, setting an example of the best thing we can all do to end the pandemic.”

“Universal vaccination of health care workers is the single most important step healthcare institutions can do to stop the spread of COVID-19. It is essential for protecting the health of their workers, the safety of their patients and ultimately the health of their communities,” said **Georges C. Benjamin, MD, executive director, American Public Health Association.**

“We need to do everything possible to help children, adolescents, and their families safely emerge from the global pandemic,” said **Gabrielle A. Carlson, MD, President, American Academy of Child and Adolescent Psychiatry.** “It is imperative that those who can receive a COVID-19 vaccine do so, especially those who work in a healthcare facility where care is provided to the unvaccinated, including vulnerable children for whom a COVID-19 vaccine is not yet approved.”

“Requiring COVID-19 vaccination as a condition of employment is a powerful tool for protecting frontline workers and patients against highly contagious variants and in communities with significant numbers of unvaccinated people. Health care organizations have an opportunity to lead by example, setting a precedent for other organizations to require vaccination to safeguard the health of employees and entire communities,” said **Daniel P. McQuillen, MD, FIDSA, president-elect, Infectious Diseases Society of America.**

“The AAMC, whose members continue to provide patient care on the frontlines of this ongoing pandemic, did not come to this decision lightly,” said **David J. Skorton, MD, president and CEO of the Association of American Medical Colleges.** “Based on the large and convincing body of evidence and real-world experience of the safety and efficacy of the COVID-19 vaccines, requiring vaccinations among those serving at health care institutions is the right decision to promote the health of our patients, their families, and communities.”

“Patients with cancer need to know that their environment, including the people who care for them, is as safe as possible,” said **Everett E. Vokes, MD, FASCO, president, American Society of Clinical Oncology.** “Mandatory vaccination is entirely consistent with ASCO’s core values of evidence, care, and impact.”

The joint statement and full list of signatories is below.

Due to the recent COVID-19 surge and the availability of safe and effective vaccines, our health care organizations and societies advocate that all health care and long-term care employers require their workers to receive the COVID-19 vaccine. This is the logical fulfillment of the ethical commitment of all health care workers to put patients as well as residents of long-term care facilities first and take all steps necessary to ensure their health and well-being.

Because of highly contagious variants, including the Delta variant, and significant numbers of unvaccinated people, COVID-19 cases, hospitalizations and deaths are once again rising throughout the United States.¹ Vaccination is the primary way to put the pandemic behind us and avoid the return of stringent public health measures.

Unfortunately, many health care and long-term care personnel remain unvaccinated. As we move towards full FDA approval of the currently available vaccines, all health care workers should get vaccinated for their own health, and to protect their colleagues, families, residents of long-term care facilities and patients. This is especially necessary to protect those who are vulnerable, including unvaccinated children and the immunocompromised. Indeed, this is why many health care and long-term care organizations already require vaccinations for influenza, hepatitis B, and pertussis.

We call for all health care and long-term care employers to require their employees to be vaccinated against COVID-19.

We stand with the growing number of experts and institutions that support the requirement for universal vaccination of health workers.^{2,3} While we recognize some workers cannot be vaccinated because of identified medical reasons and should be exempted from a mandate, they constitute a small minority of all workers. Employers should consider any applicable state laws on a case-by-case basis.

Existing COVID-19 vaccine mandates have proven effective.^{4,5} Simultaneously, we recognize the historical mistrust of health care institutions, including among many in our own health care workforce. We must continue to address workers' concerns, engage with marginalized populations, and work with trusted messengers to improve vaccine acceptance.

As the health care community leads the way in requiring vaccines for our employees, we hope all other employers across the country will follow our lead and implement effective policies to encourage vaccination. The health and safety of U.S. workers, families, communities, and the nation depends on it.

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Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers | AAMC

- Academy of Managed Care Pharmacy
- American Academy of Ambulatory Care Nursing
- American Academy of Child and Adolescent Psychiatry
- American Academy of Family Physicians (AAFP)
- American Academy of Nursing
- American Academy of Ophthalmology
- American Academy of PAs (AAPA)
- American Academy of Pediatrics (AAP)
- American Association of Allergy, Asthma & Immunology
- American Association of Colleges of Pharmacy
- American Association of Clinical Endocrinology
- American Association of Neuroscience Nurses
- American College of Clinical Pharmacy (ACCP)
- American College of Physicians (ACP)
- American College of Preventive Medicine
- American College of Surgeons (ACS)
- American Epilepsy Society
- American Medical Association (AMA)
- American Nursing Association (ANA)
- American Pharmacist Association (APhA)
- American Psychiatric Association (APA)
- American Public Health Association (APHA)
- American Society for Clinical Pathology
- American Society for Hematology (ASH)
- American Society for Radiation Oncology (ASTRO)
- American Society of Health-System Pharmacists (ASHP)
- American Society of Nephrology
- American Thoracic Society
- Association for Clinical Oncology (ASCO)

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- Council of Medical Specialty Societies (CMSS)
- HIV Medicine Association
- Infectious Diseases Society of America (IDSA)
- LeadingAge
- National Association for Home Care & Hospice
- National Association of Indian Nurses of America
- National Association of Pediatric Nurse Practitioners
- National Council of State Boards of Nursing (NCSBN)
- National Hispanic Medical Association (NHMA)
- National League for Nursing
- National Medical Association
- National Pharmaceutical Association (NPhA)
- Nurses Who Vaccinate
- Organization for Associate Degree Nursing (OADN)
- Pediatric Infectious Diseases Society (PIDS)
- Philippine Nurses Association of America, Inc (PNAA)
- Society of Gynecologic Oncology
- Society for Healthcare Epidemiology of America (SHEA)
- Society of Hospital Medicine
- Society of Interventional Radiology
- Texas Nurses Association
- The John A. Hartford Foundation
- Transcultural Nursing Society
- Virgin Islands State Nurses Association
- Wound, Ostomy, and Continence Nurses Society

1. Centers for Disease Control and Prevention. Covid Data Tracker Weekly Review. July 16, 2021. <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html>  (<https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html>) [Accessed 22 July 2021].

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Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers | AAMC

Healthcare Personnel. *Infection Control & Hospital Epidemiology*, 1-46.

doi:10.1017/ice.2021.322

3. American Hospital Association. AHA Policy Statement on Mandatory COVID-19 Vaccination of Health Care Personnel. July 21, 2021. <https://www.aha.org/public-comments/2021-07-21-aha-policy-statement-mandatory-covid-19-vaccination-health-care> [■\(https://www.aha.org/public-comments/2021-07-21-aha-policy-statement-mandatory-covid-19-vaccination-health-care\)](https://www.aha.org/public-comments/2021-07-21-aha-policy-statement-mandatory-covid-19-vaccination-health-care)
4. Bacon J. 'Condition of employment': Hospitals in DC, across the nation follow Houston Methodist in requiring vaccination for workers. *USA Today*. Available from: <https://www.usatoday.com/story/news/health/2021/06/10/dc-hospitals-others-follow-houston-methodist-requiring-vaccination/7633481002/> [■](https://www.usatoday.com/story/news/health/2021/06/10/dc-hospitals-others-follow-houston-methodist-requiring-vaccination/7633481002/) [\(https://www.usatoday.com/story/news/health/2021/06/10/dc-hospitals-others-follow-houston-methodist-requiring-vaccination/7633481002/\)](https://www.usatoday.com/story/news/health/2021/06/10/dc-hospitals-others-follow-houston-methodist-requiring-vaccination/7633481002/) [Accessed 22 July 2021].
5. Paulin E. More Nursing Homes Are Requiring Staff COVID-19 Vaccinations. *AARP*. Available from: <https://www.aarp.org/caregiving/health/info-2021/nursing-homes-covid-vaccine-mandate.html> [■\(https://www.aarp.org/caregiving/health/info-2021/nursing-homes-covid-vaccine-mandate.html\)](https://www.aarp.org/caregiving/health/info-2021/nursing-homes-covid-vaccine-mandate.html) [Accessed 22 July 2021].

The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to transforming health through medical education, health care, medical research, and community collaborations. Its members are all 155 accredited U.S. and 17 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools and teaching hospitals and the millions of individuals employed across academic medicine, including more than 186,000 full-time faculty members, 94,000 medical students, 145,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences.

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Major Health Care Professional Organizations Call for COVID-19 Vaccine Mandates for All Health Workers | AAMC



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EXHIBIT 19

Navigation bar with the following elements from left to right: a hamburger menu icon, the AMA logo, a "Join / Renew" button, a search icon, and a user profile icon.

ETHICS

Routine Universal Immunization of Physicians

Code of Medical Ethics Opinion 8.7

As professionals committed to promoting the welfare of individual patients and the health of the public and to safeguarding their own and their colleagues' well-being, physicians have an ethical responsibility to encourage patients to accept immunization when the patient can do so safely, and to take appropriate measures in their own practice to prevent the spread of infectious disease in health care settings. Conscientious participation in routine infection control practices, such as hand washing and respiratory precautions is a basic expectation of the profession. In some situations, however, routine infection control is not sufficient to protect the interests of patients, the public, and fellow health care workers.

In the context of a highly transmissible disease that poses significant medical risk for vulnerable patients or colleagues, or threatens the availability of the health care workforce, particularly a disease that has potential to become epidemic or pandemic, and for which there is an available, safe, and effective vaccine, physicians have a responsibility to accept immunization absent a recognized medical contraindication or when a specific vaccine would pose a significant risk to the physician's patients.

Physicians who are not or cannot be immunized have a responsibility to voluntarily take appropriate action to protect patients, fellow health care workers and others. They must adjust their practice activities in keeping with decisions of the medical staff, institutional policy, or public health policy, including refraining from direct patient contact when appropriate.

Physician practices and health care institutions have a responsibility to proactively develop policies and procedures for responding to epidemic or pandemic disease with input from practicing physicians, institutional leadership, and appropriate specialists. Such policies and procedures should include robust infection control practices, provision and required use of appropriate protective equipment, and a process for making appropriate immunization readily available to staff. During outbreaks of vaccine-preventable disease for which there is a safe, effective vaccine, institutions' responsibility may extend to requiring immunization of staff. Physician practices and health care institutions have a further responsibility to limit patient and staff exposure to individuals who are not immunized, which may include requiring unimmunized individuals to refrain from direct patient contact.

AMA Principles of Medical Ethics: I, II

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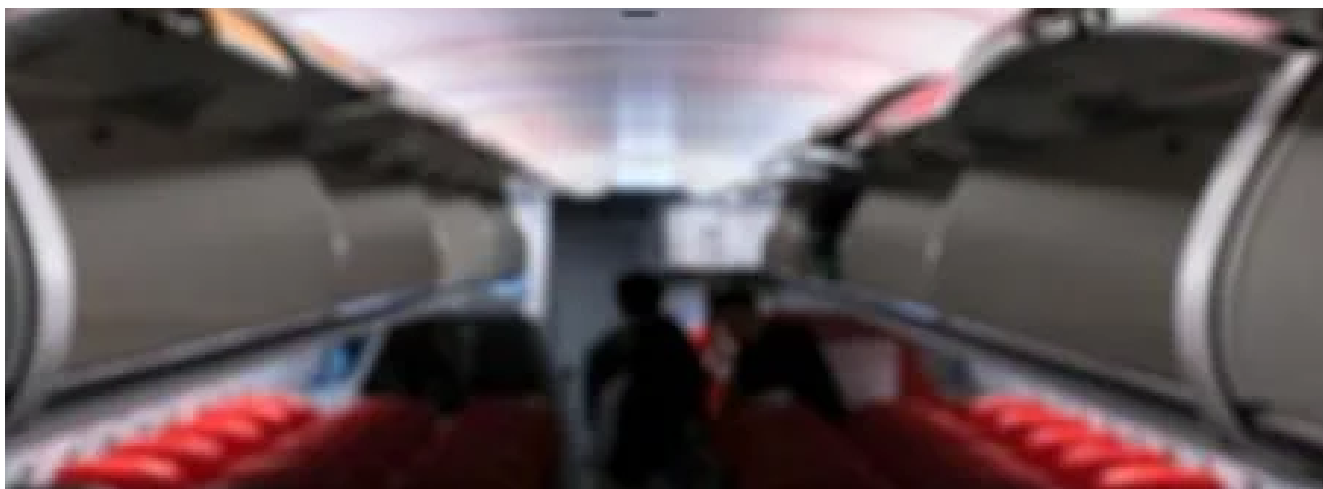
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EXHIBIT 20



ETHICS

Do physicians have a responsibility to be vaccinated?

The availability of COVID-19 vaccines under an Emergency Use Authorization from the FDA brings into sharp relief the question whether physicians have an ethical responsibility to accept vaccination. Guidance in the *AMA Code of Medical Ethics* indicates that they do.

Read the latest on COVID-19 vaccines

Get reliable information on developments in the authorization, distribution and administration of COVID-19 vaccines.

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[Opinion 8.7](#), “Routine Universal Immunization of Physicians,” provides that in general when a safe, effective vaccine is available physicians have a responsibility to accept immunization in the interest of protecting their patients, their colleagues, and the community. It is part of their overall responsibility in responding to public health crises as well ([Opinion 8.4](#), Ethical Use of Quarantine and Isolation). Further, accepting vaccination themselves is also important to physicians’ role as educators and role models for responsible public health practices.

The responsibility to be vaccinated is not absolute. However, as the recently adopted [report](#) by AMA’s Council on Ethical and Judicial Affairs notes, the more readily transmissible the disease and the greater the risk to patients and others with whom the physician comes into contact relative to risks of immunization to the physician, the stronger the duty to accept immunization. Physicians should not be required to accept immunization with a novel agent until and unless there is a body of scientifically well-regarded evidence of safety and efficacy.

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Physicians who decline to be vaccinated, for whatever reason, must still fulfill their fundamental public health responsibility, however, by voluntarily taking other measures to protect themselves and those to whom they may transmit a vaccine-preventable disease. This includes adhering rigorously to appropriate infection control procedures, the policies of their institutions, and prevailing public health policy—up to and including refraining from patient contact when appropriate.

Opinion 8.7 also addresses the responsibility of health care institutions to protect patients and personnel—for example, by having well-considered policies for responding to public health emergencies, instituting robust infection control practices, and providing and requiring use of appropriate personal protective equipment. During outbreaks of infectious disease, this responsibility may extend to requiring immunization of staff and limiting patient and staff exposure to individuals who are not immunized and could include prohibiting nonimmunized individuals from having direct contact with patients.

Additional ethics guidance in a pandemic

The AMA offers an overview of [foundational guidance](#) regarding medical ethics for health care professionals and institutions responding to the COVID-19 pandemic.



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EXHIBIT 21



COVID-19 Pandemic Guidance Document

THE ROLE OF THE PSYCHIATRIST IN THE EQUITABLE DISTRIBUTION OF THE COVID-19 VACCINE

Prepared by the APA Committee on Psychiatric Dimensions of Disaster, Committee on Integrated Care, Council on Communications, Council on Minority Mental Health and Health Disparities, and Council on Healthcare Systems and Financing

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THE ROLE OF THE PSYCHIATRIST IN THE EQUITABLE DISTRIBUTION OF THE COVID-19 VACCINE

People with substance use disorders (SUD) and serious mental illness (SMI) are not only at an increased risk of contracting COVID-19 but are also more likely to be hospitalized and experience serious complications, including death. Despite obvious benefit to these individuals and their communities in preventing the spread of the disease, low socioeconomic status, reduced access to medical care, and a historically well-founded mistrust in medical institutions create significant barriers to this vulnerable population receiving the vaccine. Psychiatrists are uniquely positioned to address many of these public health challenges and ensure equitable access to the COVID-19 vaccine. Psychiatrists should play an important role supporting healthcare systems and other entities within the community to develop and deliver culturally and contextually relevant public health messages to help overcome vaccine hesitancy.

- Why prioritize vaccinations for individuals with SUD and SMI?
 - People with SUD and SMI are likely to have comorbid, high-risk physical illness, overcrowded living conditions, other health risk factors, including smoking and reduced access to medical care, all of which lead to higher rates of acquiring infection, transmitting infection to others, as well as severe morbidity and mortality due to COVID-19.
 - Historically these populations have had limited access to preventative care and vaccinations, foreshadowing inequitable distribution of COVID-19 vaccines.

- What are the barriers to vaccination?
 - Low socioeconomic status limits access to transportation and technology to reach vaccine administration sites and ensure patients receive second doses. Housing and food insecurity create competing priorities of higher-order needs.
 - Mistrust and misinformation fuels paranoia and anxieties correlated with vaccine hesitancy and avoidance.
 - Information must be shared in a way that is appropriate for a patient's language, cultural, and educational background.

- How can psychiatrists educate their patients about COVID-19 vaccines?
 - Psychiatrists frequently serve as the single, trusted point of contact between people with mental illness and the general medical system.
 - Psychiatrists should actively engage with their patients around this topic, discuss vaccine-related concerns, and disseminate accurate information.
 - Psychiatrists can assist primary care and public health officials in determining an individual's decisional capacity to provide informed consent for a vaccination.
 - Psychiatrists should serve as 'vaccine ambassadors' promoting and modeling vaccine uptake.

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- Where can patients with SMI or SUD access COVID-19 vaccinations?
 - While CDC has released guidance, every state has its own plan for prioritizing eligible populations and disseminating vaccines. Many patients with SMI or SUD will fall into high priority groups due to medical comorbidity or social risk factors such as homelessness.
 - Psychiatrists should help patients to identify locations where they can receive vaccines; these may include community mental health centers, inpatient or residential facilities, primary care clinics, public health clinics, or local pharmacies.
 - Because all currently approved vaccines require a two-dose schedule, it is important to work with patients to ensure that they receive both doses to be fully protected against infection.

- How can psychiatrists and other behavioral health providers receive COVID-19 vaccines?
 - Because each state will have different mechanisms for prioritizing vaccine distribution, members should reach out to their employer, primary care provider, or local public health agency to learn about options.
 - Members may also reach out to their District Branch for help with advocacy and development of partnerships with other medical societies and organizations.
 - The American Psychiatric Association has joined other professional and advocacy groups in calling on the Department of Health and Human Services to issue guidance advising states to include mental health and addiction treatment providers, as well as patients in high-risk settings, to be included as priority groups for COVID-19 vaccines.

COVID-19 Vaccine Prioritization

PHASE 1	PHASE 1A	Healthcare personnel and long-term facility residents.
	PHASE 1B	≥ 75 years of age and frontline essential workers.
	PHASE 1C	Persons aged 65-74 years, persons aged 16-64 years of age with high-risk medical conditions, and other essential workers.
PHASE 2		All persons age ≥ 16 years not already recommended for vaccination in Phases 1a, 1b, 1c.
PHASE 3		Young adults and children; workers in industries important to the functioning of society.
PHASE 4		All other individuals interested in receiving the vaccine.

Source: Dooling K, Marin M, Wallace M, ET al. The Advisory Committee on Immunization Practices' Updated Interim Recommendation for Allocation of COVID-19 Vaccine - United States, December 2020. MMWR Morb Mortal Wkly Rep 2021;69:1657-1660. DOI: <http://dx.doi.org/10.15585/mmwr.mm695152e2>

*This is guidance for states, but states may prioritize populations differently. Please check with your state.

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