City of Chicago COVID-19 Vaccine
Frequently Ask Questions

Getting the Vaccine

I had COVID before. Do I still need to get the vaccine?
Yes, people who have had COVID in the past will still need to get the vaccine. Though past infection is thought to provide some immunity, we do not know how much protection is provided or how long this protection may last. It is recommended that people who have had COVID in the past still get the vaccine.

Who will know if I get vaccinated?
Information collected when you get the vaccine follows all HIPPA privacy requirements. The health department or medical provider will retain some information for dose tracking purposes. No information is not shared with non-public health agencies.

Does it cost anything to get the vaccine?
The vaccine distributed at CDPH vaccination sites will be at no cost to the individual.

Is the vaccine still frozen when the shot is given?
The Pfizer vaccine needs to be stored at an ultra-cold temperature and the Moderna vaccine needs to be stored at frozen temperature. Both will be defrosted before administering the shot.

Why are some people prioritized?
The initial supply of vaccine will be limited, and based on national guidance, healthcare workers will be the first population recommended to receive the vaccine, and even then, those who treat COVID-19 patients and perform certain procedures will likely receive the vaccine first. This prioritization ensures those with the highest risk of contracting COVID are protected. Additionally, by vaccinating those who provide direct patient care will protect our healthcare workforce capacity. Priority will also be given to older adults living in long-term care facilities to prevent outbreaks.

Can I get just one of the vaccine doses?
No. The Pfizer and Moderna vaccines both require two doses. One dose will not give you the same level immunity.

Once I have the vaccine, do I still need to wear a mask and social distance?
Even after someone has been vaccinated the individual should continue to wear a mask and maintain social distancing. While we know the vaccines protect the individual from contracting COVID, but we do not know if it prevents spreading COVID. As more people receive the vaccine, we may be able to dial back these measures.

How quickly will I be protected from COVID after receiving the vaccine?
Similar to the flu vaccine, it will take a few weeks after completing the COVID-vaccine before your body builds up the immune response to protect against COVID-19. If you receive a 2-dose vaccine, the full immune response is not completed until a few weeks after the 2nd dose. Even with the high efficacy of

the vaccines, no vaccine is 100% protective. CDPH still recommends mask wearing, social distancing and washing your hands frequently, even if you have received the vaccine.

After I receive the vaccine, do I risk spreading COVID to those who have not been vaccinated?
Receiving the vaccine does not increase your chances of spreading COVID. Getting the vaccine drastically decreases your risk of getting COVID-19, but it does not eliminate the risk. Therefore, you may still spread COVID-19 if you contract the virus after vaccination.

Can I pick which vaccine I get?
At this time individuals cannot choose which vaccine they receive.

Chicago's Vaccination Plan

Where can I get a vaccine?
As the vaccine supplies increases, COVID-19 vaccine will be available through additional vaccination providers, including doctors' offices, retail pharmacies, hospitals, and federally qualified health centers.

Can I register to get the vaccine?

The majority of Chicago residents will get vaccinated through their own medical providers or through a vaccinating partner in their neighborhood. CDPH recommends that individuals reach out to their healthcare providers to learn more about their plans for patient vaccination. People who are interested in getting updates on vaccine rollout or about when it may be their turn to get vaccinated should sign up for CHI COVID Coach at chi.gov/covidcoach. Residents can also stay informed on Chicago's vaccination progress and announcements by signing up for the COVID-19 newsletter or following us on social media. Chicago.gov/COVIDvax is updated each day with the most up-to-date information.

Do you have walk-in vaccine clinics?
Not at this time. In Vaccination Phase 1b, all vaccine will be given **via appointment.** We do not want our older and most vulnerable residents waiting in hours-long lines in January and February. Expect to need to make an appointment, either through your own health care provider/system, through a pharmacy, through a dedicated vaccination site, or through your employer when vaccine is available.

How is an essential worker defined?
There are 16 critical infrastructure sectors identified by the Cyber and Infrastructure Security Agency (CISA) whose assets, systems, and networks, whether physical or virtual, are considered so vital to the United States that their incapacitation or destruction would have a debilitating effect on security, national economic security, national public health or safety, or any combination thereof. Additional information on these sectors can be found on the CISA website.

When can the City return to normal?
Widespread vaccination will allow the City to dial back restrictions set in place to slow the spread of COVID, but this process will happen over many months. As more Chicagoans get vaccinated, there will be more opportunity to safely move back to normal lives. In the meantime, CDPH still recommends mask wearing, social distancing and washing your hands frequently, even if you have received the vaccine.

When will vaccination phase 1b begin?

Beginning Monday, January 25th, Chicago will formally move into Vaccination Phase 1b—meaning we will *start* to ramp up vaccination for Chicago residents >65 and specific groups of highest-risk or front-line essential workers. Please note that vaccine supply remains limited and we anticipate that most people in group 1b will have vaccination opportunities in February or March, and they will remain eligible for vaccine indefinitely. At the rate we are receiving vaccine right now—just 34,000 first doses this week to Chicago—each week we can only vaccinate about 5% (1 in 20) of the Chicago residents who are eligible for vaccine in 1b.

When will vaccination phase 1c begin?

While timing is highly dependent on vaccine availability, right now we predict that Chicago will tentatively begin Vaccination Phase 1c on Monday, March 29. Phase 1c includes Chicagoans age 16-64 with underlying medical conditions and all essential workers not included in phase 1b. Most people in phase 1c will be vaccinated in April or May, and they will remain eligible indefinitely.

When will vaccine be available for all Chicago residents?

With timing highly dependent on vaccine availability, right now we predict that Chicago will tentatively begin Vaccination Phase 2 on Monday, May 31. Phase 2 includes all Chicagoans age 16 and over. Children will be added as trials are completed and vaccine is authorized for use in individuals under age 16.

Who is included in vaccination phase 1b?

There are two main categories in Phase 1b: Chicagoans who are 65+ and a specific list of front-line essential workers. Health care workers and long-term care facility residents who were prioritized in group 1a remain eligible for vaccine in phase 1b and beyond.

- **Chicagoans age 65 and older.** Anyone 65 and older is eligible to receive vaccine in phase 1b, though the Chicago Department of Public Health (CDPH) has asked health care providers, where possible, to first prioritize their patients who are over age 75 or who are 65-74 with significant underlying conditions. There are approximately 360,000 Chicago residents in this group. Obviously, older Chicagoans have been at much higher risk for hospitalization and death—with our very oldest residents at highest risk.
- **Front-line essential workers.** The CDC used national data to prioritize a subset of front-line essential workers for 1b and both Illinois and Chicago are broadly following this prioritization, with minor local adjustments. These groups include correctional officers and first responders; grocery store workers and day care workers; early education and K-12 educators; workers in public transit, manufacturing, and agriculture; and a limited number of government workers, including legislators and postal service workers. We also will continue to vaccinate workers and residents in non-healthcare congregate settings, like homeless shelters, correctional settings, and group residential settings like convents, where we have seen local outbreaks.

How will phase 1b be vaccinated?

Think about how you get flu shots, because we're using the same 4 channels here: Health care providers, pharmacies, dedicated vaccination sites, and employers. We are hopeful that under the new

federal administration more resources and support will be available and even more options will be available even more quickly.

1. **Medical Clinics**

First, most people in Chicago get their flu shot from a **medical clinic**—whether that is your regular doctor's office or health center, or through a hospital or urgent care center. That will be the case for COVID-19 vaccine as well—the great majority of people in 1b, especially those in the 65+ group, will get the vaccine, by appointment, from a medical clinic over February and March. Most ideally you will be vaccinated at your own doctor's office, community clinic, or affiliated hospital. As of January 20, we have nearly 400 health care providers all over the City already enrolled to be able to vaccinate their patients, with dozens more coming online every week. These settings will not have enough vaccine for everyone in 1b right away, and we've asked them to prioritize their older and more medically vulnerable patients--but over February and March, each week additional appointments will become available as Chicago receives more vaccine.

2. **Pharmacies**

Second, some people in Chicago get the flu shot from a **pharmacy**, and pharmacies are especially important for people who may not access medical care as regularly. We have more than 70 pharmacies all over the City enrolled to be able to vaccinate residents, with more coming online every week. Again, COVID-19 vaccine will be by appointment.

3. **Vaccination Sites**

Third, some people in Chicago get the flu shot through a **vaccination site, a site set up specifically for the purpose of giving vaccine**. These are sometimes called PODs (Points of Dispensing). We have those, too; by January 23, we will have 6 larger City-operated PODs operating, as well as ongoing mobile PODs and strike teams, where CDPH and our pharmacy and medical partners bring vaccine directly to settings with many vulnerable people, like long-term care and residential behavioral health facilities, and in 1b adding in homeless shelters and other congregate settings.

4. **Employers**

Finally, some people in Chicago get the flu shot through their **employer.** Many of our health care workers in 1a got vaccine through their employer, and we will be following that same model in 1b for front-line essential workers, pairing employers with vaccinating partners. We will be bringing vaccine into larger workplaces and connecting workers in smaller workplaces with offsite vaccine appointments.

Will all of the front-line essential workers start at the same time? What's that timeline?

All front-line essential workers are *eligible* for vaccine as phase 1b begins, just as all Chicagoans 65+ are *eligible* for vaccine as phase 1b begins. This means that individual day care workers, teachers, factory workers, grocery store workers, etc. who live in Chicago can get vaccine at any point after January 25, if their doctor's office has available doses and appointments. However, operationally, just as we did in 1a, we will also work to bring vaccine to employer-based settings, based primarily on COVID-19 risk.

As we move into 1b--**in the last week of January and first week of February**--we will direct vaccine *through employers* to **correctional facilities and first responders**. These are some of the settings, after health care and congregate settings, where we have seen the most COVID-19 cases and outbreaks; every case we prevent in these settings indirectly prevents many other cases.

Over the month of February, depending on vaccine availability, we will begin making vaccine available *through employers* to **grocery store workers, day care workers, and workers in the manufacturing settings** where we've seen our biggest outbreaks. These workers are more likely to live in Chicago's hardest-hit communities, and pushing vaccine here has a multiplier effect in preventing additional cases and driving down COVID-19 case rates in Chicago, allowing us to more quickly bring COVID-19 under control as a City and reopen society.

Also, **later in February** we will begin directing vaccine *through employers* to **K-12 and early childhood educators**--private, parochial, and public—recognizing the critical role that educators play in our society.

Then **over the month of March,** again depending on vaccine availability, we will begin directing vaccine *through employers* to **public transit, other manufacturing, agriculture, and postal service** settings.

How will the vaccine be distributed across the city?
CDPH will follow federal and state guidelines for distributing the vaccine. Distribution prioritization is based on risk, not geographic location. However, all hospitals across the city will receive doses of the vaccine based on their healthcare workforce and patient populations. Similar to the City's approach to testing, access to the vaccine will always be looked at through an equity lens.

Vaccine Safety

Can I get COVID from the vaccine?
There is no possibility that you can get COVID from the vaccine. The Pfizer and Moderna vaccines use mRNA to train the body to respond to the COVID virus without using any live virus. The mRNA used in these vaccines is code for a protein that is specific to the COVID-19 virus but does not cause any harm to you.

Is the vaccine safe?
Yes. Vaccine will NOT be distributed in Chicago if it has not been deemed safe. Both the Pfizer and Moderna have completed multiple stages of clinical trials.

The CDC, along with FDA and other federal partners, will use established safety systems to conduct heightened safety monitoring of COVID-19 vaccines. Additional safety measures include active surveillance using text messaging and web surveys from CDC, and enhanced passive surveillance through other data sources from healthcare facilities.

If a link is found between a side effect and a COVID-19 vaccine, public health officials will take appropriate action by weighing the benefits of the vaccine against its risks to determine if recommendations for using the vaccine should change; and continuously monitor and evaluate safety thereafter.

Do current vaccines protect against the COVID-19 variants?

Data suggest current vaccines will be effective and safe in providing protection against COVID-19 variants.

Are there side effects?
Having side effects isn't a bad thing. Vaccinations may cause mild COVID-19-like symptoms but this is a sign your immune system is responding to the vaccine. The vaccine does not contain a live virus and cannot give you COVID-19. The most common side effects are fever, chills, tiredness, or headache. At the injection site, you may experience pain, redness or swelling. Although these side effects may be unpleasant for 1-3 days, they are not dangerous. People with history of significant allergic reactions to vaccines, food, or medicine should consult with their doctor before receiving the vaccine.

Is the vaccine effective?
Pfizer has reported preliminary data that demonstrates their vaccine is 95% effective. Moderna has reported preliminary data that demonstrates their vaccine is 94.1% effective.

The CDC is working to make sure vaccine effectiveness assessments include diverse groups of people, such as healthcare personnel, essential workers, older adults, and those living in nursing homes, people with underlying medical conditions, racial and ethnic minority groups, and tribal nations. It is important to measure how well COVID-19 vaccines work in groups of people who are at increased risk of getting COVID- 19, as well as in those who are at increased risk of severe COVID-19 illness.

Has a vaccine been approved by the FDA?
Both the Pfizer and the Moderna vaccines have received FDA Emergency Use Authorization. This means that the vaccines are safe and effective, and that the benefits of taking the vaccines is greater than any possible risks from the vaccine.

What does Emergency Use Authorization (EUA) mean?
In an emergency, like a pandemic, it may not be possible to have all the evidence that the FDA would usually have before approving a drug, device, or a test. When there is a declared emergency, the FDA can allow the use of a product, like a vaccine, before full approval by issuing an Emergency Use Authorization or EUA.

After the requisite determination and declaration have been issued, and after feasible and appropriate consultations, FDA may issue an EUA only if FDA concludes that the following four statutory criteria for issuance have been met.

1. Serious or Life-Threatening Disease or Condition
2. Evidence of Effectiveness
3. Risk-Benefit Analysis
4. No Alternatives

More information on EUA is available on the FDA website.

How was the vaccine developed so quickly?
The COVID-19 vaccine was developed through the Health and Human Services' Operation Warp Speed. No safety measures were cut in its design, testing or manufacturing. A focus was placed on early manufacturing and the use of new technologies so as soon as the vaccine was deemed safe by the appropriate agencies, distribution could begin. More information about Operation Warp Speed is on the HHS' website.

Who was represented in the clinical trials?

Pfizer's clinical trial enrolled 43,000+ participants with 42% globally having racially and ethnically diverse backgrounds. Moderna's 30,000 trial included participants from minority communities, including 6,000 Hispanic and 3,000 Black participants. AstraZeneca's initial trial data included participants from Brazil and the United Kingdom while the company continues to conduct trials in South Africa, Kenya, Latin America, Japan, Russia and the United States.

How do I tell the CDC about side effects after getting the COVID-19 vaccine?

You can tell the CDC if you have any side effects after getting the COVID-19 vaccine through their website v-safe. V-safe is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccination. Depending on your answers, someone from CDC may call to check on you and get more information. And, v-safe will remind you to get your second COVID-19 vaccine dose if you need one. Your participation in CDC's v–safe makes a difference — it helps keep COVID-19 vaccines safe.

Can I take the vaccine if I am pregnant or thinking about becoming pregnant?

CDC has recommended that women who are pregnant can get vaccinated for COVID-19. Though there are not completed studies on COVID-19 vaccination in pregnancy, there are no known risks from the vaccines to pregnant people. Pregnant people who get infected with COVID-19 are at risk for more severe illness, such as ICU admission, being on life support, or death. If you are pregnant, talk to your doctor about getting the COVID-19 vaccine.