Instructions for Scheduling a COVID-19 Vaccination Appointment with Rite Aid

Last updated 2/19/2021 using Google Chrome

Website: https://www.riteaid.com/pharmacy/covid-qualifier

Availability: Rite Aid will usually open many appointments just before midnight. Watch www.vaxmaxx.com for real-time availability.
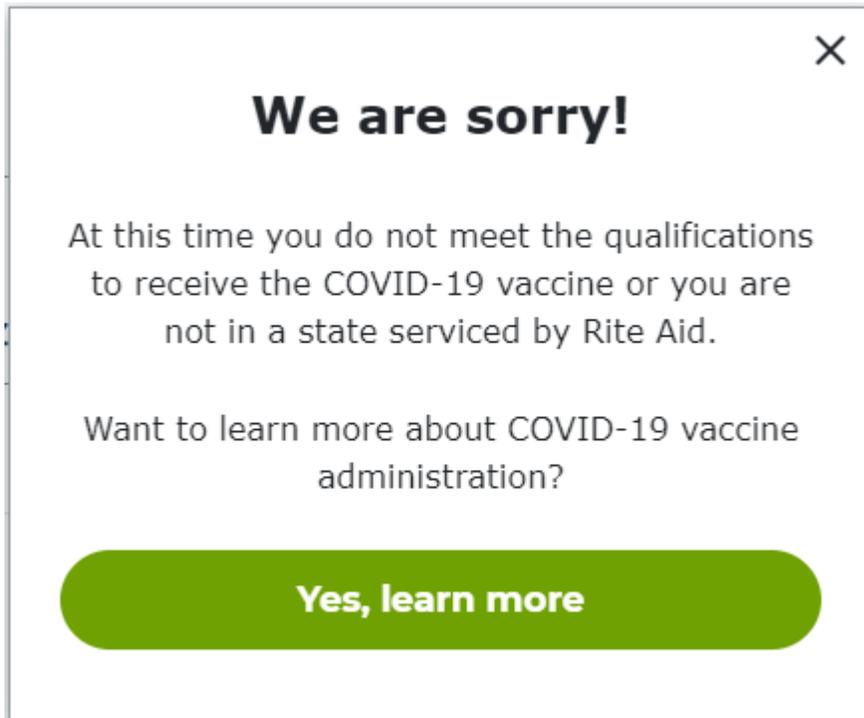
Qualification Screen

Enter the information requested. Everything is required except for zip code. If you enter a zip code, it should be used to search for nearby pharmacies on the next screen.

Click on the "COVID-19 – Dose 1" box.

Click on the "Next" button.

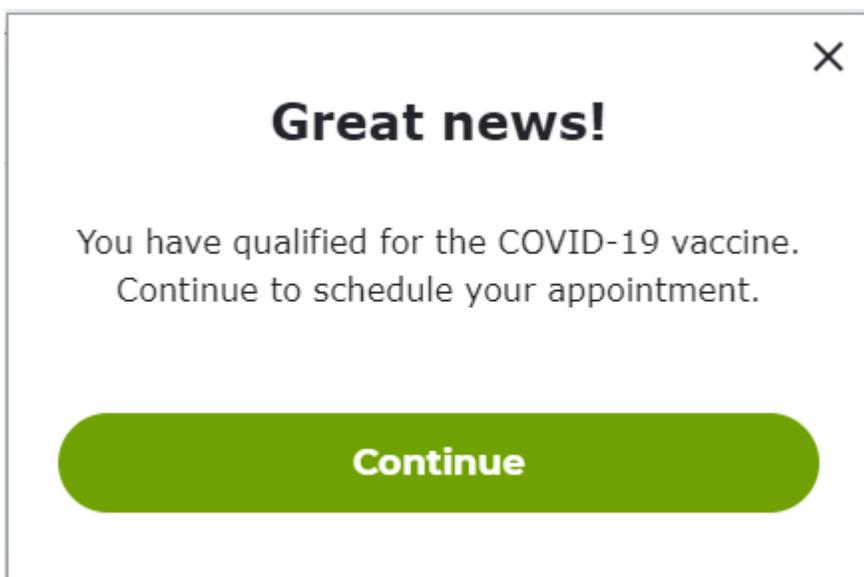If you do not qualify, you will see the following message:

If you do qualify, you will see the following message:

Select a Pharmacy Screen

If you entered a zip code on the Main Screen, it should show in the search bar along with a list of surrounding Rite Aids administering the vaccine. If you did not enter a zip code on the Main Screen, type a zip code or city, state in the search bar.

Click on the "Find Stores" button (this step is necessary whether or not you typed in the search bar).

Click on the "Select this store" button beneath the first pharmacy you are willing to visit.

Click on the "Next" button.

Select a Pharmacy Screen – No Appointments Available

If you see the "Apologies…" message:

Click on the "Select this store" button below the next location you are willing to visit.

Click on the "Next" button.

Continue selecting stores down the list as far as you are willing to go. You can also search a different zip code or city, state in the search bar.

Scheduling Screen – No Appointments Available

Sometimes you will advance to the Scheduling Screen and see the "Apologies" message, but a calendar and time slot are displayed. You can either:

Click on the "Previous" button and return to the Select a Pharmacy Screen to search other pharmacies for an appointment.

OR

Click on a time slot if one isn't already selected. If the "Next" button turns green, click on it to proceed. Although it is unlikely that the appointment is available, if you are able to continue, you can provide the information requested in the upcoming pages. When you reach the last page, if the appointment is unavailable or the time or date don't work for you, you can edit the appointment. All of the information you provided will be saved so the next time you find an appointment, you simply need to click the "Next" buttons on those screens and you will reach the last page faster.

Scheduling Screen – Appointments Available

Click on a time slot if the date selected works for you. Otherwise, double click on a blue date and select a time slot that works for you.

Click on the "Next" button.

Patient Information Screen

Enter the information requested. Everything is required except for mobile phone number.

Patient Information (continued)

You must choose to either receive reminders by text or email or you can choose both.

Click the toggle button under the "Primary Care Provider" section if you want to skip filling in primary care provider information.

Click on the "Next" button.

Medical Information Screen

Enter the information requested. Everything is required except for weight unless you weigh less than 110 lbs.

Appointment Scheduler

https://www.riteaid.com/pharmacy/apt-scheduler

Update

RITE
AID

Menu   Pharmacy   Search   Your Store Select Store   Sign In Account   0 Item Cart

Do you have a long-term health problem with heart disease, kidney disease, metabolic disorder (e.g. diabetes), anemia, or blood disorders?

| Yes | No | Don't Know |

Do you have a long-term health problem with lung disease or asthama?

| Yes | No | Don't Know |

Do you use any nicotine products?

| Yes | No | Don't Know |

Do you have allergies to medications, food (i.e. eggs), latex or any vaccine component (e.g. neomycin, formaldehyde, gentamicin, thimerosal, bovine protein, phenol, polymyxin, gelatin, baker's yeast or yeast)?

| Yes | No | Don't Know |

Have you recieved any vaccinations in the past 4 weeks?

| Yes | No | Don't Know |

Have you ever had a serious reaction after recieving a vaccination?

| Yes | No | Don't Know |

Do you have a neurological disorder such as seizures or other disorders that affect the brain or have had a disorder that resulted from vaccine (e.g. Guillain-Barre Syndrome)?

| Yes | No | Don't Know |

Do you have cancer, lukemia, AIDS, or any other immune system problem? (in some circumstances you may be referred to your physician)

| Yes | No | Don't |

Appointment Scheduler

https://www.riteaid.com/pharmacy/apt-scheduler

Update

RITE AID

Menu

Pharmacy

Search

Your Store
Select Store ⌄

Sign In
Account ⌄

0 Item
Cart

Do you take prednisone, other steroids, or anticancer drugs, or have you had radiation treatments?	Yes	No	Don't Know
During the past year, have you recieved a transfusion of blood or blood products, including anti bodies?	Yes	No	Don't Know
Are you parent, family member, or caregiver to a new born infant?	Yes	No	Don't Know
Are you pregnant or could you become pregnant in the next three months?	Yes	No	Don't Know
Will you bring your Immunization Record Card with you?	Yes	No	Don't Know
Are you currently enrolled in one of our medication adherence programs at Rite Aid (OneTrip Refill, Automated Courtesy Refills, or Rx Messaging - Text, Email, Phone)?	Yes	No	Don't Know
Have you had a pneumococcal vaccine? (You may need two different pneumococcal shots)	Yes	No	Don't Know
Have you had a shingles vaccine?	Yes	No	Don't

Medical Information Screen (continued)

Click on the "Next" button.

Screening and Consent Screen

Appointment Scheduler

https://www.riteaid.com/pharmacy/apt-scheduler

RITE AID
Menu

Pharmacy

Search

Your Store
Select Store ˅

Sign In
Account ˅

0 Item
Cart

Home / Pharmacy

Make an Appointment at Rite Aid

Vaccination (edit)

COVID-19 - Dose 1

Store Location (edit)

827 N. Center Street
Corry, PA 16407
Rite Aid #596

Date & Time (edit)

Wednesday, February 24 - 12:45 PM

Screening and Consent Details

I authorize the release of any medical or other information with respect to this vaccine to my healthcare providers, Medicare, Medicaid or other third party payer as needed and request payment of authorized benefits to be made on my behalf to Rite Aid.

1. I acknowledge that my vaccination record may be shared with federal or state or city agencies for registry reporting.

2. I acknowledge that the pharmacist recommends that vaccinated patients should remain in the waiting area, for 20 minutes, after the administration of the immunization.

3. I acknowledge receipt of Rite Aid's Notice of Privacy Practices for Protected Health Information.

4. I acknowledge that the administration of an immunization or vaccine does not substitute for an annual check-up with the patient's primary care physician.

Use your mouse to sign in the box.

Click on the "Next" button.

Review and Submit Screen

Click on the "Submit Appointment" button.

If you receive a red error message that the appointment is no longer available, click on the "Edit your Appointment" button. This will return you to the Select a Pharmacy Screen. Once you can secure another appointment, the answers to the patient and medical information screens are still stored. Simply click on the "Next" buttons and hopefully you will be more successful.

If you are trying to schedule two appointments and hope to schedule them close together at the same location, you should be able to have two tabs open in the same window of Google Chrome so you can enter the information simultaneously.