



THE ASSISTANT SECRETARY OF DEFENSE

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HEALTH AFFAIRS

MEMORANDUM FOR: ASSISTANT SECRETARY OF THE ARMY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER
AND RESERVE AFFAIRS)
DIRECTOR, JOINT STAFF
DIRECTOR, DEFENSE HEALTH AGENCY

SUBJECT: Co-Administration of Coronavirus Disease 2019 Vaccines with Other Vaccines

The vaccines currently available for use for coronavirus disease 2019 (COVID-19) are authorized under an emergency use authorization (EUA) from the U.S. Food and Drug Administration. Consistent with current Department of Defense (DoD) policy, as outlined in DoD Instruction (DoDI) 6205.02, "DoD Immunization Program," dated July 23, 2019, all DoD personnel will be offered immunizations in accordance with recommendations from the Centers for Disease Control and Prevention (CDC) and its Advisory Committee on Immunization Practices (ACIP).

The CDC ACIP, on May 14, 2021, published revised guidance regarding approaches on co-administering the currently authorized COVID-19 vaccines and other vaccines ("Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States," <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>). The COVID-19 vaccines were previously recommended by the CDC ACIP to be administered alone, with a minimum interval of 14 days before or after administration of any other vaccines. The new CDC ACIP guidance is that COVID-19 vaccines and other vaccines may now be administered without regard to timing, noting that substantial data have now been collected regarding the safety of COVID-19 vaccines currently authorized for emergency use by the FDA (Attachment 1). The CDC ACIP also noted that, although data are not available for COVID-19 vaccines administered simultaneously with other vaccines, extensive experience with non-COVID-19 vaccines has demonstrated that immunogenicity and adverse event profiles are generally similar when vaccines are administered simultaneously, as when they are administered alone.

The Joint Preventive Medicine Policy Group (JPMPG) reviewed the recommendations made by the CDC ACIP with regards to co-administration of COVID-19 vaccines. The JPMPG's recommendations were as follows:

- The authorized COVID-19 vaccine products (e.g., Moderna, Pfizer-BioNTech, and Johnson & Johnson/Janssen vaccines) may now be co-administered with other vaccines without regard to timing. These authorized COVID-19 vaccines

may be administered either simultaneously, or within any other time interval of other vaccines, to include co-administration within 14 days of other vaccines.

- It is currently unknown whether reactogenicity of COVID-19 vaccine is increased with co-administration, including with other vaccines known to be more reactogenic, such as adjuvanted or live vaccines. When deciding whether to administer COVID-19 vaccine with other adjuvanted and/or live vaccines, providers should consider if the patient is behind, or at risk of becoming behind on recommended vaccines, the patient's risk of vaccine-preventable disease, and the reactogenicity profiles of the vaccines considered for co-administration.
- Prior to co-administration, patients will be advised of the above, reminded that vaccination with a FDA emergency use authorized COVID-19 vaccination is voluntary, and will provide written consent for co-administrations. Requests by vaccine recipients to receive EUA COVID-19 vaccination separate from other vaccinations must be accommodated.
- The administration of the COVID-19 vaccine remains under the requirements of the EUA as granted by the FDA and the guidelines outlined in the DoDI 6200.02, "Application of Food and Drug Administration (FDA) Rules to Department of Defense Force Health Protection Programs," dated February 27, 2008. At this time, receipt of the COVID-19 vaccine remains voluntary, regardless of whether the COVID-19 vaccine is administered alone, or co-administered with other vaccines.
- Providers are reminded to continue to adhere to all general best practice guidelines for immunizations ("General Best Practice Guidelines for Immunization: Best Practices Guidance of the Advisory Committee on Immunization Practices (ACIP)," <https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf>).

Evolving information on COVID-19 vaccines will continue to be closely evaluated by public health and clinical experts to inform the above recommendations. Recommendations on concomitant vaccination may change based on safety or effectiveness concerns, or on published guidelines from the CDC ACIP, the FDA, and/or vaccine manufacturers.

My point of contact for this memorandum is COL Douglas Badzik. COL Badzik may be reached at douglas.a.badzik.mil@mail.mil or at (703) 681-8457.

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Acting

Attachments:
As stated

cc:
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force