

MODERNA COVID-19 VACCINATION SCHEDULE AND DOSING

Moderna Ages 6 months–4 years

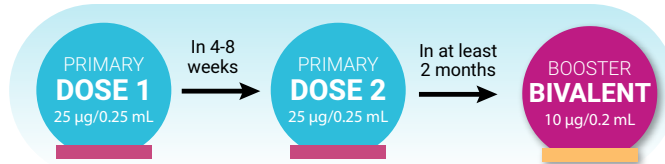
dose/injection volume
(Do NOT dilute before use)

Primary Dose:

Blue Cap (magenta label)

Bivalent Booster Options:

Moderna Dark Pink Cap (yellow label)



Moderna 5 year olds ONLY

dose/injection volume
(Do NOT dilute before use)

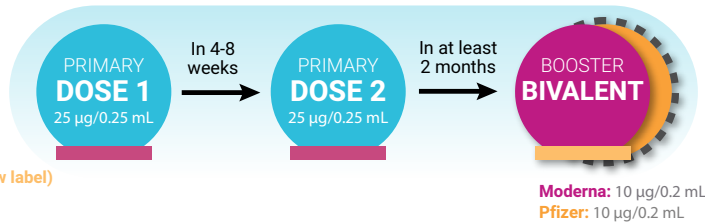
Primary Dose:

Blue Cap (magenta label)

Bivalent Booster Options:

Moderna Dark Pink Cap (yellow label)

Pfizer Orange Cap



Moderna Ages 6 years–11 years

dose/injection volume
(Do NOT dilute before use)

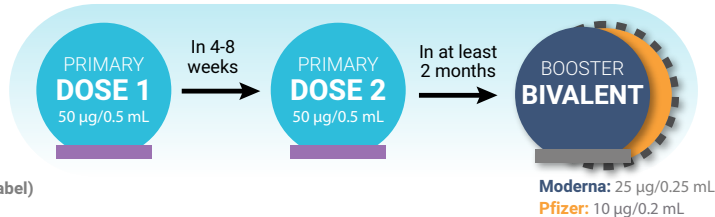
Primary Dose:

Blue Cap (purple label)

Bivalent Booster Options:

Moderna Dark Blue Cap (gray label)

Pfizer Orange Cap



Moderna Ages 12 years and older

dose/injection volume
(Do NOT dilute before use)

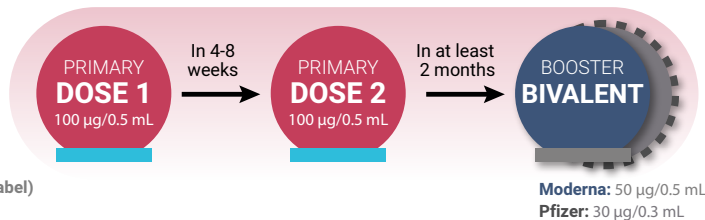
Primary Dose:

Red Cap (blue label)

Bivalent Booster Options:

Moderna Dark Blue Cap (gray label)

Pfizer Gray Cap



See the [Moderna COVID-19 Age Transition Vaccine Guidance](#) for children who are transitioning from a younger to older age group during their vaccination window.

* Complete the primary series with same product. If the vaccine product previously administered cannot be determined or is no longer available, any age-appropriate mRNA COVID-19 vaccine product may be administered at least 28 days after the first dose.

† Persons with a recent SARS-CoV-2 infection may consider delaying a primary series or booster dose by 3 months from symptom onset or positive test (if infection was asymptomatic).

‡ Some studies in adolescents and adults have shown the small risk of myocarditis associated with mRNA COVID-19 vaccines might be reduced and peak antibody responses and vaccine effectiveness may be increased with an interval longer than 4 weeks. An 8-week interval may be optimal for people who are not moderately or severely immunocompromised and ages 6 months–64 years, especially for males ages 12–39 years. Source: [CDC](#).

See the [CDC's Guidance](#) for latest updates and information on who is considered moderately or severely immunocompromised.

Funding for this project was made possible by the Office of Disease Control, through the Illinois Department of Public Health.