After COVID-19 Vaccination: FAQs

For the following guidelines, *fully vaccinated* is defined as greater 14 days following the second dose in a 2-dose COVID-19 vaccine series or greater than 14 days following receipt of one dose of a single-dose COVID-19 vaccine.

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Do fully immunized, asymptomatic individuals who are involved in a COVID-19 close contact (including household) exposure need to stay home from work?

No, but the exposed employee needs to adhere to the following guidance:

- Wear a procedural/surgical mask at all times while at VUMC.
- Do not eat/drink around others.
- Do not work with immunosuppressed patients (specifically patients who are so immunocompromised, they require care on our hem-onc units [10T3, 11N, 6A] that have a special protective environment).
- Monitor for symptoms of active COVID-19 infection and get tested if you become symptomatic.
- Quarantine at home when not at work and, if possible, stay away from the infected household contact.
- We will test you at day 7 after your household contact’s positive test and, if your test is positive, you will need to stay home from work.

If fully immunized individuals develop clinical symptoms associated with COVID-19, do they need to undergo COVID-19 testing and undergo isolation?

Yes. If you are fully vaccinated and you develop symptoms consistent with COVID-19, you should be tested and isolate while awaiting the results as, although it is uncommon, even fully vaccinated persons can develop COVID-19 infection.

Do fully immunized individuals need to undergo daily temperature/symptom screening when they enter VUMC?

Yes, such screening will still be necessary as per CDC guidelines.

Will there be any alterations in our visitor policy for fully immunized visitors or patients (such as able to allow more visitors)?

At this time, our visitor policy will not change based on visitor or patient vaccination status.

Do fully immunized patients being admitted to VUMC need testing for COVID-19?

Yes. All adult and pediatric admitted patients should continue to be tested for COVID-19 within 72 hours of admission.

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*Criteria for “Severe Immunocompromise:” Primary immune deficiency (e.g. Common Variable Immune Deficiency), HIV infection with CD4 count ≤200, Solid organ or stem cell transplant, Chemotherapy in the past year, Significant immunosuppressant use, and receipt of ≥20 mg/day prednisone (or equivalent) for ≥14 days.*

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Department of Infection Prevention – Resource
After COVID-19 Vaccination: FAQs

Do fully immunized asymptomatic patients with a planned procedure require pre-procedure testing for COVID-19?

Yes

If someone developed a strong post-vaccination immune response (based on feeling poorly 1-2 days after vaccination), will they be expected to react this way every time they come into contact with COVID-19?

No, because the amount of spike protein in the vaccine is much greater than the amount of spike protein faced with initial natural virus exposure.

Once fully vaccinated for COVID-19, can we meet in larger group gatherings with other fully vaccinated people?

No, as per CDC guidelines, we will still institute group gathering restrictions until further data are available about COVID-19 transmission post-vaccination.

If a person has side effects to the first COVID-19 vaccination, is there a role for pretreatment (such as a short course of steroids or antihistamines) before the second vaccine?

It is appropriate in this situation to take an anti-pyretic or anti-inflammatory medication (such as acetaminophen or ibuprofen) after vaccination before onset of symptoms. You should not, however, take medications like steroids for the sole purpose of preventing the vaccine side effects.