



Saturday, December 12, 2020

Advisory Committee on Immunization Practices  
Centers for Disease Control and Prevention  
Docket No: CDC-2020-0122  
Via electronic submission to [www.regulations.gov](http://www.regulations.gov)

On behalf of the Society of Infectious Diseases Pharmacists (SIDP), thank you for the opportunity to submit comments for the ACIP meeting on Coronavirus Disease 2019 Vaccines. SIDP is the national professional organization of 1,600 pharmacists and other healthcare professionals practicing in infectious diseases pharmacotherapy in hospital, industry, academic, and other settings. For 30 years, SIDP has been dedicated to promoting the appropriate use of antimicrobial agents and improving the health of patients with infections.

**We advocate for the need for a comprehensive, national COVID-19 vaccination plan.**

As health care providers we advocate for a comprehensive national strategy to reference in our provision of the vaccine and to share with our patients. We recognize and applaud the national vaccine distribution plan. However, there is an urgent need for a framework encompassing not only distribution but also deployment and operationalization of vaccine administration that is consistent with ACIP recommendations. Vaccine supply transparency is also paramount to a successful vaccination plan. Individual organizations are currently creating their own plans for deploying the vaccine, educating patients and providers, etc. A comprehensive national strategy that our city and state health departments, organizations, providers and patients could reference is needed. Additionally, we wish to reinforce the role of pharmacists as accessible, knowledgeable immunizers and essential for a comprehensive, national COVID-19 vaccination framework. Finally, we support COVID-19 vaccine-targeted educational campaigns to counter vaccine hesitancy for health care professionals and the public. Public service announcements from the federal government to the U.S. population regarding COVID-19 vaccine efficacy and side effects are needed. ACIP should continue to advocate for such large-scale education of the public.

**We applaud the agency's commitment to robust surveillance of efficacy and safety.**

We support efforts to conduct robust efficacy and safety surveillance post-vaccination. Healthcare systems will be challenged to administer the vaccine under EUA criteria and complete required EUA paperwork. We request guidance be provided at a national level on our obligations for post-vaccine surveillance under the EUA and that the surveillance process be made as simple as possible, so the administrative burden of this large-scale work does not detract from direct patient care efforts of healthcare systems. Additionally, we propose the window to submit unexpected adverse events be extended beyond 7 days as it is possible vaccine recipients may not self-report until the time for the second dose. Lastly, we advocate for continuation of clinical trials to assess response in a broader population and to provide further information on the durability of response.

Sincerely,

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President, SIDP

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