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Considerations for Co-location of Immunization Services with COVID-19 Testing Update January 2021

Provision of COVID-19 vaccine, influenza vaccine and other routine vaccines should meet these goals:

- **Immunize the public in settings that are safe for the public and staff**, including
 - Settings that routinely manage ill persons using appropriate infection control precautions.
 - Public venues where symptomatic persons are discouraged to attend or are separated from well persons in space and/or time.
- Reassure the concerned public that immunization clinics are safe to visit.
- [CDC guidance](#): “Vaccination of persons with known current SARS-CoV-2 infection should be deferred until the person has recovered from the acute illness (if the person had symptoms) and [criteria](#) have been met for them to discontinue isolation.”
- Apply lessons learned from successful stand-alone COVID-19 testing to mass immunization sites:
 - Safe delivery of services while maintaining social distancing
 - Efficient patient flow
 - Walk-up, drive-up, and drive-through procedures
 - Pre-screening and pre-registration
 - Community outreach

Considerations at different immunization venues

- Primary care clinics and emergency rooms: Such venues routinely implement infection control measures, separate ill and well patients, screen patients for symptoms of COVID-19, and make individualized clinical assessments on the appropriateness of immunization. With these procedures in place, it is acceptable to both administer COVID-19 testing and immunize in these settings.
- Stand-alone COVID-19 testing venues or events: These sites test both symptomatic and asymptomatic persons for COVID-19; COVID-19 testing venues may be located in sites that are convenient for at-risk community members.
 - Risks of also offering immunization include:
 - Bringing together infected patients, well patients, and staff.
 - Difficulty distinguishing which persons requesting testing are also eligible for immunization.
 - Difficulty distinguishing whether symptoms after immunization are due to immunization or illnesses such as influenza or COVID-19.
 - A venue potentially may be used for both stand-alone COVID-19 testing and [mass immunization](#) if:
 - Activities are separated by space (e.g., different sides of a fairgrounds parking lot) and/or



time.

- There is appropriate publicity and procedures before and during the clinic
 - Patients are clearly directed to separate zones for testing versus for immunization.
 - Describe the measures taken to keep patients and staff safe from exposures.
 - Consideration can be given to assigning staff to either testing or vaccination as an infection control measure.
- Immunize at locales frequented by healthy people during the pandemic:
 - To reduce the potential risks of immunizing at testing sites, consider immunizing at or near social service providers, grocers, food banks, schools, workplaces, etc.