Vaccinator Provider's Name:

## Moderna COVID-19 Vaccine EXAMPLE Competency Exam

*Refer to* the EUA Fact Sheet for Healthcare Providers for questions 1-20: 1. According to the Emergency Use Authorization (EUA), the Moderna COVID-19 vaccine can be used in the following individuals: a. 6 months & older b. 12 years & older c. 16 years & older d. 18 years & older 2. NON-THAWED and unpunctured multiple-dose vials should be protected from light and stored at: **a.** -80°C to -60°C **b.** -60°C to -20°C **c.** -50°C to -15°C **d.** 2°C to 8°C 3. The vaccine can be thawed in the REFRIGERATOR (2°C to 8°C) for \_\_\_\_\_ (depending on vial size) and safely stored for up to prior to first use. When ready to administer, let the vial stand at room temperature for 15 minutes. a. 1 to 2 hours; 12 hours b. 2.5 to 3 hours; 30 days c. 1 to 2 hours; 5 days d. 2 to 3 hours; 6 hours 4. Alternatively, the vaccine can be thawed at ROOM TEMP (15°C to 25°C) for\_\_\_\_\_before administering. d. 6 hours a. 30 minutes **b.** 1 to 1.5 hours **c.** 3 to 4 hours 5. Unpunctured vials may be stored between 8°C to 25°C for up to: **c.** 12 hours **d.** 24 hours a. 2 hours **b.** 6 hours 6. After the first dose has been drawn, the vial should be stored between \_\_\_\_\_\_and discarded after \_\_\_\_\_\_. a. -80°C to -60°C; 6 hours b. -80°C to -60°C; 12 hours c. 2°C to 25°C; 6 hours d. 2°C to 25°C; 12 hours 7. The following are appropriate ways to transport vaccine according to the EUA: **a.** -50°C to -15°C **b.** 2°C to 8°C (up to 12 hours; do not refreeze) **c.** Both (a) and (b) are correct 8. The primary series is given as a \_\_\_\_\_\_ series with the 2<sup>nd</sup> dose ideally given on day \_\_\_\_\_ **b.** 2-dose: 28 **c.** 3-dose; 14 **d.** 1-dose: 21 **a.** 2-dose; 21 9. The vaccine should be given intramuscularly at what dose? **a.** 0.5mL for *primary* series **b.** 0.5mL for *additional* dose (i.e., mod-severely immunocompromised) **c.** 0.25mL for *booster* dose **d.** All are correct 10. True/False It is encouraged to interchange with other COVID-19 vaccines to finish the primary series. 11. True/False If a full dose cannot be drawn from a single vial, it is ok to pool vaccine from other vials. 12. True/False After the first dose is withdrawn, record date and time immediately on the vial. 13. True/False This vaccine must be diluted prior to administration. 14. True/False Before drawing up a dose of the vaccine, vigorously shake the vial to properly mix the product. 15. True/False Once thawed, the vaccine should not be refrozen. 16. True/False Non-thawed and unopened vials can be stored on dry ice or below -50°C. 17. True/False Do not puncture the vial stopper more than 20 times. 18. Regarding the "Fact Sheet for Recipients and Caregivers", the vaccination provider MUST: **a.** Provide a copy of the Fact Sheet **b.** Direct the recipient/caregiver to www.modernatx.com/covid19vaccine-eua to obtain the Fact Sheet **c.** Any of the above are correct **d.** None of the above; providing the Fact Sheet is NOT Required 19. The vaccination provider is responsible for mandatory reporting of the following that occur postadministration of this vaccine to the Vaccine Adverse Event Reporting System (VAERS): Vaccine administration errors, even if no adverse event occurred **b.** Serious adverse events (life-threatening, death, hospitalization, etc.) c. Cases of Multisystem Inflammatory Syndrome (MIS) in adults d. Case of COVID-19 that result in hospitalization or death

e. All of the above are correct

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#### 20. The vaccination provider must communicate to the recipient/caregiver information consistent with the "Fact Sheet for Recipients and Caregivers" prior to vaccine administration, including:

- a. FDA has authorized the emergency use of the vaccine, which is not a fully licensed vaccine
- **b.** The recipient or caregiver has the option to accept or refuse the vaccine
- **c.** The significant known/potential risks and benefits of the vaccine, and the extent to which such risks and benefits are unknown
- d. Information about the available alternative vaccines and the risk and benefits of those alternatives
- **e.** All of the above are correct

# Answers to questions 21-28 can be found on the CDC website regarding Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the US by clicking <u>here</u>:

- **21. True/False** Patients considered moderately to severely immunocompromised per CDC should be offered an additional dose (i.e., 3<sup>rd</sup> dose) of this vaccine at least 28 days after completing the series.
- **22. True/False** Patients who are immunocompromised, pregnant, breast-feeding, or have history of a resolved COVID-19 infection can generally be offered this COVID vaccine.
- **23. True/False** Patients who are currently on home isolation with suspected or confirmed COVID should come to the clinic to get vaccinated during their quarantine period.
- **24. True/False** An unvaccinated patient just completed home isolation protocol due to resolved COVID-19 infection. However, the patient must wait at least 90 days before receiving the vaccine.
- **25. True/False** Patients >18 years of age that are fully vaccinated with Moderna may receive a heterologous booster dose at least 5 months after the 2<sup>nd</sup> dose of their primary series.
- 26. What is the <u>minimum</u> interval for the second dose of the vaccine to be considered as "valid"?
  a. 17 days
  b. 21 days
  c. 24 days
  d. 28 days
- 27. Which of the following patients need to be observed for at least 30 minutes post-vaccination (versus the standard 15 minutes) to monitor for the occurrence of immediate adverse reactions?
  - **a.** History of an immediate allergic reaction of any severity to non-COVID-19 vaccines or injectables
  - **b.** History of anaphylaxis due to <u>any</u> cause (unrelated to COVID vaccine components)
  - **c.** History of immediate/severe allergic reaction to polyethylene glycol (PEG)
  - d. Both (a) and (b) are correct answer (c) would be a contraindication to receiving COVID vaccine
  - e. All of the above are correct

### 28. Which of the following scenarios would be a CONTRAINDICATION to receiving the vaccine?

- a. 32-year male with history of anaphylaxis to amoxicillin for acute sinusitis
- **b.** 67-year old male with history of anaphylaxis following injectable promethazine for nausea
- **c.** 42-year old female with history of anaphylaxis to polyethylene glycol (PEG) when preparing for a colonoscopy procedure
- d. 86-year old female with history of anaphylaxis following a bee sting

### Vaccine Provider's Printed Name

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