

# Welcome to Talking with Patients About COVID-19 and Flu Vaccines



**Vaccinate ALL 58**  
Together we can end the pandemic.

December 7, 2022  
12:00PM - 1:00PM



# Continuing Medical Education Disclosure

All planners, staff, and others involved with this activity have reported no relevant financial relationships with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

This activity has not received commercial support.



Dr. Alex McDonald's children

# Housekeeping



**For Panelists:** Please remember to mute yourself when not speaking.



**For Attendees:** This session is being recorded. Please access today's slides and recording through the following link: [EZIZ COVID Crucial Conversations](#)

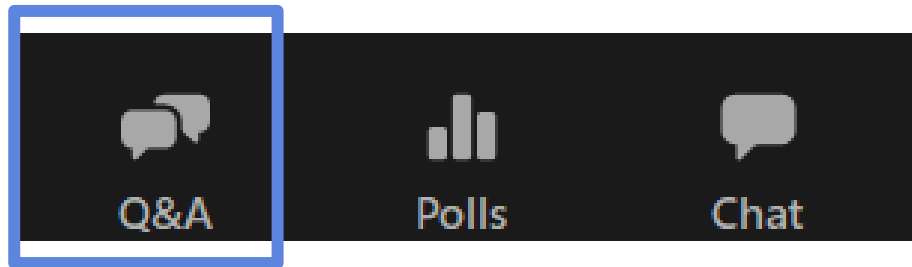


Please use “Q&A” to ask questions.

For post-webinar questions, contact [rachel.jacobs@cdph.ca.gov](mailto:rachel.jacobs@cdph.ca.gov)

# Questions & Answers

**During today's session, please use the Q&A panel to ask your questions.**



# Webinar Objectives

Participants will learn:

- The current rates and impact of flu and COVID-19 in our communities
- Strategies to discuss and increase vaccine administration
- How to effectively counsel patients on the risk and spread of respiratory viruses this holiday season



# Agenda: Wednesday, December 7, 2022

No.	Item	Speaker(s)	Time (PM)
1	Welcome	Rachel Jacobs (CDPH)	12:00 – 12:05
2	Talking with Patients about COVID-19 and Flu Vaccines	Alex McDonald, MD, CAQSM, FAAFP (#ThisIsOurShot)	12:05 – 12:40
<b>Questions &amp; Answers</b>			12:40 – 12:55
3	Poll, Resources, and Wrap-Up	Rachel Jacobs (CDPH)	12:55 – 1:00

# Poll: CDPH appreciates your feedback!

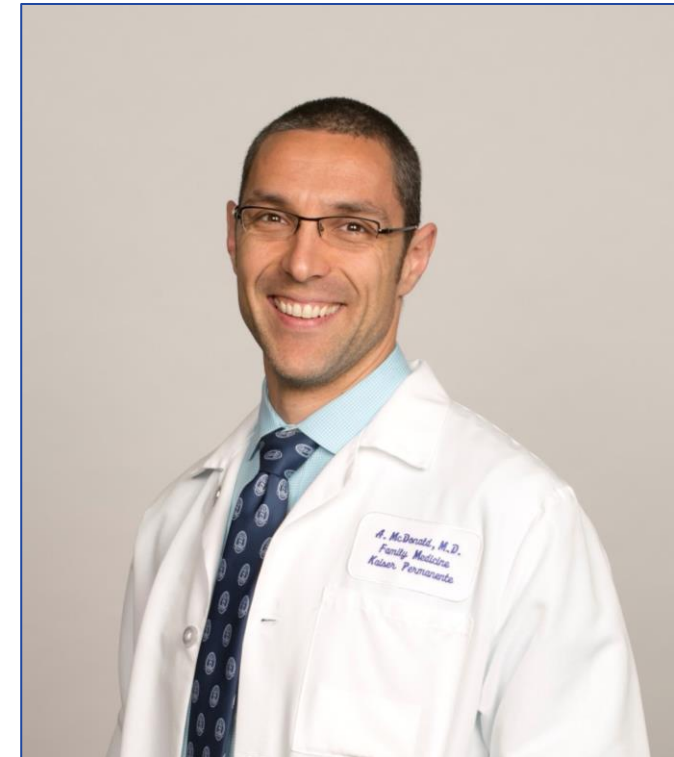
**How confident are you in your ability to effectively talk with patients about COVID-19 and flu vaccines?**

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident



# Talking with Patients about COVID-19 and Flu Vaccines

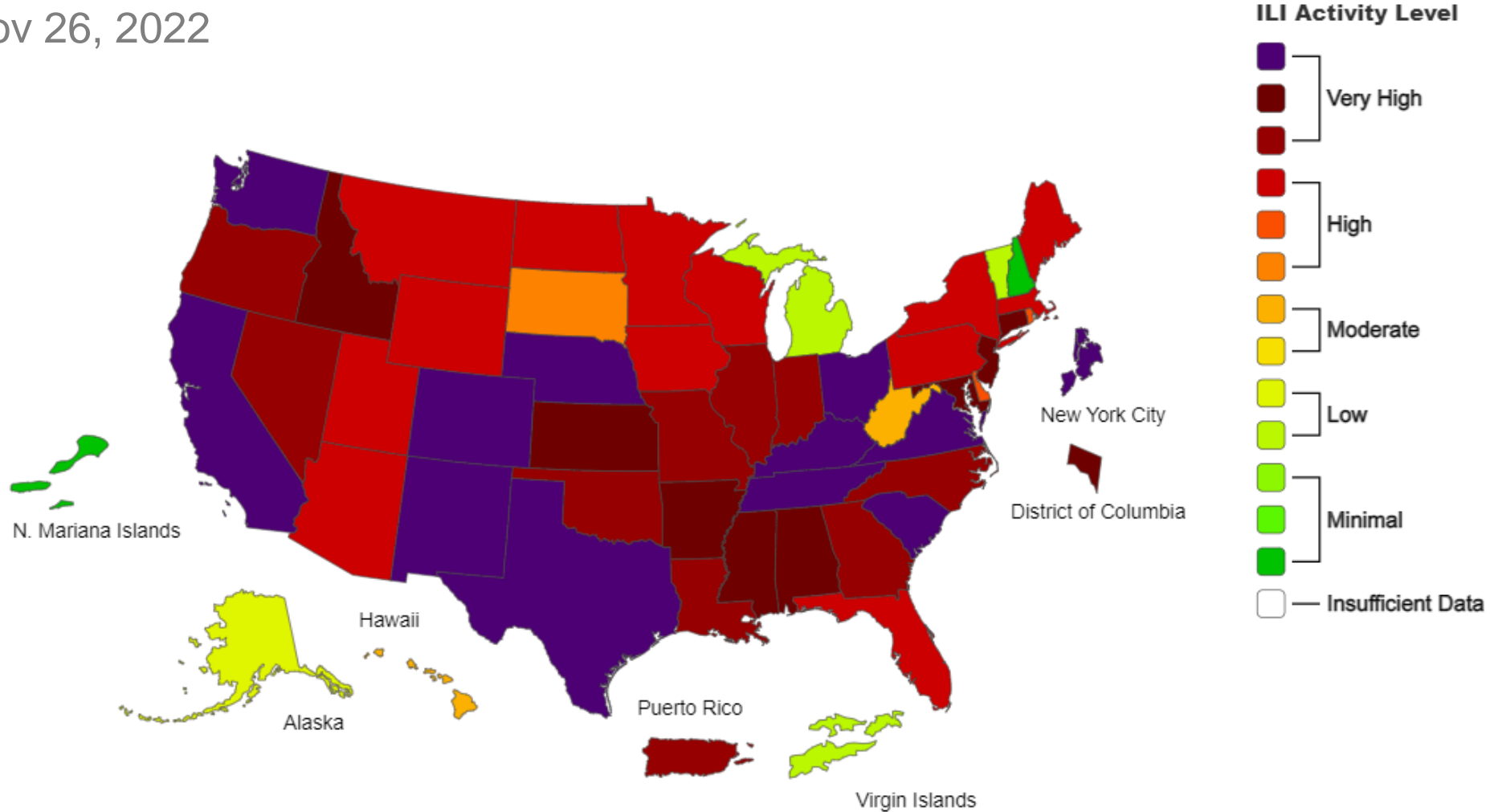
Alex McDonald, MD, CAQSM, FAAFP  
Co-Founder of #ThisIsOurShot





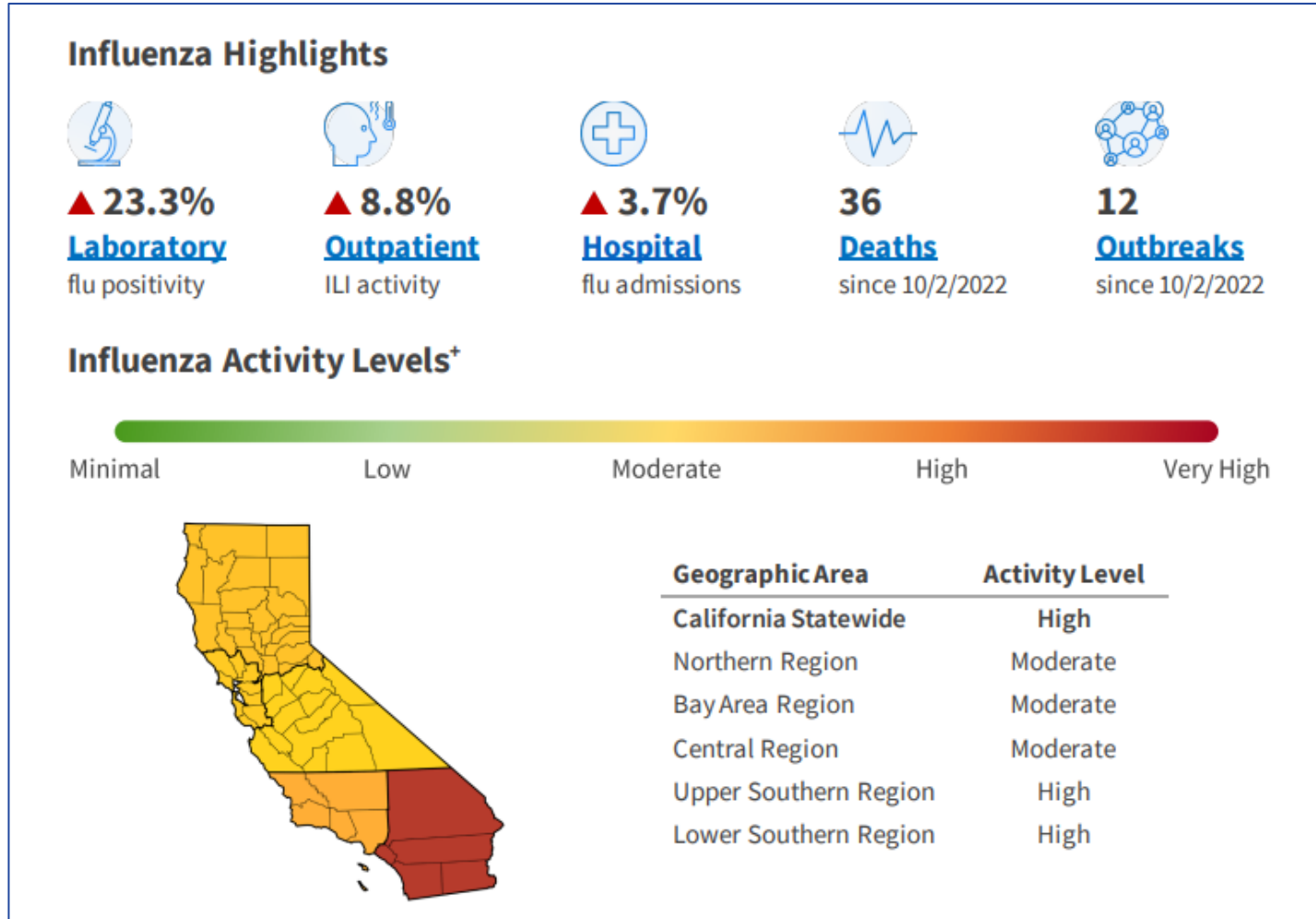
# 2022-23 Influenza Season Week 47

Ending Nov 26, 2022



# CA Influenza Weekly Report

Ending Nov 26, 2022



# Flu Vaccine Benefits

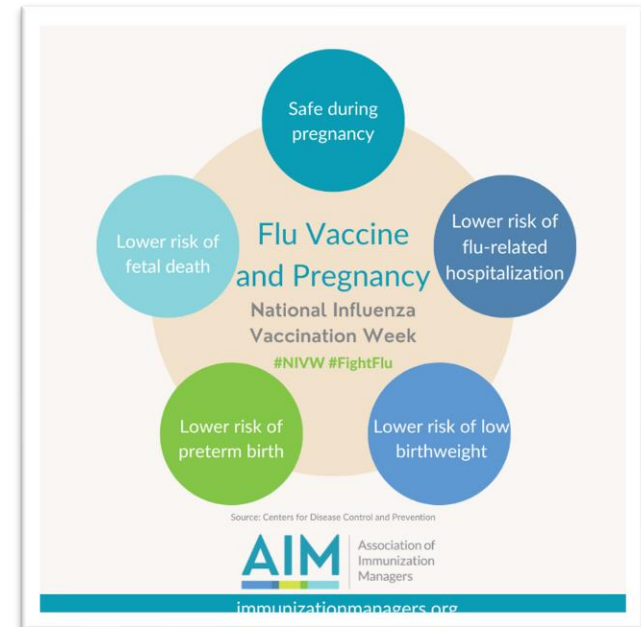
- 2019-2020 flu vaccines prevented an estimated
  - **7.5 million** influenza illnesses
  - **3.7 million** flu medical visits
  - **105,000** flu hospitalizations
  - **6,300** deaths
- Reduce risk of doctor office visits by **40%-60%**.
- Reduce risk of hospitalization by **40%**
- Reduced ICU admissions by **30-60%**
- Reduced children's risk of severe life-threatening influenza by **75%**
- Reduced a pregnant person's risk of being hospitalized with flu by **40%**
- Vaccination during pregnancy helps protect their infants from flu in their first few months of life.

Despite the many benefits offered by flu vaccination, only about **half** of Americans get an annual flu vaccine.

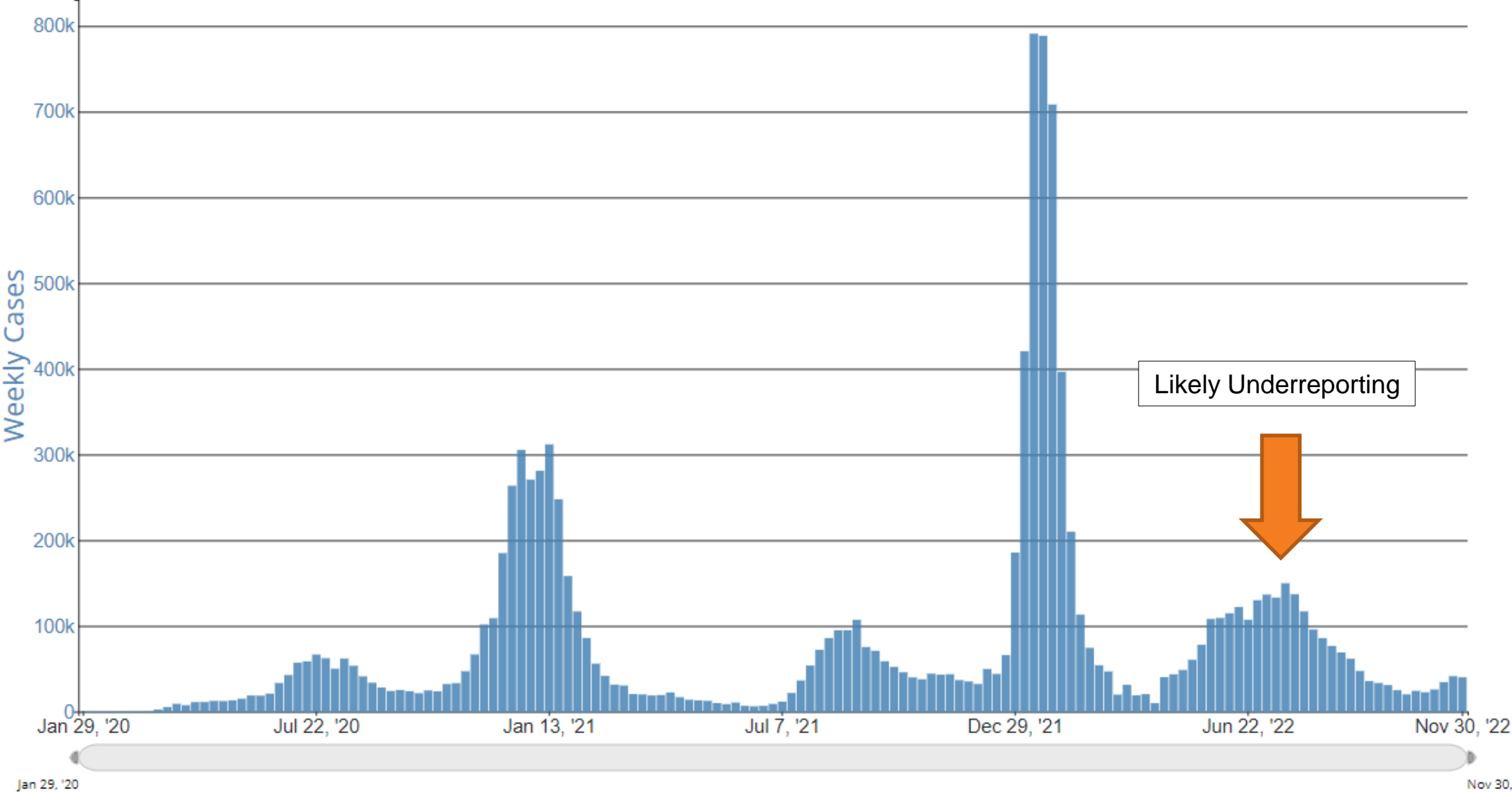
As of November 5, 2022, only **31%** of all children in CA had received a flu vaccine.

# Flu Resources

- CDPH/EZIZ Flu Promotional materials: [Flu & Respiratory Disease Prevention Promotional Materials – California Vaccines for Children \(VFC\)](#)
- Immunizeca.org Toolkit: [#DontWaitVaccinate – California Immunization Coalition](#)
- Association of Immunization Managers Toolkit: [National Influenza Vaccination Week 2022 Social Media Toolkit](#)



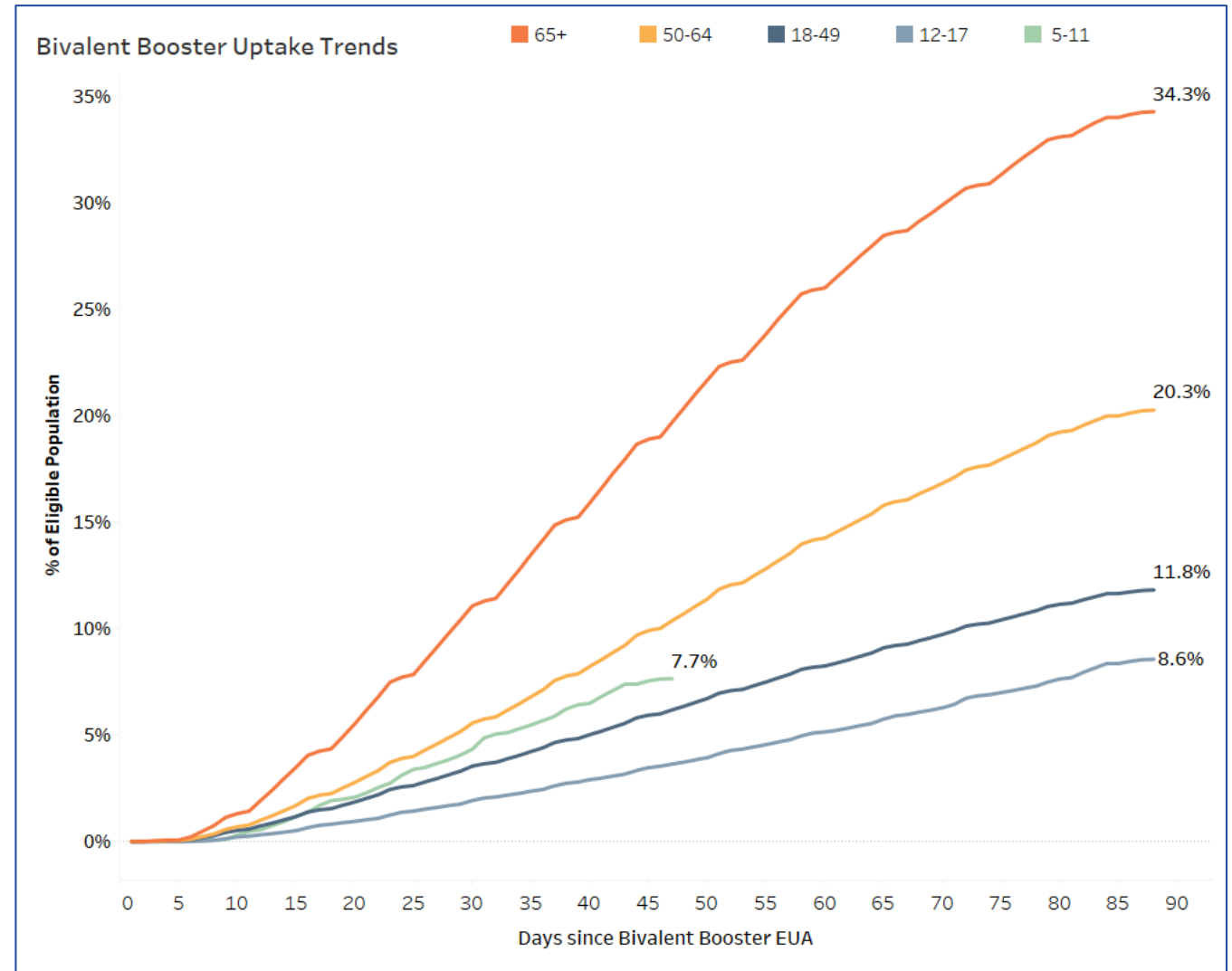
# Weekly Trends in Number of COVID-19 Cases in California Reported to CDC



# Boosters Uptake Trends: California

as of November 28, 2022

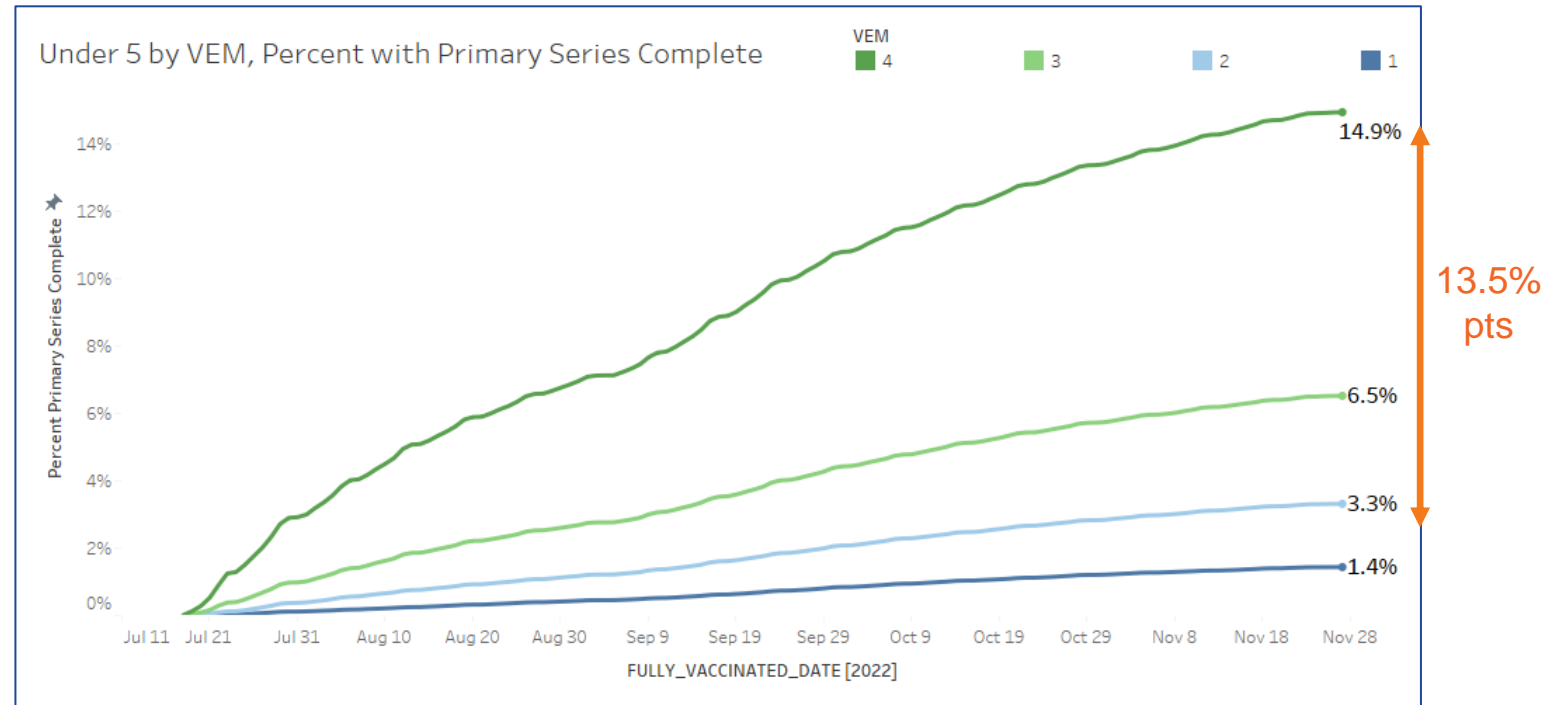
- Statewide, only **17.7%** of the eligible population has received a bivalent booster
- Of all bivalent booster doses, 64% have gone to 50+ population



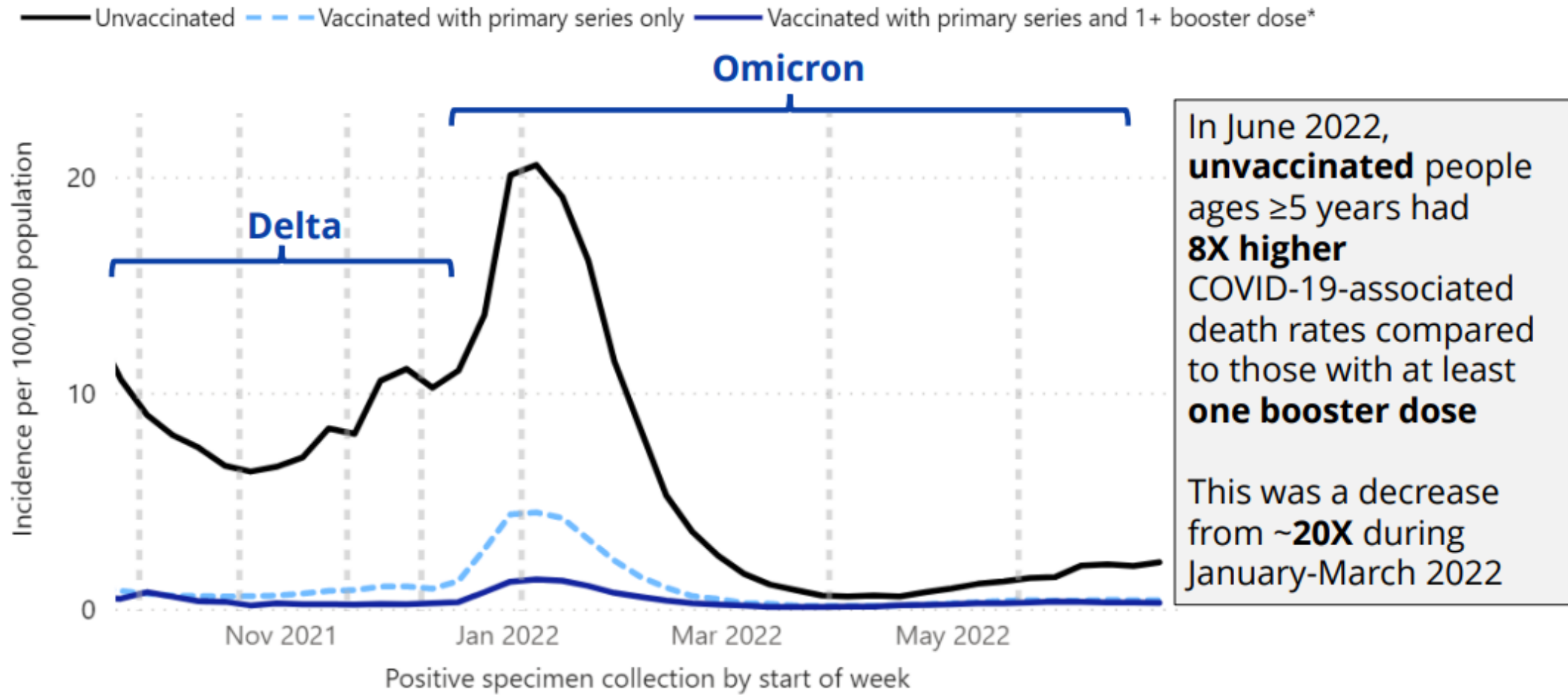
# Infant/Toddler Vaccination Trends: California

as of November 28, 2022

- Only **6.6%** of children under 5 have completed their primary series
- Infant/Toddlers in Healthier Places Q4 **>10x more** likely to have their primary series completed than Infant/Toddlers in Least Healthy Places Q1



# Age-Adjusted Rates of COVID-19-Associated Deaths by Vaccination Status and Receipt of Booster Dose,\* September 19, 2021 – July 2, 2022 (29 U.S. Jurisdictions)





# Death Rates by Vaccination Status and Receipt of 1<sup>st</sup> and 2<sup>nd</sup> Booster Doses Among People Ages 50+ Years

April 3–July 2, 2022 (25 U.S. Jurisdictions)

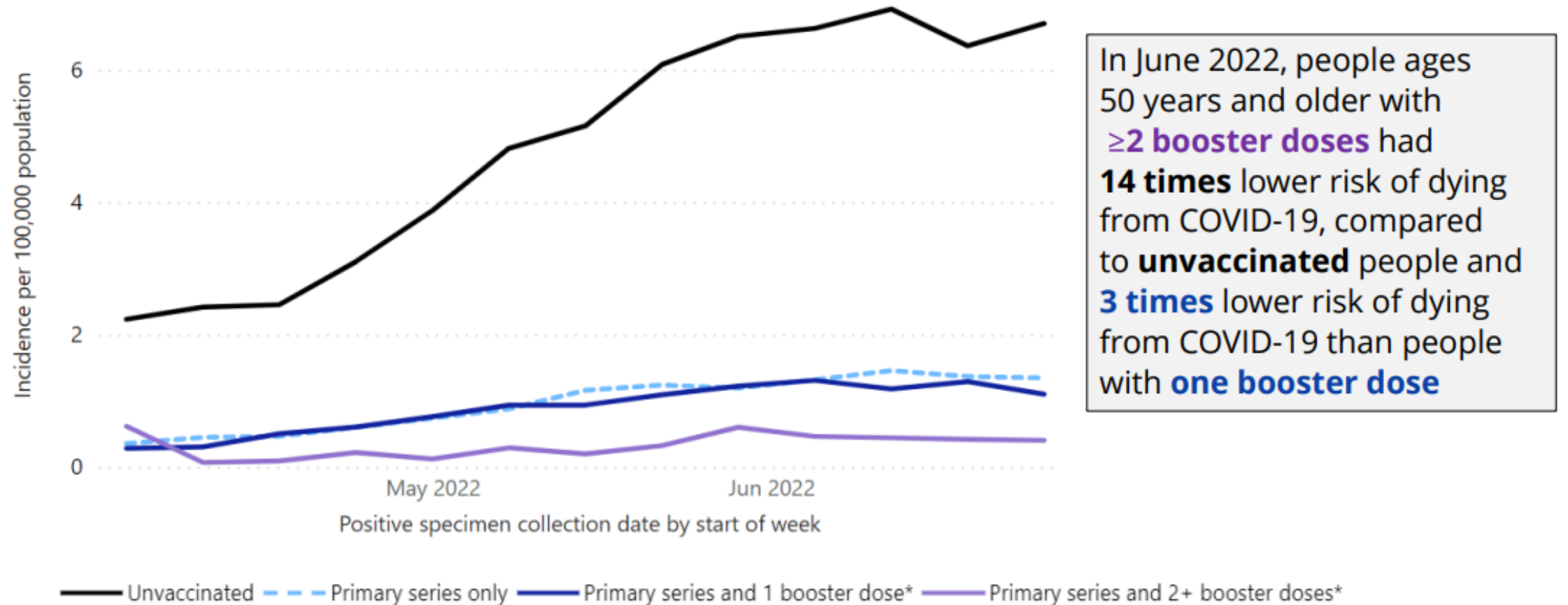
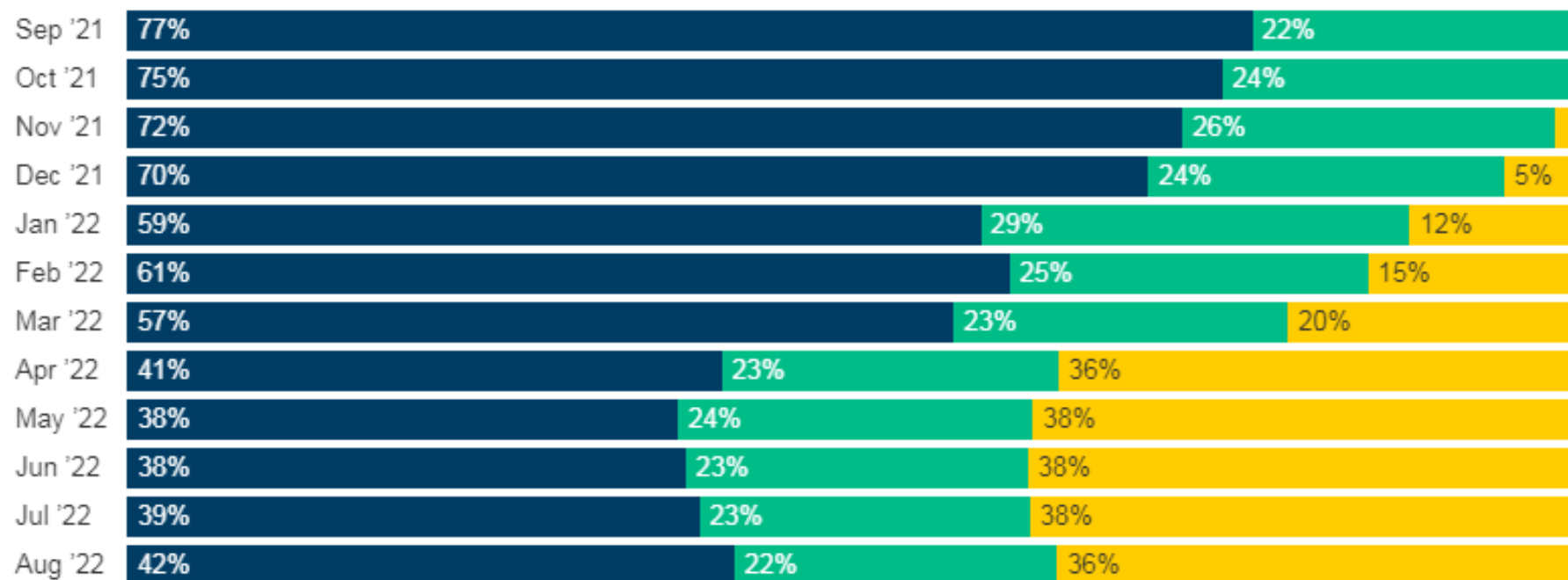


Figure 1

## Share of COVID-19 Deaths by Vaccination Status, 30 Jurisdictions In the U.S., September 2021 To August 2022, Age 18 and Over

[All adults](#) | [Adults age 50 and older](#) | [Elderly ages 65 and older](#)

■ Unvaccinated ■ Vaccinated with primary series ■ Vaccinated with booster



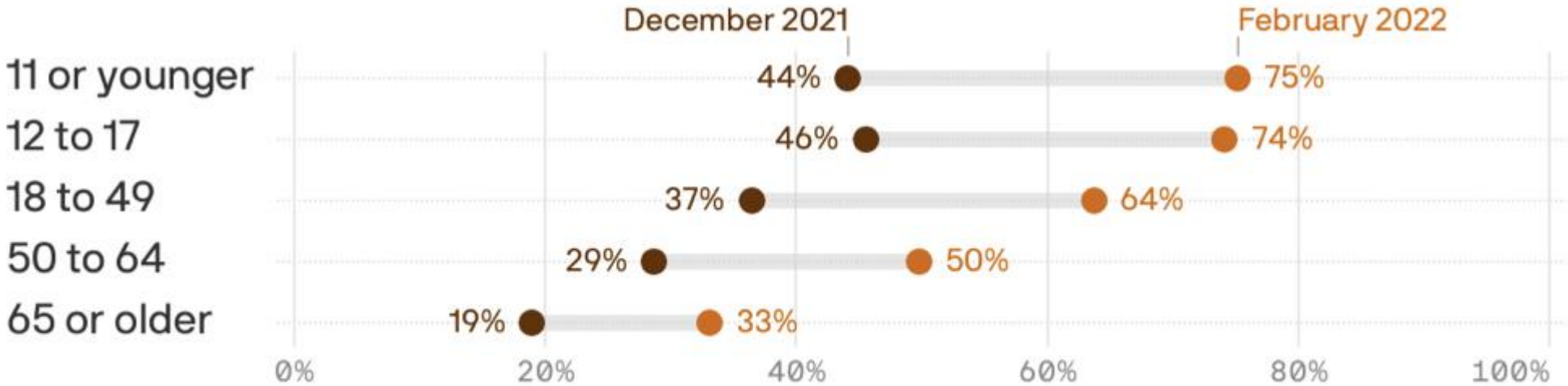
NOTE: Partially vaccinated people are excluded from this CDC data source. Share of adult population by vaccination status is for the end of each month.

SOURCE: [KFF analysis of CDC data](#) • PNG

**KFF**

# Percentage of U.S. Population with COVID-19 Antibodies, by Age

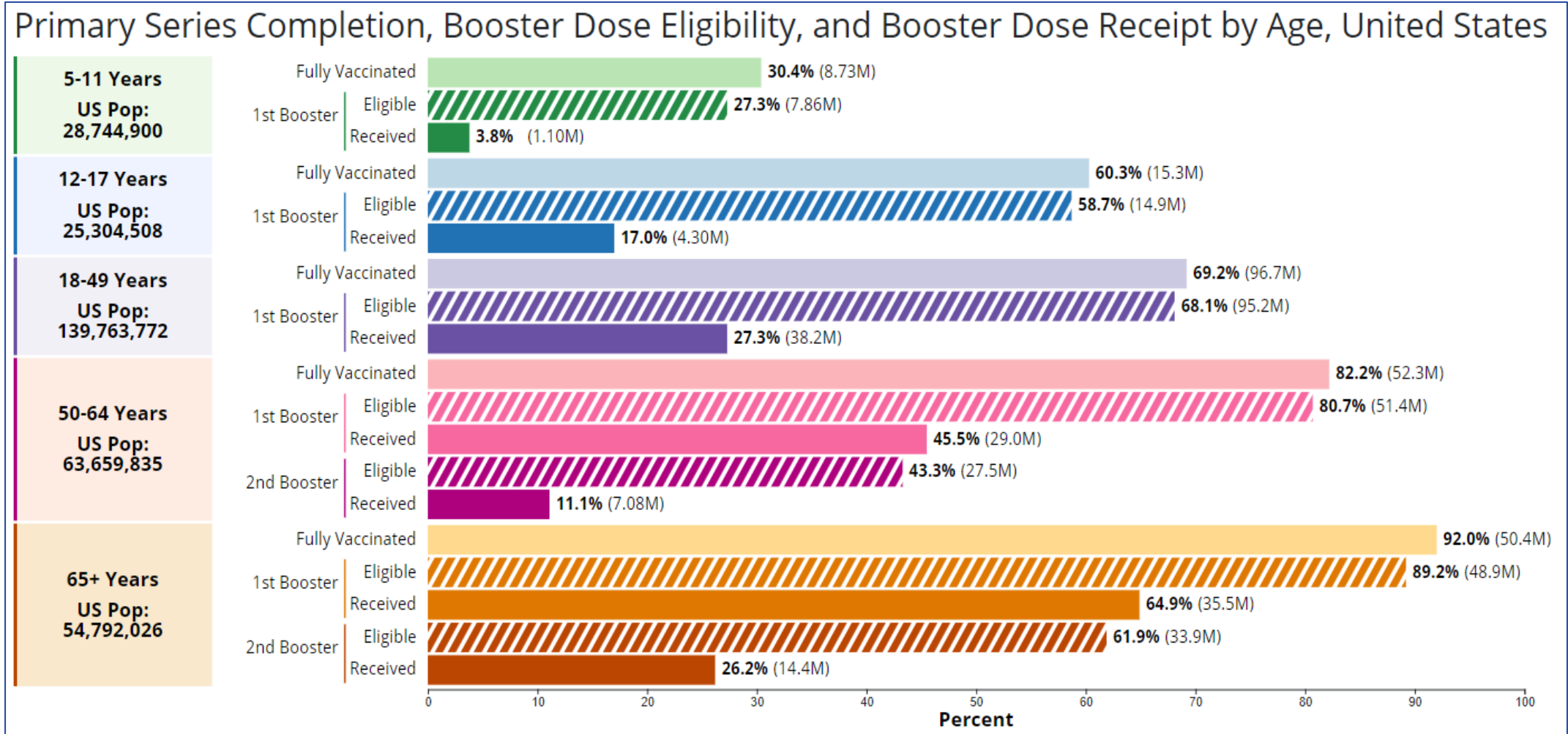
Estimate from study of at least 45,810 blood samples collected between December 2021 and February 2022



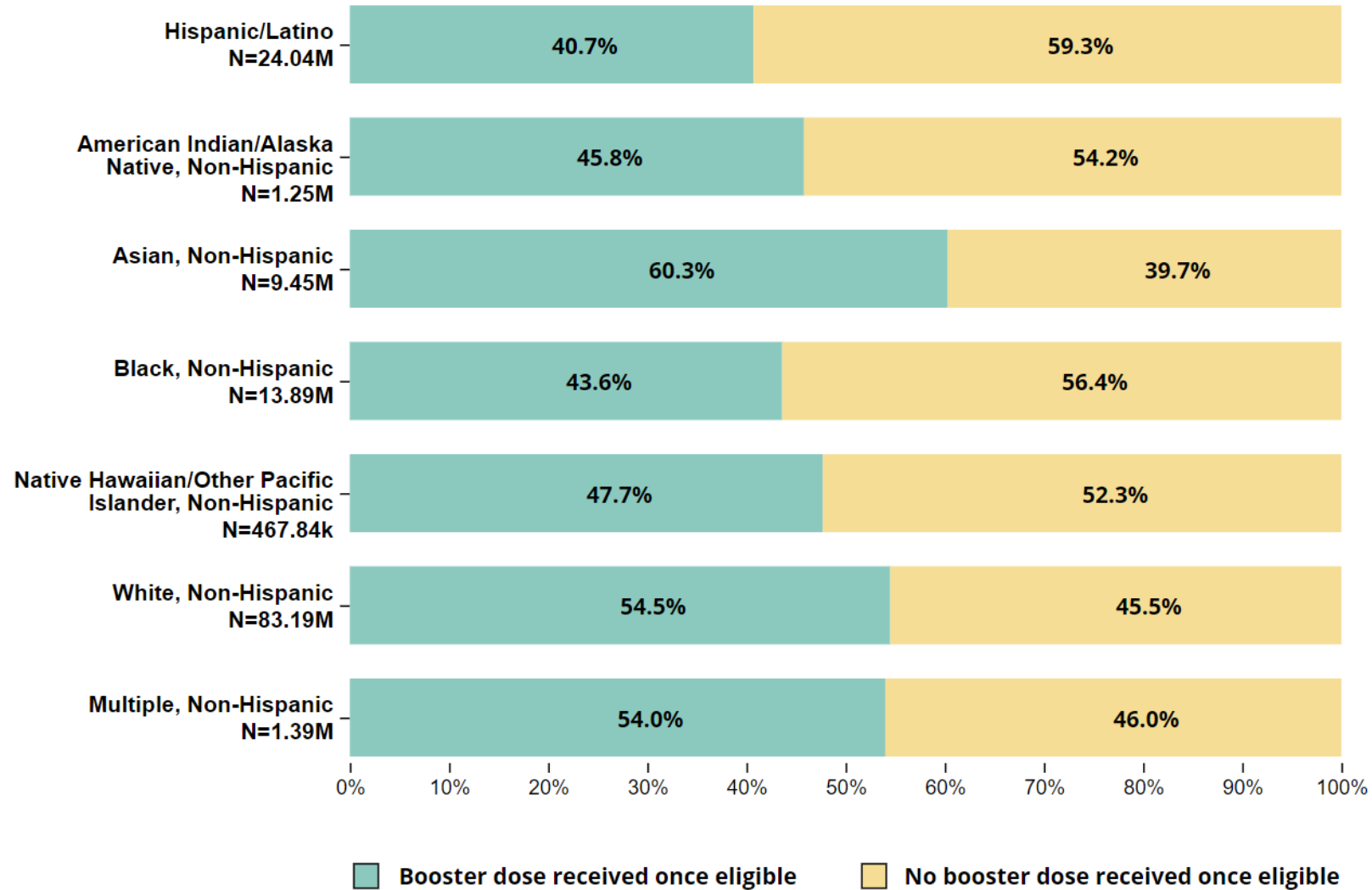
Vaccination, especially in children, is still our best defense

CDC, Clarke, et al. 2022 "Seroprevalence of Infection-Induced SARS-CoV-2 Antibodies."

# Vaccine Equity by Age: United States



# Vaccine Equity by Race/Ethnicity: United States



# Effectiveness of Bivalent mRNA Vaccines in Preventing Symptomatic SARS-CoV-2 Infection

## CDC Morbidity and Mortality Weekly Report:

- Data used from ICATT (Increasing Community Access To Testing) national program to assess vaccine effectiveness of the Omicron BA.4/BA.5 containing bivalent booster
- Analysis of 360,626 immunocompetent adults 18 years and older who received Covid-19 testing at retail pharmacies between September-November 2022
- Tests were collected predominantly in areas with higher social vulnerability

# Effectiveness of Bivalent mRNA Vaccines in Preventing Symptomatic SARS-CoV-2 Infection

## CDC Morbidity and Mortality Weekly Report:

Relative vaccine effectiveness of a single bivalent mRNA COVID-19 booster dose against symptomatic SARS-CoV-2 infection received after  $\geq 2$  monovalent vaccine doses, by age group and interval since last monovalent dose

Age Group	Relative VE: last monovalent dose received 2-3 months ago	Relative VE: last monovalent dose received $\geq 8$ months ago
18-49 years	30% (22%-37%)	56% (53%-58%)
50-64 years	31% (24%-38%)	48% (45%-51%)
65+ years	28% (19%-35%)	43% (39%-46%)

rVE was calculated by comparing the odds of receiving a bivalent booster dose (after 2, 3, or 4 monovalent doses) versus not receiving a bivalent booster dose (but receiving 2, 3, or 4 monovalent doses).

# An updated (bivalent) COVID-19 booster provides *additional protection* against symptomatic COVID-19 illness\*



COVID-19 spread has increased during the last two winters; **stay up to date with COVID-19 vaccination**

\* Among immunocompetent adults with COVID-19-like symptoms, the vaccination status of 121,687 adults with a positive COVID-19 test was compared to that of 238,939 adults with a negative COVID-19 test

[bit.ly/mm7149e1](https://bit.ly/mm7149e1)

NOVEMBER 22, 2022

**MMWR**



# Anticipated Bivalent Vaccine Expansion for Additional Pediatric Groups\*

- Pfizer bivalent vaccine: For 6 months through 4 years as a **third dose** for primary series completion
  - Those who already received 3 monovalent Pfizer doses may not be authorized to receive a bivalent booster dose
- Moderna bivalent vaccine: for 6 months through 5 years as a **booster dose**
- Not anticipated to have mix-and-match authorization
- CDC anticipated to provide recommendation in mid-December, pending FDA authorization

\*Preliminary data that may be subject to change

# COVID-19 and Flu Coadministration

- **Providers should offer flu and COVID-19 vaccines to eligible patients at the same visit.**
- Studies looking at coadministration have shown that immunogenicity is similar between those who received co-administered COVID-19 vaccine and seasonal influenza vaccine (SIV) and those who received these vaccines separately

## COVID-19 Vaccine Coadministration Tips



Routine and flu vaccines may be administered on the same day as COVID-19 vaccines.

### Considerations—What are the risks of:

- Missing recommended vaccines and catching COVID-19 or other vaccine-preventable diseases before the next appointment?
- Reactions from each vaccine?

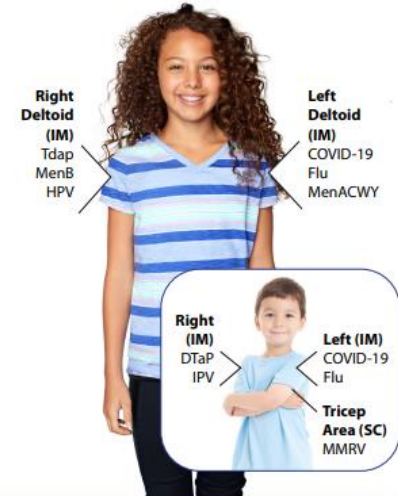
### Organize syringes:

- Label each syringe with vaccine name, dosage, lot number, initials of the preparer, and the exact beyond-use time.
- Place syringes on a clean tray, grouping vaccines by administration site.

### Patient Care:

- When possible, administer the COVID-19 vaccine in a different arm from vaccines more likely to cause a local reaction (e.g., tetanus-toxoid-containing vaccines).
- Give the most painful injections last (e.g., MMR, HPV).
- If patient is anxious, try using these tips to ease anxiety during vaccination.
- After administration, observe patient for 15 minutes (30 minutes if at increased risk for anaphylaxis). Report any adverse events to VAERS.

### Examples for preteens and kids:



### Separate injection sites by 1 inch or more, if possible.



Administer COVID-19 vaccines by intramuscular (IM) injection.

#### Age: 3 years and older

- **Site:** Deltoid muscle, above the level of the armpit
- **Needle:** 1 inch, 22-25 gauge (1 1/2 inches for larger patients)
- Bunch up the muscle and insert entire needle at a 90° angle

Refer to CDC product info for administration steps by product.



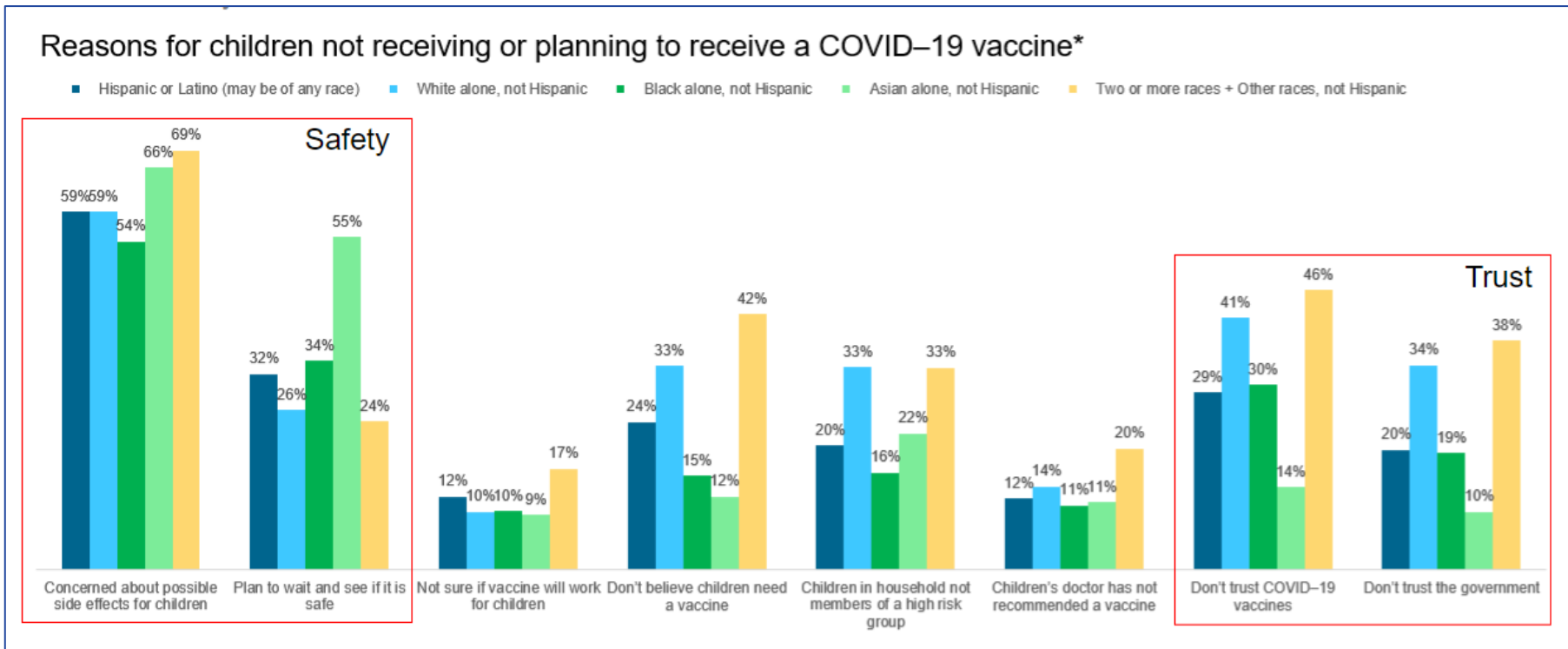
#### Under 3 years

- **Site:** Vastus lateralis muscle, in the anterolateral thigh (outside of the leg in the mid- to upper-thigh)
- **Needle:** 1 inch, 22-25 gauge
- Bunch up the muscle and insert entire needle at a 90° angle



# Discussing COVID-19 Vaccines during Flu Vaccinations: Raising Awareness and Urgency

- Parents may be unaware that their infants/toddlers are eligible for COVID-19 vaccines.
- Parents may not think their children need the COVID-19 vaccine.
- Vaccine safety is **top concern** among parents



# How to Talk About Vaccines

# Conversation Methodology

AKA: Answering Tough Questions/Having Tough Conversations

**3**

Steps to Start  
the  
Conversation

**5**

Key  
Messages

**3**

Post-Conversation  
Steps



To address patients concerns related to myths and misinformation,  
use the 3-5-3 method.



# The 3C Model for Healthcare Providers

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1. Compassionate Understanding
2. Connection
3. Collaboration



# Start with One Conversation

- Focus on having a productive **first** conversation. This sets the stage for future action and conversations.
- **Meet people where they are** and learn about how they feel about the updated COVID-19 vaccine.



# 3 Steps to Initiating/Continuing Conversations

1

## Ask and listen to the answer

“What do you think about the vaccine?”

“Why do you feel that way?”

“What concerns do you have about the vaccine?”

2

## Create an alignment of safety

“I would be scared too. Let’s do what’s safe here.”

“We both want what’s safest for you.”

3

## Find common goals

“We all want to be able to safely be with our loved ones again.”

“What reasons would motivate you to get vaccinated?”

Find their personally motivating reason.



# Proceed with Care and Empathy

- People are tired of COVID-19 and exhausted about talking about it.
- It has dramatically changed our lives over the past 3 years.
- Every family has experienced COVID-19 over the last 3 years in some capacity and people feel like “experts” because of that.
- Some people have sick family/friends/kids they care for or live with.

**Tailor** the conversation accordingly.

# Key Messages

1

**The vaccines will keep you safe.**

Vaccines will protect you from getting very sick from COVID-19 and flu.



# Key Messages

## 2

### **Mild side effects are common.**

Side effects are a sign that your body is protecting you.

For a few days after vaccination, many people temporarily feel:

- Sore arm (at administration site)
- Tired or fatigue
- Headache
- Muscle pain
- Joint pain



# Key Messages

3

## Vaccines are very effective.

Each vaccine is extremely effective at preventing hospitalization and death from COVID-19 and flu.



# Key Messages

4

**The vaccines are built on years of research and science.**

It is good to be careful when new things come along. Health experts took all the necessary steps to produce safe vaccines. The COVID-19 vaccine was built on 20 years of research and science.



# Key Messages

5

## Have questions? Please ask.

I am glad you want to know more. Ultimately, the choice is yours.

- When you're ready, go to [myturn.ca.gov](https://myturn.ca.gov) or text your zip code to GETVAX or VACUNA to get your COVID-19 vaccine.
- Flu vaccines are widely available (doctor's office, grocery store, pharmacy).



# 3 Steps Post-Conversation

1

## Acknowledge their agency and personal choice

“I want you to get vaccinated today, but ultimately it’s your choice.”

“I’m here as a resource to help you.”

2

## Keep lines of communication open

Trust is a journey. Give folks a way to reach you that you are comfortable with as they consider their decision.

3

## Offer to find a vaccine

Offer [myturn.ca.gov](https://myturn.ca.gov) or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.



# Frequently Asked Questions





# If I had COVID-19 recently, do I need an updated booster?

It depends.

- Booster vaccination after COVID-19 infection should be at **deferred at least until recovery from the acute illness** (if symptoms were present) and criteria to discontinue isolation have been met.
- In addition, people who recently had SARS-CoV-2 infection may consider **delaying a primary series dose or booster dose by 3 months** from symptom onset or positive test (if infection was asymptomatic).

# Can I get the updated COVID-19 booster if I have not been vaccinated with the primary series?

No.

The updated COVID-19 booster vaccine **does not replace initial vaccination** (primary series).

If it's your first time getting the COVID-19 vaccine, you can get Moderna, Novavax, or Pfizer-BioNTech.

# Can I mix and match my COVID-19 vaccine and booster?

Yes!

Eligible individuals can receive either age-appropriate Moderna or Pfizer-BioNTech updated COVID-19 booster regardless of which initial vaccine they received.

# When is the best time to get the updated booster?

**If it has been 2 months since your last dose, now is a great time!**

We want our bodies to build up their defenses before it gets very cold this winter and people are spending more time indoors.

# Can I get the flu vaccine and updated COVID-19 booster together?

**Yes!**

It is safe to get both vaccines at the same time, either in the same arm or in different arms.



# 5 Key Tips to Staying Healthy this Winter

## From Dr. Tomás Aragón

### **Get Vaccinated, Boosted (and Treated)**

Flu and COVID-19 vaccines continue to be your best defense to limit severe illness and death – and you can get both at the same time. If you test positive for COVID-19, contact your doctor or a [test-to-treat site](#) immediately to seek [treatment](#). Treatments work best when started right after symptoms begin.

### **Stay Home if You're Sick!**

It's crucial to stay home if you are feeling ill. Avoid close contact with others to protect them and take the time you need to heal. This is especially important for respiratory viruses like the flu, RSV and COVID-19, which can lead to more severe illness.

### **Wear a Mask**

There is no vaccine for RSV, so wearing a mask can significantly slow the spread and protect babies and young children who do not yet have immunity and are too young to wear a mask themselves. Wearing a mask in indoor public places is a good way to limit the spread of germs.

### **Wash Your Hands**

Your mom was right: Frequent handwashing, with soap and warm water – for at least 20 seconds, is an easy way to prevent getting sick and spreading germs.

### **Cover Your Cough or Sneeze**

Remember to cough or sneeze into your elbow, your arm, or a disposable tissue to help prevent the spread of winter viruses. Just make sure to wash your hands or sanitize and dispose of your tissue after.

# Resources



Join **#ThisIsOurShot / #VaccinateYa** for newsletters about COVID-19 and vaccine-related talking points, and social media tips for physicians:

<https://thisisourshot.info/> / <https://vaccinateya.com/>



Join **Shots Heard Round the World** to connect with a network of health professionals dedicated to combating online harassment of HCPs:

<https://shotsheard.org/>



**Health Defend** is the evolution of these three programs. It is designed to educate, empower, equip, and defend healthcare professionals so they feel confident amplifying their trusted voice through social media.

<https://www.healthdefend.com/>

# Poll & Resources

Rachel Jacobs, CDPH



# Poll: CDPH appreciates your feedback!

**Following this webinar, how confident are you in your ability to effectively talk with patients about COVID-19 and flu vaccines?**

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident



# Joint Letter: Strong Recommendation for Flu and COVID-19 Vaccines

CDPH partnered with the American Academy of Pediatrics (CA), California Academy of Family Physicians, California Immunization Coalition, and California Medical Association on a [joint letter](#) urging providers of pediatric services to continue to make strong recommendations for flu and COVID-19 vaccines. Please share with your immunization staff and partners.



# COVID-19 is a Childhood Illness Infographic

## ONLY 1 OF 6

PARENTS SAY THEIR CHILD'S DOCTOR RECOMMENDED THE COVID-19 VACCINE.

- As a trusted source, your recommendation can influence the decision to vaccinate.
- If you choose not to enroll, have a referral plan in place to ensure that your patients get vaccinated elsewhere.

## MAKE NO MISTAKE COVID-19 IS A CHILDHOOD ILLNESS



### COVID-19 CAN BE SERIOUS FOR KIDS.



**OVER 1500 DEATHS**

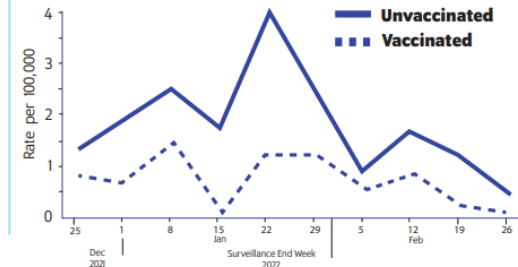
Over 1500 children have died from COVID-19 in the US since the start of the pandemic.

**122,000 HOSPITALIZATIONS**

About 1 in 3 children hospitalized with COVID-19 in the US were admitted to the ICU, similar to the rate among adults.

### 2X HIGHER HOSPITALIZATION RATE

Hospitalization rates among unvaccinated children ages 5-11 were 2x as high compared to vaccinated children during Omicron pre-dominant period in the US.



**PEDIATRIC VACCINATION COVERAGE IS LOW, ESPECIALLY FOR CALIFORNIA'S MOST VULNERABLE CHILDREN**

# Toolkits, Fliers, Conversation Guides, and Videos

## #ThisIsOurShot Toolkit COVID-19 Crucial Conversations Campaign

#THIS IS OUR SHOT
VACU NATE YA
COVID-19 VACCINE CONVERSATIONS

TOP 5 MESSAGES

### SAFETY

The vaccine will protect you from getting very sick from COVID. Over 150 million Americans have been safely vaccinated and are now protected.

### SIDE EFFECTS

Side effects are common. They are a sign your body is building up its defenses to protect you. Many people temporarily feel:

1. Sore arm (near site of vaccination)
2. Fatigue
3. Headache
4. Muscle pain
5. Joint pain

### EFFECTIVENESS AND VARIANTS

Each vaccine is nearly 100% effective at preventing hospitalization and death from COVID and its variants! It will allow us to do the things we love and miss most. Vaccinated individuals can get a mild COVID infection.

### SPEED

It's good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

### QUESTIONS?

I'm glad you want to know more. Ultimately, the choice is yours. If you have questions, talk with your doctor or healthcare provider soon. Text your zip code to **GETVAX (438829)** to get your free vaccine today.

Help spread the truth about COVID vaccines.

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#THIS IS OUR SHOT
VACU NATE YA

## LANGUAGE DO'S & DON'TS

<h3>Do Say</h3> <p>Vaccination ..... Injection or shot</p> <p>A safe and effective vaccine ..... A vaccine developed quickly</p> <p>Authorized by FDA based on clinical testing ..... Approved by FDA, Operation Warp Speed, Emergency Use Authorization<sup>1</sup></p> <p>Get the latest information ..... There are things we still don't know</p> <p>Keep your family safe; keep those most vulnerable safe ..... Keep your country safe</p> <p>Public Health ..... Government</p> <p>Health / medical experts and doctors ..... Scientists</p> <p>People who have questions ..... People who are hesitant, skeptical, resistant, or 'anti-vaxxers'</p>	<h3>Don't Say</h3> <p>Injection or shot</p> <p>A vaccine developed quickly</p> <p>Approved by FDA, Operation Warp Speed, Emergency Use Authorization<sup>1</sup></p> <p>There are things we still don't know</p> <p>Keep your country safe</p> <p>Government</p> <p>Scientists</p> <p>People who are hesitant, skeptical, resistant, or 'anti-vaxxers'</p>
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<sup>1</sup> The perceived speed of vaccine development is a current barrier among many audiences. These recommendations are based partly on research conducted by the de Beaumont Foundation.

### Messaging Elements That Resonate

**Validate Concerns & Answer Questions**  
Acknowledge people's hesitancy rather than challenge it. Provide scientifically-based plain language answers.

**Moments Missed**  
Reference things the people miss most. With many feeling COVID-19 fatigue, missed moments (especially human connections that we took for granted like visiting family and friends) serve as a powerful reminder of the ultimate end goal: vaccination as a pathway to the possibility of regaining these moments.

**Protection**  
Emphasize "protecting myself, loved ones, and those in my community" (rather than "coming together as a nation").

**Positive Tone**  
Be inviting and respectful as opposed to demanding. Acknowledge that the "choice is yours to make," which connects with the deeply rooted American value of liberty.

### Messaging Elements That DON'T Resonate

**Negativity & Fear**  
People push back when reminded of how difficult a year it's been—it tends to put them in a pessimistic, hopeless or frustrated frame of mind. Fear tactics are likely to backfire because this does little to generate trust or answer people's questions about vaccines.

**Guilt**  
References to "many people already stepping up" can come off as pushy or accusatory. Those who are hesitant do not see themselves as "free riders" letting others take risks first, rather, they are worried about being "guinea pigs" for new COVID-19 vaccines.

**Overpromising**  
Avoid claims that are unproven. Being overly rosy may cause concern. Be clear about the facts without any sugarcoating. Most people understand that mass vaccination is a long-term process. Avoid messages that inadvertently imply that vaccine availability will "flip the switch."

**"Back to Normal"**  
Some just want things to "get back to normal," but for others, post-pandemic life will never be "the way it was." It's more about getting back to life rather than back to normal. Messages that focus on economic recovery—rather than public health—do not perform well.

Research, insights, & content provided by Kaiser Family Foundation, AdCouncil, & COVID Collaborative

#ThisIsOurShot | f ThisIsOurShot2021 | ThisIsOurShot | www.thisisourshot.info

## TOP 5 REASONS

# Your Kids Should Get the COVID-19 Vaccine

With students heading back to in-person instruction, here are some things you need to know about protecting your children with the COVID-19 vaccine.

**Unvaccinated children are at risk of getting COVID-19,** and can suffer very serious complications, and potential long-term impacts that we are still learning about. The vaccine is safe and effective, and no long-term problems have been seen for any vaccine.

**The science behind the vaccine** has been under development and studied by The U.S. Department of Health and Human Services for over 20 years.

**Getting those who are eligible vaccinated** can help keep school communities safe.

**Kids have missed critical social and emotional milestones** with their school community. Getting them safely back to the classroom and their favorite afterschool activities helps support their mental health and wellness.

**Vaccines are safe, effective, and free,** regardless of insurance or immigration status.

Get your children back to school safely. Get them vaccinated against COVID-19 today! Learn more at [VaccinateALL58.com](https://www.vaccinateall58.com).

VaccinateALL58.com



# COVID-19 Vaccine Support

## Type of Support

## Description

Updated 11.15.22



### COVID-19 Provider Call Center

The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace.

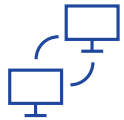
- Email: [covidcallcenter@cdph.ca.gov](mailto:covidcallcenter@cdph.ca.gov)
- Phone: (833) 502-1245, Monday through Friday from 8AM–6PM



### Enrollment Support

For Provider enrollment support, please contact myCAvax Clinic Operations at

- Email: [myCAvaxinfo@cdph.ca.gov](mailto:myCAvaxinfo@cdph.ca.gov)

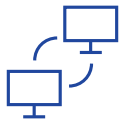


### myCAvax Help Desk

Dedicated staff provide up-to-date information and technical support on the myCAvax system.

- Email: [myCAvax.HD@cdph.ca.gov](mailto:myCAvax.HD@cdph.ca.gov)
- Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM

For training opportunities: <https://eziz.org/covid/education/>

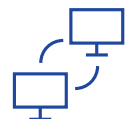


### My Turn Clinic Help Desk

For **onboarding support** (those in the process of onboarding): [myturnonboarding@cdph.ca.gov](mailto:myturnonboarding@cdph.ca.gov)

For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: mail to: [MyTurn.Clinic.HD@cdph.ca.gov](mailto:MyTurn.Clinic.HD@cdph.ca.gov) or (833) 502-1245, option 4: Monday through Friday 8AM–6PM

For job aids, demos, and training opportunities: flu at <https://eziz.org/covid/myturn/flu/> and COVID at <https://eziz.org/covid/myturn/>



### Archived Communications

For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit

- Website: [EZIZ Archived Communications](#)

# California Providers Stay Informed!

To be added to CDPH messaging services is as easy as 1-2-3!



**1** COVID-19 Vaccine Provider Listserv Emails: Please email [blanca.corona@cdph.ca.gov](mailto:blanca.corona@cdph.ca.gov)

**2** COVID Therapeutics:

**COVID Tx Providers Newsletter Sign Up**

First Name\*

Last Name\*

Email\*

Organization/Clinic\*

Role/Title\*

Sign up to the following newsletters:

COVID Tx Providers/LHJs

[COVID-19 Therapeutics Newsletter Sign-up](#)

**3** mpox

**mpox Newsletter Sign Up**

First Name\*

Last Name\*

Email\*

Organization/Clinic\*

Role/Title

Sign up to the following newsletters:

mpox-Providers, LHJ & Leadership

[Mpox Newsletter Sign-up](#)

# Upcoming Opportunities



## Monday

### My Turn and myCAvax Office Hours

Next session: Monday, December 12, 12PM-1PM

## Friday

### Provider Consolidated Webinar

Next session: Friday, December 9, 9AM-10:30AM

**Note:** New session length of 90-minutes to include COVID-19 Vaccine, COVID-19 Therapeutics, MPX Vaccine, and MPX Therapeutics



**Special Thanks to  
Today's Presenter:**

Alex McDonald, MD, CAQSM, FAAFP

**Webinar Planning & Support:**

Rachel Jacobs, Tyler Janzen, Leslie Amani, Blanca Corona

