



COVID-19 Vaccine Message Maps

August 23, 2021

Good vaccine communication has never been more challenging – or more important. We need to frequently share updated information and protect our communities from misinformation. To support health messengers, the Chicago Department of Public Health (CDPH) will issue this message map document on a weekly or as-needed basis

All Chicagoans have full permission to copy or adapt these messages for their communications. No credit is needed. We hope this document helps you answer questions from the community, prepare leadership for press briefings, update website content, write press releases, develop social media posts, and meet other communications needs.

Vaccine Distribution Topline Messages

GET VACCINATED!

You can help stop the pandemic and get back to the activities you love by getting a COVID-19 vaccine.

COVID-19 vaccines are safe and effective. Side effects from vaccination are typically mild and last just a few days. Serious side effects are very rare. The risk of getting COVID-19 and developing severe disease or “long COVID” is much greater than your risk of developing a rare serious side effect of vaccination.

Over 3 million doses of COVID-19 vaccine have been administered to Chicago residents! Nearly 70% of Chicagoans 12 years of age and older have received at least one dose of COVID-19 vaccine!

All Chicago residents age 12+ are eligible for COVID-19 vaccination in Chicago. COVID-19 vaccination is free—there are no out of pocket costs.

If you haven't been vaccinated yet, or are due for a 2nd dose of vaccine, makes plans to get the vaccine as soon as possible.

In-home vaccination is now available to all Chicago residents age 12 and up. Protect Chicago At Home allows for up to 10 people at a Chicago residence to be vaccinated – even if all individuals in at the appointment are not Chicago residents. Anyone vaccinated at home can receive a \$25 Visa gift card. Everyone 12 and up is eligible to be vaccinated.

Call (312) 746-4835 to make an appointment for in-home vaccination, or register online, at <https://www.chicago.gov/city/en/sites/covid19-vaccine/home/in-home-vaccination-program.html>.

WHERE TO GET VACCINATED

Vaccination is available at numerous locations, including doctor's offices, pharmacies, and City of Chicago vaccinations sites, as noted below.

Pharmacies:

- COVID-19 vaccines are available at numerous pharmacy chain locations in Chicago and elsewhere, including: CVS, Jewel Osco, Kroger, Mariano's, Sam's Club, Walgreens, and

Walmart.

Costco: [Register online](#) for an appointment or call the pharmacy directly, including:

- Chicago Costco Pharmacies 1430 S. Ashland (Chicago Medical District): call (312) 492-3601
- Chicago Costco Pharmacies 2745 N. Clybourn Ave (Lincoln Park): call (773) 360-2052
- CVS: [Register online](#) for an appointment
- Jewel Osco: [Register online](#) for an appointment or call 877-723-3929
- Mariano's: [Register online](#) for an appointment
- Walgreens: [Register online](#) at your local Walgreens, or 1-800-WALGREENS (1-800-925-4733)
- Walmart: [Register online](#) for an appointment or call: 833-886-0023; Option 1

In addition to pharmacy websites, additional information about availability of COVID-19 vaccine at some pharmacies can be found at [Zocdoc.com/vaccine](https://www.zocdoc.com/vaccine).

Doctor's Offices:

Many doctor's offices in Chicago have COVID-19 vaccine available by contacting the office directly or booking through [Zocdoc](#).

Zocdoc:

Zocdoc is a centralized vaccine appointment booking site used by numerous vaccination providers. Zocdoc offers translation in 100 languages. To look for appointments throughout Chicago, confirm your location and eligibility, and receive real-time appointment availability, go to [zocdoc.com/vaccine](https://www.zocdoc.com/vaccine), or contact the City's call center at 312-746-4835.

City of Chicago Vaccination Sites:

All City of Chicago vaccine sites accept walk-ins. A parent or guardian must accompany any minor under age 18 (with few exceptions). **It is important to note that the only vaccine currently available for people ages 12 through 17 at this time is the Pfizer vaccine.** Appointments can be booked through the City's call center at 312.746.4835 or through www.zocdoc.com/vaccine.

Check for updates on the [CDPH website](#)

SITE	ADDRESS	DAYS AND HOURS OF OPERATION	ELIGIBILITY	TYPE OF VACCINE	REGISTRATION
CDPH Greater Lawn Immunization Clinic	4150 W 55th St	Monday - Friday: 8am - 4pm	Anyone 12+	Pfizer and Johnson & Johnson	Walk-ins welcome. Create an account and register for an appointment at https://getvaxchi.chicago.gov If assistance is needed, email getvaxnow@chicago.gov .
CDPH Uptown WIC Clinic	845 W. Wilson Ave., 2nd level	Mon, Wed, Fri: 8am - 3pm Tues, Thurs: 9am - 4pm	Anyone 12+	Pfizer and Johnson & Johnson	Walk-ins welcome. Create an account and register for an appointment at https://getvaxchi.chicago.gov If assistance is needed, email getvaxnow@chicago.gov .

Community Events:

CDPH coordinates with multiple community organizations to provide on-site vaccination. The vast majority of these events offer both Pfizer and J&J. Check our calendar to find a community vaccine event in your neighborhood!

<https://www.chicago.gov/city/en/sites/covid19-vaccine/home/calendar-of-events.html>.

If you are interested in hosting an on-site vaccination event for your community, please complete our **Vaccination Event Interest Form**. Due to the number of outreach events we are organizing, we may not be able to accommodate every request, but we will do our best to work with your organization and otherwise connect you to vaccination resources.

Chicago Public Schools

CPS has opened three school-based vaccination sites for students and their families, as well as CPS staff, at the schools listed below. The vaccine is free for all and walk-ins are welcome. Sign-up is here.

SITE	ADDRESS	DAYS AND HOURS OF OPERATION	ELIGIBILITY	TYPE OF VACCINE	REGISTRATION
Chicago Vocational Career Academy	2100 E 87th St	Tuesdays 9 a.m. - 1 p.m. Back to School Bash on Friday, August 27 12 p.m - 5 p.m/ (no appointment needed)	Anyone 12+	Pfizer and Johnson & Johnson	Walk-ins welcome, appointments can be made online . Additional information available on

					the CPS website .
Theodore Roosevelt High School	3436 W Wilson Ave	Wednesdays 9 a.m. - 1 p.m.	Anyone 12+	Pfizer and Johnson & Johnson	Walk-ins welcome, appointments can be made online . Additional information available on the CPS website .
Michele Clark High School	5101 W Harrison St	Thursdays 9 a.m. - 1 p.m.	Anyone 12+	Pfizer and Johnson & Johnson	Walk-ins welcome, appointments can be made online . Additional information available on the CPS website .

Protect Chicago At Home

In-home vaccination is now available to all Chicago residents age 12 and up. Protect Chicago At Home allows for up to 10 people at a Chicago residence to be vaccinated – even if all individuals in at the appointment are not Chicago residents. Anyone vaccinated at home can receive a \$25 Visa gift card. Everyone 12 and up is eligible to be vaccinated.

Call (312) 746-4835 to make an appointment or register using the links below:

REGION	NEIGHBORHOOD
Far South	Beverly, Burnside, Calumet Heights, East Side, Hegewisch, Morgan Park, Mount Greenwood, Pullman, Riverdale, Roseland, South Deering, Washington Heights, West Pullman
Near South	Auburn Gresham, Avalon Park, Chatham, Douglas, Englewood, Fuller Park, Grand Boulevard, Greater Grand Crossing, Hyde Park, Kenwood, Oakland, South Chicago, South Shore, Washington Park, West Englewood, Woodlawn
North / Central	Edgewater, Lake View, Lincoln Park, Lincoln Square, Loop, Near North Side, Near South Side, North Center, Rogers Park, Uptown, West Ridge
Northwest	Albany Park, Avondale, Belmont Cragin, Dunning, Edison Park, Forest Glen, Hermosa, Irving Park, Jefferson Park, Logan Square, Montclare, North Park, Norwood Park, Portage Park
Southwest	Archer Heights, Armour Square, Ashburn, Bridgeport, Brighton Park,

	Chicago Lawn, Clearing, Gage Park, Garfield Ridge, McKinley Park, New City, West Elsdon, West Lawn
West	Austin, East Garfield Park, Humboldt Park, Lower West Side, Near West Side, North Lawndale, South Lawndale, West Garfield Park, West Town

Vaccination Station Bus

The “Vaccination Station” is a rolling vaccine clinic on a bus that offers either single-dose Johnson & Johnson or two-dose Pfizer vaccine. The current schedule for the Vaccination Station bus is:

Community Area	Location	Time
South Shore	Atlas Senior Center 1767 E. 79th Street	Wednesdays, 10 AM – 2 PM
Englewood	The Salvation Army Adele and Robert Stern Red Shield Center 945 W. 69th St	Thursdays, 1:30-4:30PM
Austin	North Austin Library 5724 W. North Avenue	Fridays, 10 AM -2 PM

Updates to the Vaccination Station schedule are posted at:

<https://www.chicago.gov/city/en/sites/covid19-vaccine/home/vaccination-station.html>.

Cook County Vaccination Sites:

See <https://cookcountypublichealth.org/calendar/> for scheduled events

State of Illinois Mass Vaccination Sites

Statewide COVID-19 mass vaccination locations are listed at

<https://coronavirus.illinois.gov/s/statewide-vaccination-locations>. Vaccination at these locations is available to all Illinois residents that meet eligibility criteria, regardless of zip code. For most mass vaccination sites, appointments for eligible individuals can be booked through <https://covidvaccination.dph.illinois.gov/questionnaire> or through links provided at <https://coronavirus.illinois.gov/s/statewide-vaccination-locations>.

State of Indiana Vaccination Sites

Anyone age 12+ from Chicago can be vaccinated in Indiana, regardless of residence. To register in Indiana, go to <https://vaccine.coronavirus.in.gov/en-US/> or call 866-211-9966 if you do not have

access to a computer or need assistance.

Regardless of where you are vaccinated, there are no out of pocket costs for the COVID-19 vaccine.

VACCINE EQUITY

Equity drives all vaccine distribution in the City of Chicago. The City launched a grassroots community initiative in January called *Protect Chicago Plus*, which targets vaccine distribution to ensure vaccine supply reaches the individuals and communities most impacted by the COVID-19 pandemic, which are predominantly Black and Latinx.

Protect Chicago Plus builds on the work of Mayor Lightfoot's Racial Equity Rapid Response Team, an initiative that has been integral to deploying resources to Chicago communities most in need throughout the pandemic. The program includes partnerships with community-based organizations and social service agencies, faith communities, and City Council members to host vaccination events. Learn more about Protect Chicago Plus at <https://www.chicago.gov/city/en/sites/covid-19/home/protect-chicago.html>.

Data on vaccination by race/ethnicity can be found on the CDPH website, at: <https://www.chicago.gov/city/en/sites/covid19-vaccine/home/vaccine-data.html>

FOR MORE INFORMATION

The City's COVID-19 vaccine website, www.chicago.gov/COVIDvax, contains detailed vaccine information including FAQs, vaccine safety information, vaccine distribution phases, communications toolkits for employers and community organization, and more.

To sign up for text updates on the vaccine in Chicago, including updates on when, where, and how vaccination may be offered, go to <https://covidcoach.chicago.gov/>

Medical Topline Messages

- The safety of COVID-19 vaccines is a top priority. No steps are skipped during the clinical trial process. Vaccine safety checks are in progress and will continue.
- As of August 23rd, the Pfizer mRNA vaccine has received full approval by the FDA for use as a 2 dose series in individuals age 16 years and above. The Pfizer vaccine will continue to be authorized for emergency use for children ages 12 to 15 (2 doses) and immunocompromised individuals (3 doses) while Pfizer collects the necessary data required for full approval for these groups.

- Getting vaccinated will help keep you from getting sick with COVID-19 and will also help reduce the spread of COVID-19. People who have gotten sick with COVID-19 should still get vaccinated.
- Vaccines are very effective at preventing hospitalization and death from COVID-19 infection, and getting vaccinated allows you to return to the activities you love and miss.
- Side effects from vaccination are typically mild and last just a few days. Serious side effects are very rare. The risk of getting COVID-19 and developing severe disease or “long COVID” is much greater than your risk of developing a rare serious side effect of vaccination.
- **CDC continues to recommend COVID-19 vaccination for everyone 12 years of age and older** who has not been vaccinated given the risk of COVID-19 illness and related, possibly severe complications, such as long-term health problems, hospitalization, and even death.
- **Third doses of mRNA vaccines:**
Some people who are moderately to severely immunocompromised (meaning they have a weakened immune system) did not build enough protection after their first two doses of mRNA vaccine. Getting another dose of vaccine will sometimes help build more protection. People who are moderately to severely immunocompromised are now eligible for a third dose of the Pfizer or Moderna vaccine, at least 28 days after the second dose.

This includes people who have:

- Been receiving active cancer treatment for tumors or cancers of the blood
- Received an organ transplant and are taking medicine to suppress the immune system
- Received a stem cell transplant within the last 2 years or are taking medicine to suppress the immune system
- Moderate or severe primary immunodeficiency (such as DiGeorge Syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids or other drugs that may suppress your immune system

The recommendation for a 3rd dose for immunocompromised individuals is based on studies that show that the vaccines do not work as well for some people with immunocompromising conditions as compared to people without such conditions. People with immunocompromising conditions are at higher risk for severe COVID-19 and are more likely to have a “breakthrough” infection after being fully vaccinated.

- If you have an immunocompromising condition or are taking drugs that weaken your immune system, discuss with your doctor whether you should get a third dose, as well as where and when to get it.
- **People who are immunocompromised should not stop other precautions after receiving a third dose.** Even after receiving a 3rd dose, you should continue all precautions, including avoiding crowds (especially indoors) and wearing a mask and practicing physical distancing whenever you are outside your home. Also, it is extra important for people who

are living with, or regularly in contact with, someone who is immunocompromised to get vaccinated and follow other public health precautions.

Protection against mild and moderate COVID-19 illness begins to decrease over time following the initial mRNA vaccine series, and we are starting to see evidence of reduced protection against mild and moderate disease in both healthy and frail individuals.

- CDC believes that protection against severe disease, hospitalization, and death could diminish in the months ahead, especially among those who are at higher risk or were vaccinated during the earlier phases of the vaccination rollout. For that reason, “booster shots” are beginning to be offered to maximize protection from vaccines. Pending FDA and ACIP approval, it is anticipated that booster shots (3rd doses) of the Pfizer and Moderna vaccines will begin to be offered to health care providers, and nursing home residents the week of September 20th, 8 months after an individual’s second dose.
- It is also expected that booster shots of the J&J vaccine will be recommended by the FDA and ACIP in the coming weeks.

Pfizer-BioNTech and Moderna

- The Pfizer-BioNTech and Moderna COVID-19 vaccines require two shots for most individuals, with booster doses being recommended for at least some individuals in the near future. If you are moderately or severely immunocompromised, you should receive three shots.
- People are considered “fully vaccinated” two weeks after their second shot of mRNA vaccine, or two weeks after their single shot of J&J vaccine. (This definition is still being used for immunocompromised individuals, whether or not they have received a third dose).
- Available data suggest an increased incidence of myocarditis following mRNA vaccines-- about 1 per 50,000 vaccine recipients. There has not been a similar reporting pattern observed after receipt of the Johnson and Johnson COVID-19 Vaccine.
- Reported cases of myocarditis have occurred predominantly in male adolescents and young adults less than 30 years of age. Onset is typically within a week after mRNA COVID-19 vaccination, and cases have occurred more often after the second dose than the first dose.
- Most individuals diagnosed with myocarditis after mRNA vaccination are doing well and have been discharged from the hospital after a few days. CDC will be conducting long-term follow up of these individuals as part of its safety monitoring program.
- Vaccinated individuals (and parents of teens) should watch for symptoms that may include chest pain, pressure, heart palpitations, and difficulty breathing after exercise or when lying down. If a recently vaccinated individual develops these symptoms or you are unsure, contact the vaccinated individual’s doctor or seek more immediate medical assistance if needed. Patients can usually return to their normal daily activities after their symptoms improve, and they should speak with their doctor about return to exercise or sports.

- The CDC recommends that individuals diagnosed with **myocarditis or pericarditis** after the first dose of an mRNA vaccine should defer their 2nd dose. People who have a history of myocarditis or pericarditis *unrelated* to mRNA COVID-19 vaccination may receive any FDA-authorized COVID-19 vaccine after the episode of myocarditis or pericarditis has completely resolved (resolution of symptoms as well as no evidence of ongoing heart inflammation or sequelae).
- **CDC continues to recommend COVID-19 vaccination for everyone 12 years of age and older** who has not been vaccinated given the risk of COVID-19 illness and related, possibly severe complications, such as long-term health problems, hospitalization, and even death.

Johnson & Johnson (J&J)

- The J&J vaccine is administered as a single shot, to individuals 18 years of age and older.
- The J&J vaccine cannot give someone COVID-19.
- As of June 14, 2021, the CDC and Food and Drug Administration have identified 36 confirmed reports of people who received the J&J vaccine and later developed adverse events due to Thrombosis with Thrombocytopenia Syndrome (TTS).
 - Though very rare, TTS is a serious, potentially life-threatening illness involving unusual blood clots (e.g cerebral venous sinus thrombosis) and low levels of platelets, The risk of TTS appears to be highest among women <50 years of age, occurring in approximately 1 out of every 143,00 females age 18-49 who have received the J&J vaccine. Early diagnosis and appropriate treatment, which differs from the treatment often used to treat blood clots, is important to reduce the risk of severe complications and death.
 - People who have received the J&J COVID-19 vaccine within the previous three weeks who develop severe headache, abdominal pain, leg pain, or shortness of breath should seek medical care right away. Health care providers administering the vaccine and vaccine recipients/caregivers should review J&J fact sheets for [vaccine providers](#) and for [recipients/caregivers](#), which include information about TTS.
 - As of July 12, 2021, CDC has received approximately 100 reports of Guillain-Barré syndrome (GBS) among 12.8 million recipients of the J&J vaccine. Evaluation of these reports by CDC suggests an increased risk of GBS within 42 days after getting vaccinated, and cases are being investigated by vaccine safety experts at the CDC.
 - GBS is a neurological disorder in which the body's immune system damages nerve cells, causing muscle weakness and sometimes paralysis. Each year in the United States, an estimated 3,000 to 6,000 people develop GBS, due to a variety of causes. GBS has been observed at an increased rate associated with certain vaccines, including certain seasonal influenza vaccines and a vaccine to prevent shingles.
 - Most people diagnosed with GBS recover fully.

- People should seek medical attention if they notice symptoms such as weakness or tingling in the arms and legs, especially if it spreads, after receiving the J&J vaccine.
- CDC and FDA will continue to monitor reports of Guillain-Barre Syndrome (GBS) in people who have received the J&J COVID-19 Vaccine and will share more information as it becomes available
- Individuals with a history of GBS can receive any of the authorized COVID-19 vaccines, but should discuss the availability of mRNA vaccines (Pfizer, Moderna) with their clinical team
- **The benefits of COVID-19 vaccination continue to far outweigh the potential risks.**
- Health care providers administering the vaccine and vaccine recipients/caregivers should review J&J fact sheets for vaccine providers and for recipients and caregivers, which have been updated to include information about TTS and GBS.
- Increased occurrence of TTS and GBS have not been observed after receipt of the Pfizer and Moderna COVID-19 vaccines.
 - Individuals may consider safety information when deciding which vaccine to receive.
 - **Individuals who have a preference to receive a particular vaccine should check what vaccines are available where they plan to be vaccinated. Appointments for all three vaccines can be found on zocdoc.com/vaccine or at a local pharmacy. As a note the only vaccine available to individuals age 12-17 is Pfizer.**

Guidance for Fully Vaccinated People:

Updated CDC guidance, issued on July 27, recommends that if you are fully vaccinated, :

- You can resume activities that you did prior to the pandemic.
- To reduce the risk of being infected with the Delta variant and possibly spreading it to others, wear a mask indoors in public if you are in an area with [substantial or high transmission](#). Chicago is currently an area with high transmission.

You might choose to wear a mask regardless of the level of transmission if you have a weakened immune system or if, because of your age or an underlying medical condition, you are at [increased risk for severe disease](#) or if a member of your household has a weakened immune system, is at increased risk for severe disease, or is unvaccinated.

- You should wear a mask in school settings, the same as is recommended for unvaccinated individuals.
- If you [travel in the United States](#) you do not need to get tested before or after travel or self-quarantine after travel.
- You need to pay close attention to the situation at your [international destination](#) before traveling outside the United States.
 - You do NOT need to get tested **before** leaving the United States unless your destination requires it.
 - You still need to [show a negative test result](#) or documentation of recovery from COVID-19 **before** boarding an international flight to the United States.

- You should still get tested 3-5 days **after** international travel.
- You do NOT need to self-quarantine **after** arriving in the United States.
 - CDC guidance for international travel can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/international-travel-during-covid19.html>
- **New guidelines from the CDC recommend that fully vaccinated people who have come into close contact with someone with suspected or confirmed COVID-19 be tested 3-5 days after exposure, and wear a mask in public indoor settings for 14 days or until they receive a negative test result.** Quarantine is not required for fully vaccinated people following a close contact exposure in the general public (unless symptoms develop in which case they should isolate and get tested for COVID-19).

On July 30, 2021, following CDC guidance for areas with “substantial” or “high” transmission, the City of Chicago recommended that everyone over the age of 2, regardless of vaccination status, wear masks in public indoor settings. Masks remain optional in outdoor settings, where the risk of COVID-19 transmission is lower. The full statement can be found [here](#).

There are limited circumstances and settings where all individuals, including those who are fully vaccinated, must continue to wear a mask in accordance with CDC and federal guidance despite the level of community transmission:

- 1. On public transportation, including CTA, Metra, Pace, taxis, liveries, and ride-hail services,**
- 2. In congregate facilities such as correctional centers and homeless shelters,**
- 3. In health care settings, and where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance**

On July 26, 2021, CDC issued new guidance for schools, which recommends that everyone in K through 12 schools wear a mask indoors, including teachers, staff, students and visitors, regardless of vaccination status. On July 16, 2021, Chicago Public Schools announced that it will continue to require masks when indoors, regardless of vaccination status, at all Chicago Public Schools.

COVID-19 variants:

Currently, several new variants of the virus (SARS-CoV-2) that causes coronavirus disease 2019 (COVID-19) are creating concern. **The Delta variant is now causing almost all COVID-19 infections in Chicago – it spreads more easily than previous strains and is the cause of the current surge we are experiencing.** Use of public health measures, such as masks, physical distancing, isolation and quarantine are essential to limit the spread of the COVID-19 virus and its variants. **The best way to protect yourself against COVID-19 and its variants is to get vaccinated, including getting all recommended doses.**

COVID-19 Vaccine Status, Safety, and Dosing

COVID-19 vaccines are safe and effective. More than 362 million doses of COVID-19 vaccines have been administered in the United States under the most intense safety monitoring in U.S. history.

- COVID-19 vaccine safety is a top priority, and all reports of health problems, such as those reported following receipt of the J&J vaccine, are taken very seriously and investigated as needed. The safety systems in place are working, as the very rare serious events following use of the J&J vaccine were promptly detected and acted upon.
- Serious side effects can occur but are very rare.
- Overall, risks that may exist are considerably lower than those associated with COVID-19 infection, and vastly outweighed by the benefits of protecting people and preventing the virus from spreading.
- CDPH continues to recommend that you get vaccinated for COVID-19 if you are 12 years of age or older.
- People with the following conditions and undergoing the following treatments who previously received 2 doses of the Pfizer or Moderna vaccine should talk to their doctor about a third dose:
 - Active treatment for cancer
 - Received an organ transplant and are taking immunosuppressive therapy
 - Received a stem cell transplant within the past two years
 - Moderate or severe primary immunodeficiency
 - Advanced or untreated HIV
 - Active treatment with a high dose of corticosteroids or other drugs that moderately or severely weaken your immune system
- This is not a complete list. The current recommendation for a third dose is for people who have conditions like those listed above and not for most people with other medical conditions such as diabetes or heart or lung disease. If you have an immunocompromising condition or are taking drugs that weaken your immune system, discuss with your doctor whether you should get a third dose.
- The third dose should be given at least 28 days after the 2nd dose. It is recommended that the third dose should be the same brand as your first two doses, but if it's not possible you can get your dose from the other brand mRNA vaccine brand (Pfizer or Moderna).
- It is anticipated that the FDA and CDC will make additional recommendations this Fall about booster doses, including for people who received the J&J vaccine.

Pfizer-BioNTech COVID-19 Vaccine

- The FDA has conducted a thorough evaluation of safety and efficacy information from over 36,000 clinical trial participants. Clinical trial data indicate the Pfizer-BioNTech vaccine is 91-95% effective in preventing symptomatic COVID-19 infections. The Pfizer COVID-19

vaccine offers similar protection in “real world” conditions.

- The most commonly reported side effects, which can last up to several days, are pain at the injection site, tiredness, headache, muscle pain, chills, joint pain, and fever. More people experience these side effects after the second dose than after the first dose and side effects are less common in people > age 55. **See Medical Topline Messages (above) for additional safety information related to myocarditis and pericarditis.**
- **The Pfizer-BioNTech vaccine is administered as two shots, 21 days apart.** For individuals 16 years of age and older, it received EUA in December 2020, and full FDA approval on August 23, 2021. On May 10, 2021, the FDA expanded its authorization for use of this vaccine to include individuals 12-15 years old. Chicago began administering the Pfizer vaccine to individuals 12-15 years old starting May 13. The Pfizer-BioNTech COVID-19 vaccine does not use a live virus and cannot give someone COVID-19.
- **The second dose of the Pfizer BioNTech and Moderna vaccine should be administered as close to the recommended interval as possible.** However, if it is not possible to adhere to the recommended interval and a delay in vaccination is unavoidable, the second dose of Pfizer-BioNTech and Moderna COVID-19 vaccines may be administered up to 6 weeks (42 days) after the first dose. **The 2nd dose of either of these vaccines can be safely administered even after the 42 day interval.**

See above for Information about 3rd doses of Pfizer vaccine. If a 3rd dose is given to an individual with moderate to severe immunocompromise, it should be at least 28 days after the 2nd dose.

Moderna

- The FDA has conducted a thorough evaluation of safety and efficacy information from over 30,000 clinical trial participants. Clinical trial data indicate the Moderna vaccine was more than 94% effective in preventing symptomatic COVID-19 illness. The Moderna COVID-19 vaccine offers similar protection in “real world” conditions.
- Similar to the Pfizer vaccine, the most commonly reported side effects, which can last up to several days, are pain at the injection site, tiredness, headache, muscle pain, chills, joint pain, and fever. More people experienced these side effects after the second dose than after the first dose, and side effects are less common in people > age 65. **See Medical Topline Messages (above) for additional safety information related to myocarditis and pericarditis.**
- The Moderna vaccine is administered as two shots, 28 days apart, to individuals 18 years of age and older.
- The Moderna vaccine does not use a live virus and cannot give someone COVID-19.
- The University of Illinois at Chicago (UIC) is one of 100 clinical trial sites in the United States for the Moderna vaccine. 75% of trial participants enrolled at the UIC site are from racial/ethnic minorities.
- **The second dose of the Pfizer- BioNTech and Moderna vaccines should be administered**

as close to the recommended interval as possible. However, if it is not possible to adhere to the recommended interval and a delay in vaccination is unavoidable, the second dose of Pfizer-BioNTech and Moderna COVID-19 vaccines may be administered up to 6 weeks (42 days) after the first dose. **The 2nd dose of either of these vaccines can be safely administered even after the 42 day interval.**

- **See above for Information about 3rd doses of Moderna vaccine. If a 3rd dose is given to an individual with moderate to severe immunocompromise, it should be at least 28 days after the 2nd dose.**

Johnson and Johnson (J&J) Vaccine, manufactured by Janssen

- The FDA has conducted a thorough evaluation of safety and efficacy information from over 40,000 clinical trial participants. During the clinical trial, the overall efficacy against moderate to severe illness due to COVID-19 was > 70% in the United States, beginning 28 days after vaccination. Beginning 28 days after vaccination, the vaccine was 100% effective in preventing illness due to COVID-19 requiring hospitalization, and no one who received the vaccine died due to COVID-19. The most commonly reported side effects after vaccination are pain at the injection site, headache, fatigue, and muscle aches. These side effects are typically mild, and last for 1-2 days on average.
- Unusual blood clots due to TTS and GBS have been reported after receipt of the J&J vaccine. See Medical Topline Messages (above) for additional safety information.
- The J&J vaccine is administered as a single shot, to individuals 18 years of age and older.
- The J&J vaccine cannot give someone COVID-19.
- **Recommendations about extra doses for individuals who received a single dose of the J&J vaccine will likely occur this Fall.**

Novavax and Oxford AstraZeneca Vaccines

- These vaccines are currently in phase 3 of clinical trials at numerous sites around the world, including in Chicago. The Oxford Astra Zeneca vaccine uses the same virus vector technology as the J&J COVID-19 vaccine and TTS has been reported to occur infrequently among recipients in Europe.

Vaccine safety is a top priority. Vaccine safety checks are in progress and will continue as long as a vaccine is available. COVID-19 vaccines cannot cause COVID-19 infection as they do not use a live COVID-19 virus.

- Vaccines are one of the best defenses we have against infectious diseases.
- There is solid medical and scientific evidence that the benefits of approved vaccines far outweigh the risks.
- The United States' long-standing vaccine safety system ensures vaccines are as safe as possible. As science advances and new information becomes available, this system will continue to improve.

- The U.S. government maintains the largest, most robust, and most advanced vaccine safety monitoring systems available in the world.
- Ensuring vaccines are safe is a critical process that begins during vaccine development and clinical trials and continues after vaccines are authorized or approved for use.

No steps are skipped during the clinical trial process for COVID-19 vaccine.

- Vaccines are evaluated during three phases of clinical trials before they can be authorized for use by the Food and Drug Administration.
- These clinical trials require thousands of people and months of data.
- COVID-19 vaccine development has been faster than normal because 1) so many people volunteered for the clinical trials; 2) COVID-19 outbreaks across the United States made it possible to rapidly see that volunteers who received placebo (salt water) shots were getting COVID-19 at much higher rates than volunteers who received vaccine; 3) development steps have been taking place at the same time instead of one after another; and 4) 21st century technologies are being utilized in vaccine development and manufacturing.

Vaccine safety checks are in progress and will continue.

- Pausing a vaccine trial is a normal part of the vaccine approval process, and it means the safety checks are working as designed. The U.S. vaccine safety program is very effective at identifying any safety concerns, which is how the CDC was able to pause use of J&J after identifying 6 cases of blood clots. The FDA and CDC recommended resuming use of J&J after reviewing all of the data.
- After a vaccine is authorized, FDA and CDC will continue to monitor it using three federal safety systems that are already in place.
- Safety monitoring allows experts to determine what problems after vaccination are vaccine-related, and which are not. Part of this process is making sure that any health events are not happening in vaccinated groups more frequently than in the general public.

Vaccine Benefits

Safe and effective COVID-19 vaccines are an important tool for ending the global pandemic. Vaccines can protect individuals in different ways. Vaccines also protect the people around you and reduce the spread of COVID-19.

Safe and effective COVID-19 vaccines are an important tool for ending the global pandemic.

- Vaccines work to protect people by helping the body produce immunity.
- A COVID-19 vaccine must meet standards for effectiveness from the FDA. Reports

from clinical trials for all three vaccines available for use indicate that vaccination is 95-100% effective in preventing people from being hospitalized due to COVID-19 infection. This high level of protection occurred beginning 28 days after the single shot of Johnson and Johnson vaccine, and 14 days after receiving the second shot of Moderna or Pfizer-BioNtech vaccine.

- All three vaccines approved for use in the United States are very effective at preventing deaths from COVID-19 illness.

Vaccines can protect individuals in different ways.

- Getting a vaccine helps to keep you from getting infected AND helps keep you from getting very sick or being hospitalized if you do get infected.
- Protection from vaccines can depend on your age and immune system.
- Protection from vaccines can last anywhere from a few months to your whole life.
- The length of protection achieved from various COVID-19 vaccinations will continue to be studied going forward.
- Vaccines also protect the people around you and reduce the spread of COVID-19. You are considered “fully vaccinated” 14 days after receiving your second shot of mRNA vaccine (Pfizer or Moderna), or 14 days after receiving a single shot of J&J vaccine.

Vaccine Approval Process

- The FDA can issue Emergency Use Authorizations (EUAs) for vaccines. During a public health emergency, the FDA can use a process called “Emergency Use Authorization” (EUA) to allow the use of medical products that are not yet approved to diagnose, treat, or prevent serious or life-threatening diseases when certain criteria are met.
- Clinical trials test safety and effectiveness in three phases using thousands of volunteers before it is authorized.
 - Phase I tests for safety in a small number of people.
 - Phase II tests hundreds of people with different characteristics (such as age and health status). This is to understand effectiveness and side effects.
 - Phase III tests thousands of people to assess safety and effectiveness.

- For a vaccine to receive an EUA, the FDA must determine if the vaccine’s benefits outweigh its risks based on data from rigorous clinical trial(s), with an average follow-up of at least 2 months.

Additional information on EUAs: <https://www.fda.gov/vaccines-blood-biologics/vaccines/emergency-use-authorization-vaccines-explained>.

- Manufacturers whose COVID-19 vaccines are authorized under an EUA must continue to obtain additional safety and effectiveness information from clinical trial participants.

For a Biologic License Application (BLA), the FDA requires safety and efficacy data from at least

six months. Pfizer's BLA for use of its mRNA vaccine in individuals age 16 and above was approved by the FDA on August 23, 2021.

Additional information on BLAs:

<https://www.fda.gov/vaccines-blood-biologics/development-approval-process-cber/biologics-license-applications-bla-process-cber>

Moderna is applying to the FDA for full approval for use of its vaccine in individuals age 18 and older. Johnson & Johnson is expected to apply soon for full approval.

COVID-19 Vaccine Side Effects

Some side effects are common after receiving COVID-19 vaccines. These side effects are typically a sign that your body is building protection. The safest way to be protected against COVID-19 is to be vaccinated.

- These side effects may affect your ability to do daily activities, but they should go away in a few days.
- You may have pain and swelling of the on the arm where you received the shot.
- You may also have fever, chills, tiredness, and headache, especially after the second dose of a vaccine.
- COVID-19 vaccination will help protect you by creating an immune response that minimizes the risk of getting infected with the virus that causes COVID-19 and developing severe illness.
- COVID-19 infection may offer some protection against repeat infection (natural immunity), but experts don't know how long this protection lasts, and the risk of severe illness and death from COVID-19 far outweighs any benefits of natural immunity. **People who have already had COVID-19 infection should be vaccinated, as the vaccine adds additional protection against re-infection and COVID-19 variants.**
- **COVID-19 vaccination is the safest way to help build protection against COVID-19.** Before any vaccine can be authorized or approved for use, the FDA must determine that the vaccine is safe and effective. **Safety monitoring will continue.**

Who should NOT get a COVID-19 vaccine?

Most people are able to get the COVID-19 vaccine, once supplies allow for their priority group to be vaccinated. A few groups of people should not get the vaccine, and some others should consult with their doctor or follow special procedures.

Allergic reactions that mean you should not get a particular vaccine (contraindications):

The following are contraindications to vaccination with one of the COVID-19 mRNA vaccines:

- Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of either the Pfizer-BioNtech or Moderna mRNA vaccine.
- Immediate allergic reaction of any severity to a previous dose or known (diagnosed) allergy to a component of either the Pfizer or the Moderna mRNA vaccine, including polyethylene glycol.

Individuals diagnosed with myocarditis or pericarditis after the 1st dose of an mRNA vaccine should not receive the 2nd dose at this time.

CDC considers the following to be a contraindication to vaccination with the Johnson & Johnson COVID-19 vaccine:

- Severe allergic reaction (e.g. anaphylaxis) to a component of the J&J vaccine
- Known allergy to any component of the J&J vaccine, including polysorbate.
- (Second doses of the J&J vaccine are not recommended for anyone at this time but a severe or immediate allergic reaction to a previous dose of the J&J vaccine would be considered a contraindication to receiving a second dose, if a second dose is recommended sometime in the future.)
- People with a contraindication to mRNA vaccine may be able to receive J&J vaccine, and people with a contraindication to the Johnson and Johnson vaccine may be able to receive a mRNA vaccine, if certain measures are taken.
- A [list](https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Appendix-C) of ingredients in the COVID-19 vaccines is here: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Appendix-C>.

Other considerations:

- People less than 18 years old should not get the Moderna or J&J vaccine at this time; people less than 12 years old should not get the Pfizer vaccine.
- People currently isolating or experiencing symptoms of COVID-19 should not get vaccinated until they have finished their isolation period and their symptoms have improved. People who are on quarantine due to a close contact exposure to someone with COVID-19 should not be vaccinated until they are out of quarantine. (An exception is that people living in congregate facilities who are in quarantine can be vaccinated when vaccine is available to them.)
- Precautions to receiving a COVID-19 vaccine: A history of an immediate allergic reaction to any other vaccine or injectable therapy (i.e., intramuscular, intravenous, or subcutaneous vaccines or therapies as a precaution but not a contraindication to vaccination).
- People with a reaction to a vaccine or injectable therapy that contains multiple components, one of which is a vaccine component, but in whom it is unknown which component elicited the immediate allergic reaction, have a precaution to vaccination.
- People with a contraindication to one type of the currently authorized COVID-19 vaccines (e.g., mRNA vaccine) have a precaution to the other (e.g., J&J vaccine). However, because

of potential cross-reactive hypersensitivity between ingredients in mRNA and J&J COVID-19 vaccines, consultation with an allergist-immunologist should be considered to help determine if the patient can safely receive vaccination.

Individuals in the categories below should be observed for 30 minutes after vaccination:

- History of an immediate allergic reaction of any severity to any vaccine or injectable therapy
- People with a contraindication to a different type of COVID-19 vaccine (for example, people with a contraindication to mRNA COVID-19 vaccines who receive J&J vaccine).
- History of anaphylaxis due to any cause
- Everyone else should be observed for 15 minutes after vaccination.

Strengthened COVID-19 Vaccine Recommendation in Pregnancy:

- On August 11, 2021, CDC strengthened its recommendation for COVID-19 vaccination in pregnant people stating COVID-19 vaccination is recommended for all people aged 12 years and older, including people who are pregnant, lactating, trying to get pregnant now, or might become pregnant in the future.
- Data shows that there is no evidence that any of the COVID-19 vaccines affect current or future fertility.

How COVID-19 Vaccines Work

COVID-19 vaccines work in different ways to offer protection, but with all types of vaccines, the body develops immune system “memory” that helps fight the virus in the future.

Currently, there are three main types of COVID-19 vaccines. Each type of vaccine prompts our bodies to recognize and protect us from the virus that causes COVID-19. None of these vaccines can cause COVID-19 illness.

- **Messenger RNA (mRNA) vaccines** teach our cells how to make a protein from the virus that causes COVID-19.
 - This protein causes an immune response inside our bodies.
 - Our immune system remembers this protein so it can respond later on if we are exposed to COVID-19.
 - mRNA vaccines do not contain any virus and mRNA does not become a permanent part of the body
 - Like all vaccines, mRNA vaccines help protect us, but without the risks of getting sick from a disease.
- **Vector vaccines**, such as the Johnson and Johnson and Oxford Astra Zeneca vaccines, use a weakened virus to carry the instructions for making a coronavirus protein into our cells.
 - When our cells make this protein, it causes an immune response inside our bodies.

- Our immune system remembers this protein so it can respond later on if we are exposed to COVID-19.
- Like all vaccines, vector vaccines help protect us, but without the risks of getting sick from a disease.
- **Protein subunit vaccines, such as the Novavax vaccine**, include small pieces of proteins from the virus that causes COVID-19 illness.
 - Once vaccinated, our immune system recognizes that the proteins don't belong in the body and begins building an immune response.
 - If we are ever exposed in the future, memory cells will recognize and fight the virus.
 - Protein subunit vaccines are simpler to make than mRNA and vector vaccines and if approved, will improve vaccine availability.

Variants

Many viruses, including SARS-CoV-2, mutate frequently. Scientists around the world are monitoring SARS-CoV-2 variants, caused by mutations in the genetic code of the virus. Current variants of concern include the B.1.1.7 (Alpha), B.1.351 (Beta), P.1 (Gamma), and B.1.617.2 (Delta) variants. All of these variants of concern have been identified in Chicago, but the Delta variant is responsible for the current wave and majority of current cases in Chicago.

The Delta variant spreads more easily and quickly than previous strains of COVID-19. As of August 2021, vaccines approved for use in the USA continue to offer significant protection against all variants, **including the Delta variant**, especially in preventing hospitalization and death. Johnson and Johnson, Moderna, and Pfizer have all announced they are developing a “booster” shots that specifically target variant strains, in case they are needed in the future. The best way to protect yourself against COVID-19 and the COVID-19 variants is to get vaccinated, including getting your 2nd dose if you get the Pfizer or Moderna vaccine.

In addition to vaccination, use of other public health measures, such as physical distancing, masks, and isolation and quarantine, will limit the spread of the virus that causes COVID-19 and protect public health. These measures continue to be especially important for individuals who are not vaccinated. Less virus spread means fewer variants will develop.

“Boosters” and “Additional doses”

An “additional dose” refers to people who are moderately to severely immunocompromised receiving a 3rd dose of an mRNA COVID-19 Vaccine (Pfizer-BioNTech or Moderna) at least 28 days after the completion of the initial mRNA COVID-19 vaccine series. This is because they may not have received adequate protection from their initial 2 doses.

A “booster dose” is a supplemental vaccine dose given to people when the immune response to a primary vaccine series is likely to have waned over time. The need for and timing of a COVID-19 booster dose has not been established, and no “booster doses” are recommended at this time. CDC and FDA continue to review evidence and data as it is available about whether or when booster doses for the broader U.S. public may be needed, and will update guidance as more information becomes available.

Currently, the FDA EUAs for Pfizer, Moderna and Johnson and Johnson vaccines provide legal authorization for administration of vaccine *only as specified in their EUAs*. The EUAs also specify that the vaccines should only be administered to individuals age 18 years and older, except for the Pfizer vaccine, for which the EUA includes individuals 12 years of age and older. The Pfizer vaccine has received full approval for use in individuals age 16 and older. For links to updated information about vaccine EUAs, as well as the BLA approval for the Pfizer vaccine, see <https://www.fda.gov/coronavirus-disease-2019-covid-19/covid-19-vaccines>.

Providers should inquire about previously received COVID-19 vaccinations during screening of individuals prior to vaccination, in order to identify individuals who have already received all recommended COVID-19 vaccine doses.

Vaccine Cost

CDPH is working to ensure all Chicagoans have access to the COVID-19 vaccine at no charge.

- **All COVID-19 vaccines are free. You will have no out-of-pocket costs for COVID-19 vaccination.**
- Health care providers are not allowed to bill a patient directly for the cost of the COVID-19 vaccine or vaccine administration.
- Your provider may charge your health insurer a fee related to administering the vaccine (giving the shot). If you have questions, please reach out to your health insurer or benefits administrator.
- If you are uninsured and a fee is charged by your provider, the fee may be paid by HRSA (Health Resources and Service Administration).

CDPH – Chicago Department of Public Health – www.chicago.gov/COVIDvax
FDA – U.S. Food and Drug Administration – www.fda.gov
CDC – U.S. Centers for Disease Control and Prevention – www.cdc.gov