



Lee A. Norman, MD, MHS, MBA, Secretary
COVID-19 Webinar Series Welcome
June 3, 2021



Farah S. Ahmed, MPH, PhD, State Epidemiologist
COVID-19 Situation Update
June 3, 2021



COVID-19: Situation Around The World

Last Updated at (M/D/YYYY)
6/2/2021, 5:24 PM

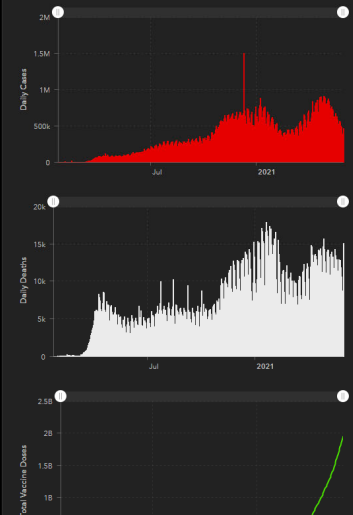
Cases
171,471,117

Deaths
3,686,684

Vaccine Doses Administered
1,967,867,334

Cases and Deaths by Country/Region/Sovereignty

33,304,186	595,777
US	
28,307,832	335,102
India	
16,720,081	467,706
Brazil	
5,739,991	109,841
France	
5,263,697	47,768
Turkey	
5,031,583	120,217
Russia	
4,510,526	128,057
United Kingdom	
4,223,200	126,283
Italy	
3,817,139	78,733
Argentina	
3,698,004	88,852
Germany	
3,487,742	80,049
Spain	
3,459,422	89,808
Colombia	
3,395,443	80,488
Iran	



As of 6-2-2021. Available at

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

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Global Map: <https://www.cdc.gov/coronavirus/2019-ncov/locations-confirmed-cases.html>.

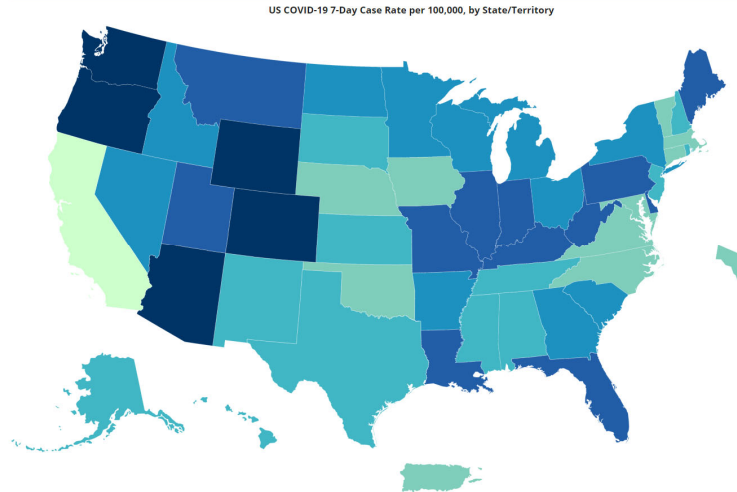
Last week, we had 168 million cases around the world and almost 3.5 million deaths.

This week, there are 171,471,117 cases and we have 3,686,684 deaths around the world.



COVID-19: Situation in the US

- Total cases: 33,113,930



As of 6-2-2021. Available at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>

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Last week in the US:

Total cases: 32,994,369 (almost 33 million)

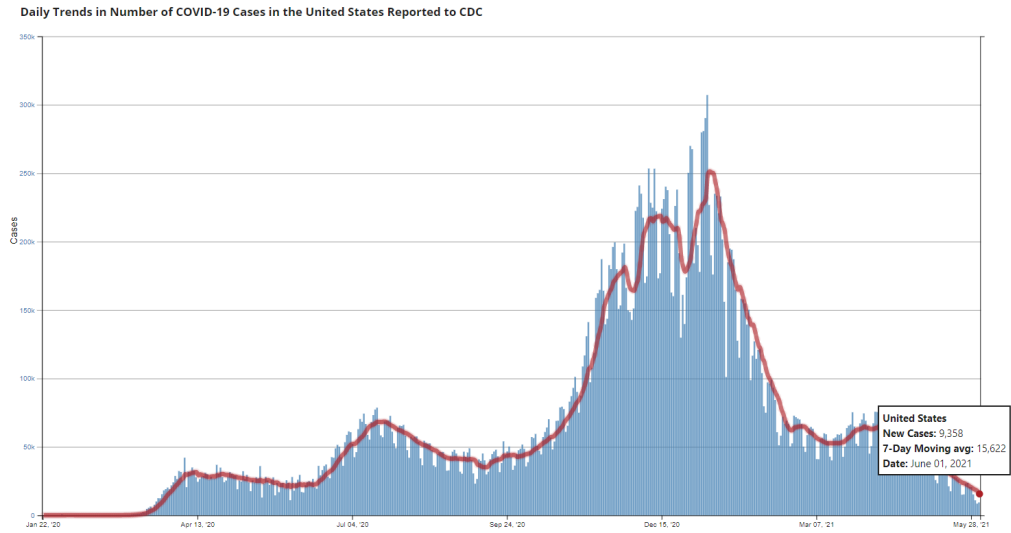
As of yesterday

This week:

Total cases: 33,113,930



COVID-19: Situation in the US



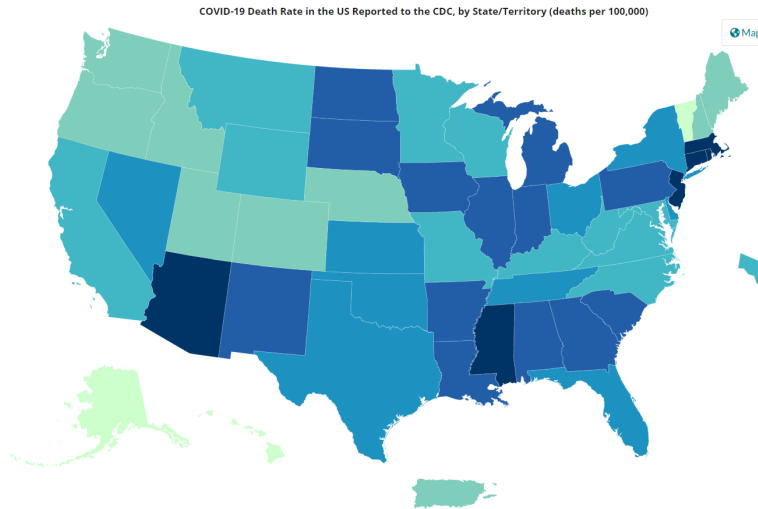
As of 6-2-2021. Available at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>

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In the US, you can see that we are averaging about 15,600 new cases each day according to the 7-day average. That is down from 22,000 from the previous week.

COVID-19: Situation in the US

- Total deaths: 592,232



As of 6-2-2021. Available at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>

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Last week in the US:

Total deaths: 588,421 (over 588,000)

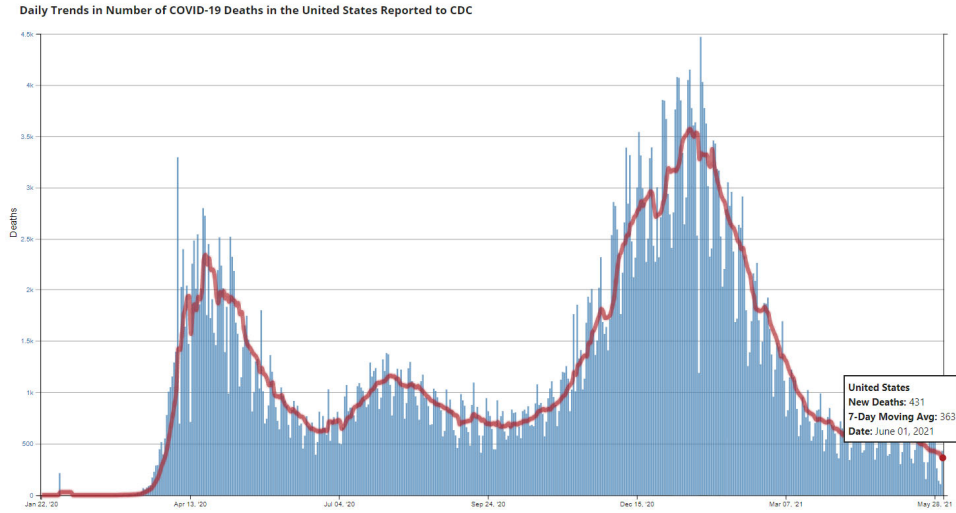
As of yesterday

This week:

Total deaths: 592,232



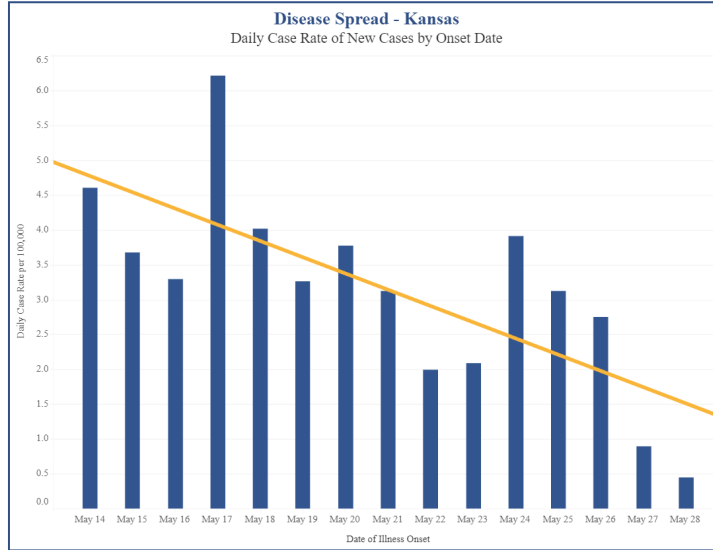
COVID-19: Situation in the US



As of 6-2-2021. Available at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>

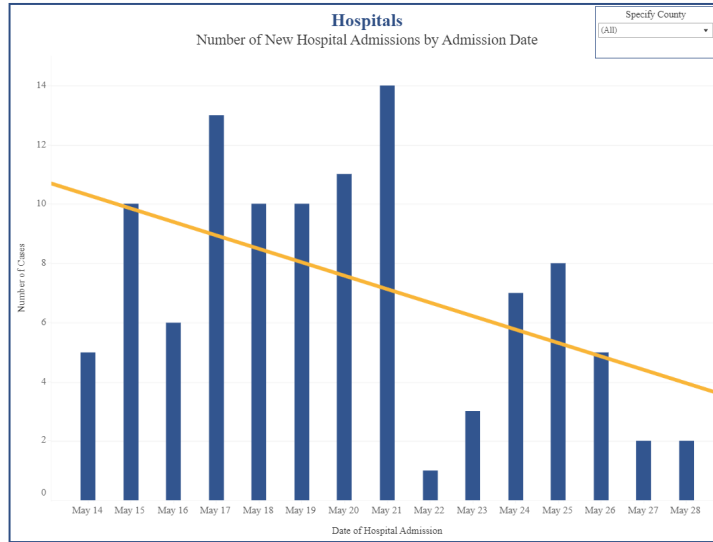
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The 7-day moving average daily death trend in the United States is about 360 deaths per day which is lower than 435 last week.



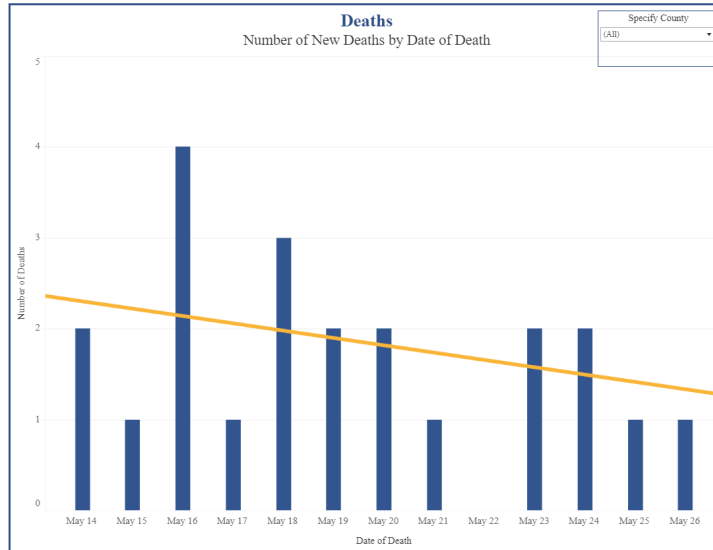
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Moving on to KS specific data. For our first Disease Spread metric, which is the daily rate of new cases, the trend line last week was decreasing and that continues this week.



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For hospitalizations, the trend last week was decreasing and that continues this week.



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And for deaths, last week the trend was decreasing and this week that continues.



COVID-19: Situation in Kansas

COVID-19 Cases	Hospitalizations	Statewide Deaths	MIS-C Cases
314,523	10,776	5,080	15

Data are preliminary and subject to quality improvement and quality assurance validation.
MIS-C: Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19.

Last updated: 6/02/2021 at 9:00 AM. There were 526 new cases, 4 new death, and 54 new hospitalizations reported since Friday, 5/28/2021.

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As of yesterday, we had 314,523 cases (which is an increase of 803 cases since last week) and 5,080 deaths statewide (that's an increase of 13 deaths since last week).

There were 526 new cases and 4 new deaths reported from Friday 5/28 to Wednesday 6/2 (no update on Memorial Day Monday).



COVID-19: Situation in Kansas: Outbreaks

Last updated: 6/02/2021 at 9:00 AM. Cluster Summary data is updated every Wednesday.

Active COVID-19 Clusters			
Clusters	Cases	Hospitalizations	Deaths
46	720	18	14

All COVID-19 Clusters			
Clusters	Cases	Hospitalizations	Deaths
2,093	39,278	1,971	2,126

- 39,278 outbreak-related cases/314,523 cases (12.5%)
- 1,971 outbreak-related hospitalizations/10,776 total hospitalizations (18.3%)
- 2,126 outbreak-related deaths/5,080 total deaths (41.9%)

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Moving on to outbreaks:

As of late Tuesday night, we had 2,093 outbreaks across the state; This week we have 46 active clusters which is down from 49 last week.



Our percentage of outbreak related cases is 12.5%, outbreak-related hospitalizations is about 18.3% and outbreak-related deaths is about 41.9%.



COVID-19: Situation in Kansas: Outbreaks

COVID-19 Cluster Cases by Type

Type	Clusters	Cases	Hospitalizations	Deaths
College or University	1.0	19.0	0.0	0.0
Corrections	3.0	268.0	0.0	1.0
Daycare	1.0	3.0	0.0	0.0
Government	1.0	11.0	0.0	0.0
Group Living	2.0	16.0	3.0	2.0
Healthcare	1.0	3.0	0.0	0.0
Hospital/clinic	1.0	2.0	1.0	0.0
Long Term Care Facility	6.0	57.0	5.0	7.0
Private Business	22.0	273.0	9.0	4.0
Private Event	1.0	5.0	0.0	0.0
Religious Gathering	1.0	10.0	0.0	0.0
School	4.0	44.0	0.0	0.0
Sports	2.0	9.0	0.0	0.0
Total	46.0	720.0	18.0	14.0

Sort by Cluster Type 
Active 

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We currently have 6 in LTCFs (down from 9 last week), 22 in private businesses and 4 in schools.

Don't forget, if you are interested in seeing the list of named locations with 5 or more cases within the last 14 days, you can go to the dashboard.



COVID-19: Updated Travel-Related Quarantine

A comprehensive list of those individuals needing to quarantine includes visitors and Kansans who have:

- Traveled on or after June 3 to Chile, Colombia, Paraguay, Suriname or Trinidad and Tobago.
- Traveled on or after May 20 to the countries of Costa Rica or French Guiana.
- Traveled on or after May 6 to the countries of India, Maldives or Seychelles.
- Traveled on or after April 22 to the countries of Argentina or Bahrain.
- Traveled on or after April 8 to the country of Uruguay.
- Traveled between May 20 and June 3 to the countries of Georgia, Lithuania or the Netherlands.
- Traveled between May 20 and June 3 to Maine or the Colorado counties of Alamosa, Baca, Costilla, Dolores, Mesa, Mineral, Otero, Prowers, Rio Grande, Saguache, Sedgwick or Yuma.
- Traveled between May 6 and June 3 to the Colorado counties of Adams, Arapahoe, Archuleta, Conejos, Crowley, Douglas, El Paso, Elbert, Fremont, Huerfano, Jefferson, Larimer or Pueblo.
- Traveled between May 6 and June 3 to Cabo Verde.
- Traveled between April 22 and June 3 to Minnesota or Sweden.
- Attendance at any out-of-state mass gatherings of 500 or more where individuals do not socially distance (6 feet) and wear a mask.
- Been on a cruise ship or river cruise on or after March 15, 2020.

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For the US list:

1. Remove:
Colorado (and all of the county specific locations)
Maine
Minnesota
2. Keep: None
3. Add: None

For the International list:

1. Remove:
Cabo Verde
Georgia
Lithuania
Netherlands
Sweden
2. Keep:
Argentina
Bahrain
Costa Rica
French Guiana



Excess Death Estimates in Patients with End-Stage Renal Disease — United States, February–August 2020

Early Release / June 1, 2021 / 70

Robert Ziemba, PhD¹; Kyle N. Campbell, PharmD¹; Tsu-Hsuan Yang, PharmD¹; Sara Eve Schaeffer, MBA, MA¹; Kelly M. Mayo, MS¹; Paul McGann, MD²; Shalon Quinn, PhD³; Jesse Roach, MD⁴; Edwin D. Huff, PhD³ ([View author affiliations](#))

[View suggested citation](#)

Summary

What is already known about this topic?

Patients with end-stage renal disease (ESRD) are at increased risk for COVID-19–associated morbidity and mortality.

What is added by this report?

Based on the national trend in ESRD deaths during the first 7 months of the U.S. COVID-19 pandemic (February 1–August 31, 2020), an estimated 8.7–12.9 excess deaths per 1,000 patients or 6,953–10,316 excess deaths in a population of 798,611 U.S. ESRD patients occurred.

Article Metrics

Altmetric:



Citations:

Views:

Available at: https://www.cdc.gov/mmwr/volumes/70/wr/mm7022e2.htm?s_cid=mm7022e2_w

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MMWR article looking at excess deaths from end state renal disease in the US.

Based on the national trend in ESRD deaths during the first 7 months of the U.S. COVID-19 pandemic (February 1–August 31, 2020), an estimated 8.7–12.9 excess deaths per 1,000 patients or 6,953–10,316 excess deaths in a population of 798,611 U.S. ESRD patients occurred. This was calculated by comparing the expected number of deaths based on 2016 data to the observed deaths during the 2020 time period.



COVID-19: New Literature

Patterns in COVID-19 Vaccination Coverage, by Social Vulnerability and Urbanicity — United States, December 14, 2020–May 1, 2021

Early Release / May 28, 2021 / 70

Vaughn Barry, PhD^{1,2,*}; Sharoda Dasgupta, PhD^{2*}; Daniel L. Weller, PhD²; Jennifer L. Kriss, PhD²; Betsy L. Cadwell, MSPH²; Charles Rose, PhD²; Cassandra Pingali, MPH, MS²; Trieste Musial, MS^{2,3}; J. Danielle Sharpe, MS³; Stephen A. Flores, PhD²; Kurt J. Greenlund, PhD⁴; Anita Patel, PharmD²; Andrea Stewart, PhD²; Judith R. Qualters, PhD²; LaTrece Harris, MPH²; Kamil E. Barbour, PhD²; Carla L. Black, PhD² ([View author affiliations](#))

[View suggested citation](#)

Summary

What is already known about this topic?

Counties with higher levels of social vulnerability have been disproportionately affected by COVID-19.

What is added by this report?

Article Metrics

Altmetric:



Available at:

https://www.cdc.gov/mmwr/volumes/70/wr/mm7022e1.htm?s_cid=mm7022e1_e&ACSTrackingID=USCDC_921-DM58410&ACSTrackingLabel=MMWR%20Early%20Release%20%20Vol.%2070%2C%20May%2028%2C%202021&deliveryName=USCDC_921-DM58410

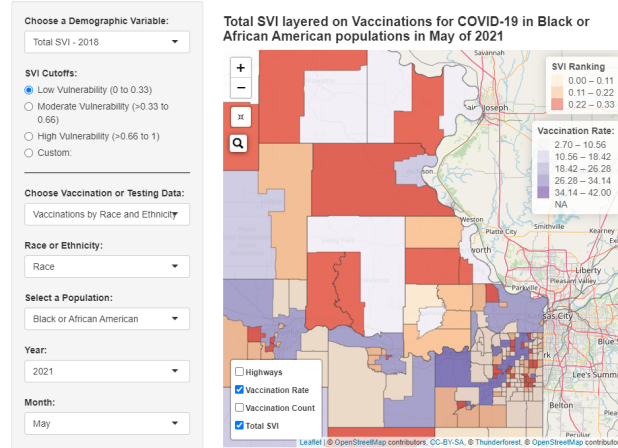
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MMWR article:

Disparities in vaccination coverage by social vulnerability, defined as social and structural factors associated with adverse health outcomes, were noted during the first 2.5 months of the U.S. COVID-19 vaccination campaign, which began during mid-December 2020 (1).

During December 14, 2020–May 1, 2021, disparities in vaccination coverage by SVI increased, especially in large fringe metropolitan (e.g., suburban) and nonmetropolitan counties. By May 1, 2021, vaccination coverage was lower among adults living in counties with the highest overall SVI.

Social Vulnerability, COVID-19 Testing and COVID-19 Vaccination Rates



Available at: <https://www.coronavirus.kdheks.gov/160/COVID-19-in-Kansas> under the SVI Explorer tab

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As a reminder, we do have KS specific data on SVI and vaccination rates available on our dashboard under the SVI Explorer tab. For example, I pulled the map up this morning and can see, for example, that the census tract that Atchison CO falls in is in dark orange which means high on the social vulnerability index. We can also see that for vaccination rates among Black or African American people, the county is light purple which indicates a low vaccination rate.



Summary of Recent Changes

Last updated May 27, 2021

- Data were added from studies published since the last update that further demonstrate currently authorized COVID-19 vaccines are effective against SARS-CoV-2 infection, symptomatic and severe disease, and hospitalization with COVID-19.
- Data were added suggesting that currently authorized mRNA vaccines provide protection against variants of concern, including the B.1.1.7 strain that is predominant in the United States.
- Data were added from studies published since the last update that further demonstrate people who are fully vaccinated with a currently authorized mRNA vaccine are protected against asymptomatic infection and, if infected, have a lower viral load than unvaccinated people.

Available at: <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html>

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Last week we talked about CDC’s Scientific Brief on COVID-19 vaccine and vaccinated people. They updated the brief on May 27th to add literature supporting that the currently authorized mRNA vaccines provide protection against several variants of concern and that the currently authorized mRNA vaccines protect against asymptomatic infection and where fully vaccinated people are carriers, they have a lower viral load than unvaccinated people. It is this line of evidence that is helping to support the idea that fully vaccinated and asymptomatic infected people are less likely to spread the disease. Studies are underway to evaluate the effectiveness of Johnson and Johnson.

Other vaccines show reduced efficacy against the B.1.351 UK variant but still offer protection against severe disease.



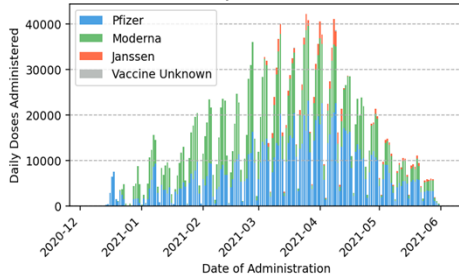
Phil Griffin, Director, Disease Control & Prevention
COVID-19 Laboratory Update
June 3, 2021



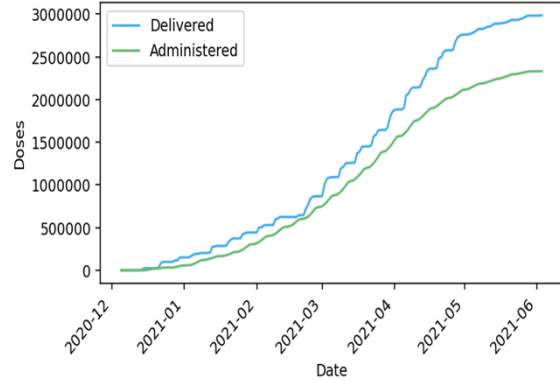
Vaccine Allocations Next Week

- **Pfizer Prime 42,400 doses**
- **Moderna Prime 32,060 doses**
- **J&J 0 doses**

Total Number of Doses Administered, by Date of Administration and Vaccine Manufacturer



Cumulative Delivered Doses vs Administered by Week

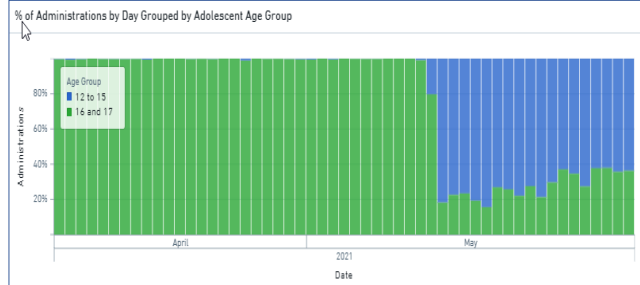
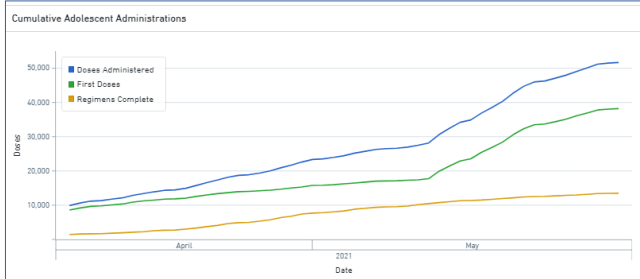


Generated by Tiberius on 06/03/21

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Adolescent Dose Administration



- **Total Adolescent Doses: 51,720**
 - **First Doses: 38,217**
 - 12 – 15: 17,728
 - 16 – 17: 20,489
 - **Complete Regimens: 13,384**
 - 12 – 15: 47
 - 16 – 17: 13,337

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Vaccines Expiring

- Expired Vaccine Guidance: [Expired-Vaccine-Guidance-PDF---5-28-2021 \(kansasvaccine.gov\)](#)
- Additionally, the Kansas Immunization Program has also provided guidance on how to handle and document COVID vaccine that has expired. It is attached and can also be viewed at the following links.
 - Specialty Alert Vaccine Wastage Process: [COVID-19-Vaccine-Wastage-Process-Special-Alert-PDF \(kansasvaccine.gov\)](#)
 - KIP Provider Waste Process Provider: [KIP-COVID-19-Provider-Waste-Process-PDF \(kansasvaccine.gov\)](#)
 - KSWebIZ - COVID-19 Adjustment Instructions: [KSWebIZ-Covid-19-Adjustment-Instructions \(kansasvaccine.gov\)](#)

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Myocarditis Reminder

- CDC published [Clinical Considerations](#) for myocarditis and pericarditis following COVID-19 vaccination. Additionally, [resources for the public](#) have been added to CDC's website that can be a resource for your patients.
- CDC and its partners are actively monitoring these reports, by reviewing data and medical records, to learn more about what happened and to see if there is any relationship to COVID-19 vaccination. CDC continues to recommend [COVID-19 vaccination](#) for everyone 12 years of age and older, given the greater risk of COVID-19 illness and related, possibly severe complications.

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2021 – 2022 Influenza Vaccine

- **2021-2022 Flu Supply Projections, Challenges, and Lessons Learned:**
 - On the annual NAIIS/IAC flu summit on May 20, 2021, manufacturers provide outlook for 2021-22 flu vaccination season and discussed lessons learned from the 2020-21 season.
 - The 2020-21 “twindemic” season showed an increase of approximately 17% in doses administered, although demand fell dramatically past November. For the upcoming 2021-22 season, manufacturers plan to deliver a total of 190 million vaccine doses, compared to 170 million administered in 2020-21. Read a [summary of the flu summit with projections, anticipated challenges, and lessons learned](#).

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N Myron Gunsalus, Jr, KHEL Director
COVID-19 Laboratory Update
June 3, 2021



COVID-19: Laboratory Update

FDA Approved Tests as of 5/27/21

FDA has currently authorized 372 tests under EUAs:

- 245 molecular tests (excluding Lab Developed Tests)
- 80 antibody tests
- 25 antigen tests, 20 CLIA Waived + 6 At Home Tests

<https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/vitro-diagnostics-euas>

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Additional Direct to consumer and Home Collection options being added over last couple of weeks. Most recently Harvard University Clinical Lab PCR/Home Collection

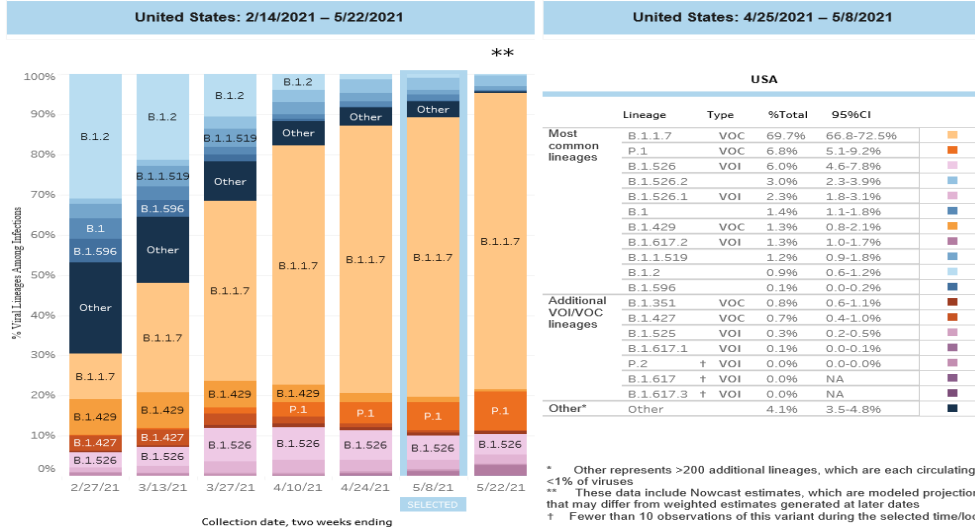
An additional lateral flow Antigen test was added recently

Serology with fingerstick and whole blood.



COVID-19: Laboratory Update

COVID Variants and Testing



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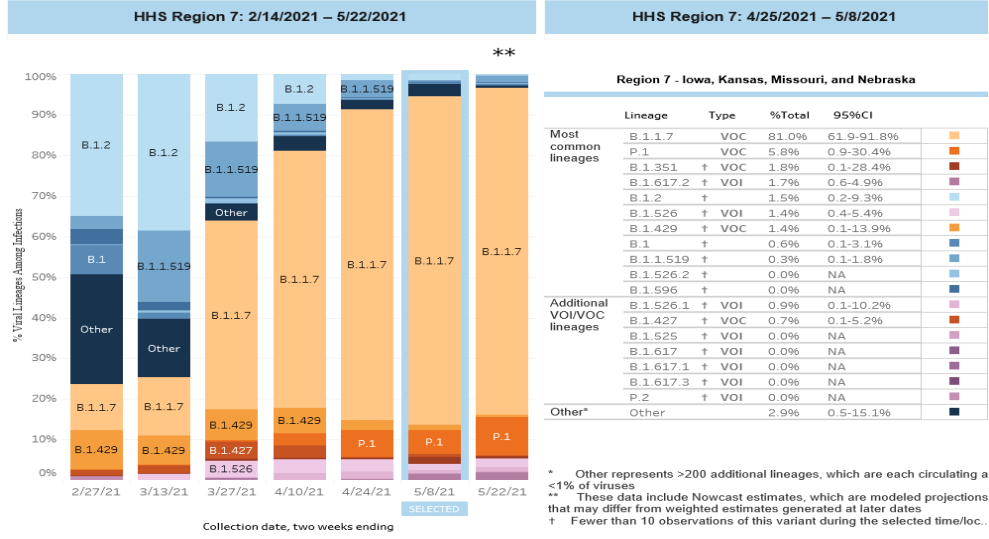
https://covid.cdc.gov/covid-data-tracker/?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcases-updates%2Fvariant-surveillance%2Fgenomic-surveillance-dashboard.html#variant-proportions

This has not been updated yet.



COVID-19: Laboratory Update

COVID Variants and Testing REGION 7



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https://covid.cdc.gov/covid-data-tracker/?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcases-updates%2Fvariant-surveillance%2Fgenomic-surveillance-dashboard.html#variant-proportions

CDC now has a new modeling program included called “Nowcast”. If you turn it on, as shown in this slide, it predicts the next 2 weeks of proportional data associated with the variants. You can use it for regional or US wide evaluations.

The interesting thing here is that the prediction is that the P.1 variant may have a smaller proportion of the overall disease but the B.1.617.2 may grow a small bit.

Keep in mind these are not absolute numbers but are proportional numbers and only relate to those sequences performed by CDC



COVID Variants and Testing

- KHEL has processed 4,060 samples with 3,292 meeting guidelines for successful/complete sequencing.
- We have published over 2,042 of our sequences to the GISAID international database.
- Our program has identified around 114 different lineages, most of which are not of interest or significance.
- Alternate Variant Naming Convention WHO: Greek Alphabet
<https://www.who.int/en/activities/tracking-SARS-CoV-2-variants>

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COVID Variants and Testing

Row Labels	Count of HSN	
B.1.1.7	903	VOC
B.1.1.71	1	VOC
B.1.351	4	VOC
B.1.427	7	VOC
B.1.429	50	VOC
B.1.525	1	VOI
B.1.526	11	VOI
B.1.526.1	2	VOI
B.1.526.2	18	VOI
B.1.617	8	VOC
B.1.617.1	1	VOC
B.1.617.2	16	VOC
P.1	191	VOC
P.1.1	10	VOC
P.2	1	VOI
Grand Total	1224	

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If you are a lab that is running PCR for COVID detection, we are looking for ways to increase our statewide sequencing efforts

KHEL is looking to partner with labs to increase sequencing



Criteria

KHEL is asking labs to send **any positive samples**

However, KHEL is particularly interested in the following cases if all samples are not available

- **Examples:** Areas with high transmission (different age groups, geographic locations, severity), cases in areas with a significant increase of cases over a few weeks (not explained by relaxing public health measures), children in areas with increased incidence of pediatric disease, clusters of cases in people aged <60 without underlying conditions, cases in fully-vaccinated people or when re-infection is suspected

Samples with a CT value <30 are preferred, but higher CT values are OK if samples are of interest



Next steps

- To sign up for the program, **Contact KDHE.KHELINFO@KS.gov and include Subject Line: ATTENTION SEQUENCING**
 - Samples can be submitted through a form or lab online
 - For regular surveillance tell us how many PCR positives you typically have per week and could send.
- If there is a known case of reinfection or potential vaccine break through or "S-Deletion", then **contact KHEL for sequencing.**
- You **should not report PCR mutation screening to anyone as an identified variant.** Variants are only identified after confirmation whole genome sequencing
 - Send us extract if possible or a second sample in VTM

Please note: CMS has stated so far that sequencing results cannot be reported back to providers but only to Public Health. We will be working with Public Health staff regarding results of sequences but can only provide aggregate data back to any given laboratory



COVID-19: Laboratory Update

Updates and Reminders

- KHEL will be completely closed Monday 5/31/21
 - Shipments on Friday should be designated Saturday delivery
 - Tests delivered on Saturday may be resulted late or on Tuesday.
- Statewide Courier being established
 - Local Health Department Survey still open:
<https://freeonlinesurveys.com/s/KFAsT7y>
 - All Counties to have the service, Expected start 6/21/21
 - If you have alternative location for the courier pickup, contact us.
 - Lock boxes are being directly shipped to LHDs and will need secured.
 - Courier will serve to transport samples for environment and HD.

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KHEL Closed Monday.

Who is the contractor?

Stallion Express LLC

Who do is the contact person?

Samantha (Sam) Southern

Email: ssouthern@stallion-express.com

Phone/Text: (336) 745-9515



COVID-19: Laboratory Update

Updates and Reminders

- CLIA Certification Questions: KDHE.CLIA2@ks.gov
 - REMINDER: If you add or change anything on your test menu, you must notify the CLIA office ASAP. (even if High Complexity lab adding antigen.)
- Kits and some instruments available
 - Abbott IDNow (rapid PCR) Kits and Instruments
 - Abbott BinaxNow (rapid antigen) kits.
 - BD Veritor (rapid antigen) instruments
- Mobile Labs and Collection Vans available.

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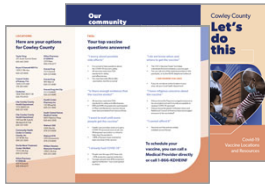
We were notified by the CLIA certification office that there are a number of labs that have either Certificates of Waiver(COW) or other more complex certifications that brought on the antigen testing such as BinaxNow without notifying the CLIA office of the change in their test menu. All labs (including COWs) are required to notify CLIA of any addition or subtractions of tests or technologies offered in their test menu.



Daniel Maldonado, Boston Consulting Group
COVID-19 Communications Update
June 3, 2021

Communications drafted to expand media toolkit

Materials developed primarily for Kansans with limited internet access



Vx provider pamphlet

Pamphlet designed to be a **vaccine directory** providing contact info for providers receiving Vx shipments, on a **county-by-county basis**



Priority group one-pagers

Detailed **FAQs and messages** driven towards priority or vulnerable communities to **improve information access** and drive vaccine demand

Key details

- Materials developed to **flexibly incorporate your branding**
- Materials are in both **English and Spanish**
- Will send **2 – 3 min pulse-check** after this meeting to gather contact info
- We will try to accommodate requests for **printed materials**, if requested
- For **additional comms** developed please follow these links:
 - [KDHE tool kit](#)
 - [Voices on Vaccination resources](#)



Lacey Kennett, Preparedness & Communications
COVID-19 Situation Update
June 3, 2021



Upcoming webinar



“A Tale of Two Pandemics: COVID-19 & Global Vaccine Equity”

Date: **Wednesday, June 23, 2021**

Time: **4 – 5:30pm CT**

Click [HERE](#) to register

To protect and improve the health and environment of all Kansans

The next webinar in the COVID-19 Conversations series will take place Wednesday, June 23, 2021, from 4 – 5:30pm Central. The topic is “A Tale of Two Pandemics: COVID-19 & Global Vaccine Equity.” To register for this webinar, or watch previous webinars in the series, visit covid19conversations.org.

Información sobre vacunas COVID-19
¡Kansas, Juntos Podemos!
PREGUNTAS FRECUENTES
Para estudiantes universitarios, adolescentes y niños

¿Qué vacuna recibiré?
En este momento, la vacuna Pfizer es la única vacuna autorizada para la edad de personas de 12 años o más para prevenir el COVID-19. Se administra en dos dosis con tres semanas de diferencia, inyectada en el músculo del brazo.

¿La vacuna es segura para los niños? ¿Hay otros riesgos para los niños que podrían no estar presentes para los adultos?
La vacuna Pfizer se segura para personas mayores de 12 años. En los ensayos clínicos, adolescentes y jóvenes participaron para demostrar que la vacuna es segura para las personas de estas edades.

Si los jóvenes tienen menos probabilidades de enfermarse de COVID-19, ¿por qué necesitamos una vacuna?
A pesar de que es raro que los niños y jóvenes se enfermen gravemente de COVID-19, los estudiantes mayores de 12 años han necesitado atención hospitalaria para COVID-19.

Equipamiento jóvenes con condiciones de salud subyacentes, como alergias reactivas o crónicas, obesidad o afecciones pulmonares crónicas. ¿Terminar la vacuna también puede dar tranquilidad a los padres para que vuelvan a actividades más típicas como la educación en persona y la participación en deportes, lo cual es ideal para la salud mental?

¿Ya tuve COVID-19. ¿Debo recibir la vacuna?
Sí. No sabemos cuánto dura la inmunidad de las enfermedades virales y la vacuna se hace para crear una respuesta inmune más duradera.

¿Hay algún adolescente que no deba recibir la vacuna? ¿Debo hablar con mi médico antes de programar una cita?
No hay ninguna categoría de adolescentes que no deban recibir la vacuna, a menos que tengan una afección conocida o una de las componentes de la vacuna. Ha habido informes de reacciones alérgicas a la vacuna, pero estas reacciones son muy raras. Los adolescentes con otros tipos de alergias más allá de cualquier componente de la vacuna pueden sentirse seguros al recibir la vacuna.

¿Afecta la vacuna COVID-19 a la fertilidad?
No. La vacuna no se inyecta ni cambia el ADN de las células del cuerpo de ninguna manera. No hay datos para preocuparse de que la vacuna afecte la fertilidad o la descendencia futura.

¿Puedo pasar el rato con amigos y familiares si obtengo la vacuna COVID-19?
Tanto los jóvenes como las familias pueden sentir más tranquilidad sobre la seguridad de reanudar las actividades habituales, que pueden aportar una mejor salud mental.

En las actividades grupales, los adolescentes deben seguir usando mascarillas. Si los estudiantes van a una escuela que es un entorno de alto riesgo para los adolescentes vacunados, pueden sentirse cómodos quitándose las mascarillas cuando y cuando estén en riesgo de los dos hogares sea de alto riesgo y no está vacunado.

¿Cuáles son los efectos secundarios a largo plazo de las vacunas COVID-19?
Hay estudios en curso para entender los efectos secundarios a largo plazo de la vacuna COVID-19. Sin embargo, las vacunas que se usan tienen efectos secundarios a largo plazo.

PRÓXIMOS PASOS ¿CÓMO OBTENGO LA VACUNA?
Para encontrar un proveedor de vacunas, visita el Buscador de Vacunas (www.vacines.gov/search), comunícate con tu Departamento de Salud Local, llama al 211 o a la línea directa KDHE COVID-19 (866-334-3463 / 866-KDHEENT). También puedes enviar un mensaje de texto con tu código postal al 438829 (GETVAX) o al 822862 (VACUNA) para obtener ayuda en inglés y español, respectivamente.

COVID-19 Vaccine Information
Kansas, let's do this!
FAQs
For young women

I am pregnant or lactating. Should I get the vaccine?
If you are pregnant or breastfeeding, you may receive any of the currently authorized COVID-19 vaccines. Experts believe that the risk of COVID-19 illness outweighs risks of vaccination. Additional studies are underway or planned.

Is it safe for me to get a COVID-19 vaccine if I would like to have a baby one day?
Yes! If you are trying to become pregnant now or want to get pregnant in the future, you may receive a COVID-19 vaccine. There is no evidence that the COVID-19 vaccine causes any problems with pregnancy or fertility.

Is the vaccine safe for young people? Are there other risks for young people that might not be present for adults?
The Pfizer vaccine is safe for people ages 12 years and older.

If young people are less likely to get sick from COVID-19, why do we need a vaccine?
Even though it's rare for children and young people to get seriously ill from COVID-19, Americans who are 12 years and older have needed hospital care for COVID-19. This is especially true for young people with underlying health conditions such as weakened immune systems, obesity or chronic lung conditions. Having the vaccine may also give families peace of mind to return to more typical activities like in-person instruction and participating in sports, which is great for mental health.

Do I even need to worry about COVID-19?
There is the false idea that COVID-19 is only a concern for older people. Although COVID-19 causes more problems in the elderly, young Americans are not spared. COVID-19 can cause a severe condition called MIS-C (Multisystem Inflammatory Syndrome-Child) disease in children and young people. It affects multiple organs of the body, causing organ failure. Recovery requires many days in the ICU.

Is it safe for me to get a COVID-19 vaccine if I would like to have a baby one day?
Yes! If you are trying to become pregnant now or want to get pregnant in the future, you may receive a COVID-19 vaccine. There is no evidence that the COVID-19 vaccine causes any problems with pregnancy or fertility.

Do I even need to worry about COVID-19?
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NEXT STEPS HOW DO I GET THE VACCINE?
To find a vaccine provider, visit Vaccine Finder (www.vacines.gov/search), contact your Local Health Department, call 211, or call the KDHE COVID-19 Hotline (866-334-3463 / 866-KDHEENT). You can also text your zip code to 438829 (GETVAX) or 822862 (VACUNA) for assistance in English and Spanish, respectively.

Click [HERE](#) to access

To protect and improve the health and environment of all Kansans

The KDHE social media toolkit now has new and updated COVID vaccine FAQ fact sheets available for distribution. All of the fact sheets are available in both English and Spanish and can be used online or in print. The following fact sheets are available:

- General FAQs
- Faith-based focus FAQs
- FAQs for families
- FAQs for young women
- FAQs for college students
- FAQs for agrobusiness



Vaccination Fact Sheets

Información sobre vacunas COVID-19

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PREGUNTAS FRECUENTES

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¿La vacuna es segura para los niños? ¿Hay otros riesgos para los niños que podrían no estar presentes para los adultos?
La vacuna Pfizer es segura para personas mayores de 12 años. En los ensayos clínicos, adolescentes y jóvenes participaron para demostrar que la vacuna es segura para las personas de estas edades.

Si los jóvenes tienen menos probabilidades de enfermarse de COVID-19, ¿por qué necesitamos una vacuna?
A pesar de que es raro que los niños y jóvenes se enfermen gravemente de COVID-19, los adolescentes mayores de 12 años han necesitado atención hospitalaria para COVID-19.

Especially jóvenes con condiciones de salud subyacentes, como asma, trastornos cardíacos, obesidad o afecciones pulmonares crónicas. Tener la vacuna también puede dar tranquilidad a los padres que quieren a actividades más típicas como la educación en persona y la participación en deportes, lo cual es vital para la salud mental.

¿Hay algún adolescente que no deba recibir la vacuna? ¿Debo hablar con mi médico antes de programar una cita?
No hay ninguna categoría de adolescentes que no deban recibir la vacuna, a menos que tengan una alergia conocida a uno de los componentes de la vacuna. Ha habido informes de reacciones alérgicas a la vacuna, pero estas reacciones son muy raras. Los adolescentes con otros tipos de alergias más allá de cualquier componente de la vacuna pueden sentirse seguros al recibir la vacuna.

¿Afecta la vacuna COVID-19 a la fertilidad?
No. La vacuna no se incorpora ni cambia el ADN de las células del cuerpo de ninguna manera. No hay datos para preocuparse de que la vacuna afecte la fertilidad o la descendencia futura.

¿Puedo pasar el rato con amigos y familiares si obtengo la vacuna COVID-19?
Tanto los jóvenes como las familias pueden sentir más tranquilidad sobre la seguridad de reanudar las actividades habituales, que pueden apoyar una mejor salud mental.

En las actividades grupales, los adolescentes deben tener cuidado constante. Si están de vuelta a una escuela que se está abriendo y si los amigos están voluntariamente vacunados, pueden sentirse cómodos quitándose las mascarillas siempre y cuando todos en un grupo de los dos hogares sea de alto riesgo y no está vacunado.

¿Cuáles son los efectos secundarios a largo plazo de las vacunas COVID-19?
Hay estudios en curso para entender los efectos secundarios a largo plazo de la vacuna COVID-19. Sin embargo, las vacunas que así causan efectos secundarios a largo plazo.

PROXIMOS PASOS ¿CÓMO OBTENGO LA VACUNA?
Para encontrar un proveedor de vacunas, visita el Buscador de Vacunas (www.vacines.gov/search), comunícate con tu Departamento de Salud Local, llama al 211 o a la línea directa KDHE COVID-19 (866-534-3463 / 800-KDHE19). También puedes enviar un mensaje de texto con tu código postal al 438829 (GETVAX) o al 822862 (VACUNA) para obtener ayuda en inglés y español, respectivamente.

My files > KDHE Communication Toolkits

Name	Modified	Modified By	File size	Sharing
Flu Toolkits	November 4, 2020	Melissa DeConder	3 items	Shared
COVID-19 Toolkits	November 4, 2020	Melissa DeConder	7 items	Shared

My files > KDHE Communication Toolkits > COVID-19 Toolkits

Name	Modified	Modified By	File size	Sharing
Awareness Campaigns	Sunday at 5:19 PM	Melissa DeConder	2 items	Shared
COVID Vax - Fact Sheets	Sunday at 5:06 PM	Melissa DeConder	2 items	Shared
Multilingual Videos	February 23	Melissa DeConder	2 items	Shared
Yard Signs_18x24	November 4, 2020	Melissa DeConder	2 items	Shared
Social Media	November 4, 2020	Melissa DeConder	26 items	Shared
Posters	November 4, 2020	Melissa DeConder	3 items	Shared
CDC Toolkits	November 4, 2020	Melissa DeConder	2 items	Shared

Click [HERE](#) to access the social media toolkit

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This just shows you how to access these FAQ sheets. Once you get into the social media toolkit, click the “COVID-19 Toolkits” folder, then “COVID Vax – Fact Sheets.” You’ll then be able to choose whether you want them for online or print, and English or Spanish.



Kansas Speedway Event

RACE TO END COVID

Get vaccinated or tested
and drive your car on the track!

Visit kansasspeedway.com/RaceToEndCOVID for more details

KANSAS SPEEDWAY

COVID-19 Vaccine Clinic at Kansas Speedway

Kansas Speedway	Friday, June 4	Saturday, June 5
	5 PM - 8 PM	11 AM - 4 PM

FREE Pfizer or Johnson & Johnson vaccines available to anyone age 12 or older.
FREE testing available to all ages.

To protect and improve the health and environment of all Kansans

KDHE has partnered with the Wyandotte County Health Department, the University of Kansas Health Systems, and the Kansas Speedway to present a testing and vaccine event. Anyone who comes to the event to be either tested or vaccinated is able to drive their personal vehicle around the Kansas Speedway and be entered to win several bigger prizes, including tickets to future Speedway events. Both Johnson & Johnson and Pfizer vaccine will be available, meaning anyone 12 and older can get vaccinated, and a variety of testing options will also be available, including the non-invasive saliva tests. Please share this event far and wide with your communities so we get a great turnout. The event starts at 5pm tomorrow, Friday, June 4, through 8pm, then again on Saturday from 11am – 4pm. Visit kansasspeedway.com/RaceToEndCOVID for more details and the registration paperwork.



Questions?