Coronavirus (COVID-19) - Vaccine Questions and Reactions

Coronavirus (COVID-19) - Vaccine Questions and Reactions

After Hours Telephone Triage Protocols | Adult | 2020

DEFINITION

- Patient believes they are having a reaction to a COVID-19 vaccination (immunization).
- Questions about the COVID-19 vaccine.

Notes:

- Local injection site symptoms such as pain, redness, and swelling usually last 1 to 3 days.
- Systemic reaction symptoms such as chills, fatigue, fever, joint pain, headache, muscle aches usually last 1 to 2 days.
- Vaccine reaction symptoms may rarely last up to a week.
- The following symptoms are NOT from a vaccine reaction: cough, difficulty breathing, loss of taste or smell, runny nose, sore throat.

This guideline was last updated 1/3/2021.

INITIAL ASSESSMENT QUESTIONS

1. MAIN CONCERN OR SYMPTOM: "What is your main concern right now?" "What question do you have?" "What's the main symptom you're worried about?" (e.g., fever, pain, redness, swelling)
2. VACCINE: "What vaccination did you receive?" "Is this your first or second shot?" (e.g., none; Moderna, Pfizer, other)
3. SYMPTOM ONSET: "When did the _______ begin?" (e.g., not relevant; hours, days)
4. SYMPTOM SEVERITY: "How bad is it?"
5. FEVER: "Is there a fever?" If so, ask: "What is it, how was it measured, and when did it start?"
6. PAST REACTIONS: "Have you reacted to immunizations before?" If so, ask: "What happened?"
7. OTHER SYMPTOMS: "Do you have any other symptoms?"

TRIAGE ASSESSMENT QUESTIONS

Call EMS 911 Now

[1] Difficulty breathing or swallowing AND [2] starts within 2 hours after injection

R/O: anaphylactic reaction
CA: 40, 201, 202, 1

Sounds like a life-threatening emergency to the triager

CA: 40, 1

See More Appropriate Guideline


Go to Guideline: Coronavirus (COVID-19) - Exposure (Adult)
[1] Typical COVID-19 symptoms AND [2] symptoms that are NOT expected from vaccine (e.g., cough, difficulty breathing, loss of taste or smell, runny nose, sore throat)

   Go to Guideline Coronavirus (COVID-19) - Diagnosed or Suspected


   Go to Guideline Coronavirus (COVID-19) - Diagnosed or Suspected

Go to ED Now (or PCP triage)
Fever > 104 F (40 C)

   R/O: severe reaction
   CA:  42, 1002, 1005, 1

Sounds like a severe, unusual reaction to the triager

   CA: 42, 1

See HCP within 4 Hours (or PCP triage)

   R/O: cellulitis, lymphangitis
   CA: 43, 31, 32, 1001, 1004, 89, 1


   R/O: bacterial infection
   CA: 43, 31, 32, 1002, 1005, 89, 1

[1] Fever > 100.0 F (37.8 C) AND [2] bedridden (e.g., nursing home patient, CVA, chronic illness, recovering from surgery) AND [3] started > 48 hours after getting vaccine

   R/O: bacterial infection
   CA: 43, 31, 32, 1002, 1005, 89, 1

[1] Fever > 100.0 F (37.8 C) AND [2] diabetes mellitus or weak immune system (e.g., HIV positive, cancer chemo, splenectomy, organ transplant, chronic steroids) AND [3] started > 48 hours after getting vaccine

   R/O: bacterial infection
   CA: 43, 31, 32, 1002, 1005, 89, 1

See PCP within 24 Hours
[1] Redness or red streak around the injection site AND [2] started > 48 hours after getting vaccine AND [3] no fever (Exception: red area < 1 inch or 2.5 cm wide)

   R/O: bacterial superinfection
   CA: 44, 31, 32, 1001, 1004, 6, 7, 1


   R/O: low-grade infection
   CA: 44, 31, 32, 1001, 1004, 6, 7, 1
Fever > 100.0 F (37.8 C) present > 3 days (72 hours)

*R/O: bacterial superinfection or other acute illness. Note: COVID-19 vaccine related fever occurs most often during the first 2 days after the vaccination.*

CA: 44, 31, 32, 1002, 1005, 89, 1

Call PCP within 24 Hours

[1] Fever > 100.0 F (37.8 C) AND [2] healthcare worker

*Reason: healthcare worker should contact employee health. May need to be excluded from work pending further evaluation, including consideration for SARS-CoV-2 testing.*

CA: 50, 27, 4, 1002, 1005, 89, 1

See PCP within 3 Days

[1] Pain, tenderness, or swelling at the injection site AND [2] lasts > 7 days

*R/O: low-grade infection*

CA: 45, 34, 1001, 1004, 6, 7, 1

See PCP within 2 Weeks

[1] Requesting COVID-19 vaccine AND [2] healthcare worker (e.g., EMS first responders, doctors, nurses)

*Reason: healthcare workers have a high priority for getting the COVID-19 vaccine (Phase 1a vaccine distribution).*

CA: 46, 29, 10, 11, 12, 13, 14, 15, 20, 21, 90, 1


*Reason: residents of long-term care facilities have a high priority for getting the COVID-19 vaccine (Phase 1a vaccine distribution).*

CA: 46, 30, 10, 11, 12, 13, 14, 15, 20, 90, 1


*Note: Phase 1a vaccination includes healthcare workers and residents of long-term care facilities. Phase 1b is frontline essential workers and people 75 years and older. Phase 1c is people 16 to 64 years old with higher-risk medical conditions; and people 65 years and older; and other essential workers.*

CA: 46, 8, 9, 10, 11, 12, 13, 14, 15, 20, 90, 1

Home Care

COVID-19 vaccine, injection site reaction (e.g., pain, redness, swelling), question about

CA: 48, 2, 1001, 1004, 3, 1

COVID-19 vaccine, systemic reactions (e.g., fatigue, fever, muscle aches), questions about

CA: 48, 225, 4, 5, 2, 1003, 1006, 24, 3, 1

COVID-19 vaccine, Frequently Asked Questions (FAQs)

CA: 48, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 33, 28, 90, 1

COVID-19 Prevention and Healthy Living, questions about

*Note: How to protect you and your family; how to reduce anxiety and stress.*

CA: 48, 1047, 1048, 1049, 1050, 1051, 90, 1

CARE ADVICE (CA) -
1. **Care Advice** given per Coronavirus (COVID-19) - Vaccine Questions and Reactions (Adult) guideline.

2. **Cold Pack for Local Reaction at Injection Site:**
   - Apply a cold pack or ice in a wet washcloth to the area for 20 minutes. Repeat in 1 hour.
   - Then apply as needed for the first 48 hours after the injection. (Reason: reduce the pain and swelling.)

3. **Call Back If:**
   - Fever lasts over 3 days
   - Pain at injection site not improving after 3 days
   - You become worse.

4. **COVID-19 Vaccine - Common Reactions:**
   - Local pain, redness, or swelling at injection site
   - Feeling tired (fatigue)
   - Fever
   - Headache
   - Muscle aches or joint pains
   - Symptoms usually last 1 to 2 days.

5. **COVID-19 Vaccine - Rare Reactions:**
   - Rarely, a severe allergic reaction (anaphylactic reaction) of the body's immune system may occur after a COVID-19 vaccination. This is a severe and sometimes life-threatening overreaction (allergic reaction) of the body's immune system.
   - Symptoms: Symptoms of an anaphylactic reaction include breathing difficulty, dizziness, face and throat swelling, fast heart beating, rash all over the body, and weakness.
   - Onset: Most allergic reactions to vaccines occur within minutes to two hours of getting the vaccine injection.

6. **Local Heat:**
   - Apply a warm wet washcloth or a heating pad for 20 minutes 4 times a day for pain relief.

7. **Call Back If:**
   - Fever occurs
   - You become worse.

8. **Alternate Disposition - Department of Health:**
   - Your local, state, or provincial Department of Health can help you find out how to get the COVID-19 vaccine.
   - Visit their website to see your best options for vaccination.

9. **Alternate Disposition - Local Drug Store (Pharmacy):**
   - Your local drug store may be able to help you find out how to get the COVID-19 vaccine.
   - Visit their website to see your best options for vaccination.
10. Note to Triager - Frequently Asked Questions (FAQs):
   • Select the FAQ(s) that best addresses the caller's main question or concern.
   • Briefly provide this care advice and health information to the caller.
   • You can direct the caller to national, state, or province websites for additional information.

11. FAQ - Why Should I Get the COVID-19 Vaccine?
   • Protect Others: You can help protect your family and your community by getting the COVID-19 vaccination.

12. FAQ - How Is the Vaccine Given?
   • The vaccine is given as an injection (shot) into the muscle of the upper arm.
   • All but one of the vaccines being developed need two doses 21 to 28 days apart to work best. For example, for the Pfizer vaccine you will need two shots 21 days apart. The exact timing of the second dose depends on which vaccine you get.
   • Write down the following information when you get your first dose: (1) the name of the vaccine, (2) the date you got it, (3) when you are due for your next dose.

13. FAQ - Is the COVID-19 Vaccine Safe?
   • Yes. The vaccine is safe.
   • The side effects are similar to other vaccines, such as the flu shot (influenza), tetanus, or shingles.
   • Like all vaccines there is always a chance of a more serious side effect. However, serious side effects, such as an allergic reaction, are rare.

14. FAQ - What Are the Most Common Side Effects of the COVID-19 Vaccine?
   • The most common side effects are feeling tired, fever, headache, muscle aches, and pain at the site of the injection.
   • Side effects are normal. They mean your immune system is working and building antibodies.
   • While they can be unpleasant, they are not serious. They do not lead to any risks to your health.
   • Side effects usually last 1 to 3 days.
   • Side effects may be worse after the second vaccine shot.
15. **FAQ - What Are the Symptoms of a Severe Reaction to the COVID-19 Vaccine?**
   - Serious side effects, such as an allergic reaction, are rare.
   - Severe allergic reactions to vaccines occur within minutes to two hours of getting the vaccine injection.
   - Symptoms of a severe allergic reaction include breathing difficulty, dizziness, face and throat swelling, fast heart beating, rash all over the body, and weakness.

16. **FAQ - When Can I Get the COVID-19 Vaccine?**
   - The Pfizer - BioNTech and the Moderna COVID-19 vaccines were approved for use in December 2020. Many other vaccines are in development.
   - Other vaccines (e.g., AstraZeneca, Johnson and Johnson) are being developed and will soon become available.
   - Vaccines will first be offered to healthcare workers and residents of long-term care facilities.

17. **FAQ - Where Can I Get the COVID-19 Vaccine?**
   - Eventually you will be able to get the COVID-19 vaccine at all the same places you currently get your immunization shots.
   - This includes doctors' offices, retail pharmacies, hospitals, and federally qualified health centers.

18. **FAQ - Who Should Get the COVID-19 Vaccine?**
   - The Pfizer vaccine is approved for use in people 16 years and older.
   - The Moderna vaccine is approved for use in people 18 years and older.

19. **FAQ - Who Should NOT Get the COVID-19 Vaccine?**
   - **Prior Severe Reaction:** You should not get the COVID-19 vaccine if you have had a severe allergic reaction after the first dose of this vaccine. Tell your healthcare provider if you have ever had a bad allergic reaction to a vaccine or other injected medicine. Your healthcare provider will advise you if it is OK.
   - **Current COVID-19 Infection:** Vaccination should be postponed until you are feeling well and the isolation period is over.
   - **Recent Exposure:** Vaccination should be postponed until after the quarantine period is over.
   - **Antibody Therapy:** If you had antibody therapy for COVID-19, the vaccine should be postponed at least 90 days. Discuss this with your healthcare provider.

20. **FAQ - Who Should Have Priority for Getting the COVID-19 Vaccine?**
   - At first, there will be a limited supply of COVID-19 vaccine.
   - **Phase 1a:** Healthcare workers and residents of long-term care facilities have priority for getting the COVID-19 vaccine. They should get it first.
   - **Phase 1b:** Essential frontline workers such as teachers, police, fire fighters, utilities, etc.; and people 75 years and older
   - **Phase 1c:** People 16 to 64 years old with higher-risk medical conditions; and people 65 years and older; and other essential workers.
   - Eventually, there will be enough vaccine for everyone.
21. FAQ - Can I Get the COVID-19 Vaccination if I Am Pregnant or Breastfeeding?
   • Pregnancy: There is limited research to be able to answer this question fully. Experts believe that the COVID-19 vaccine is probably safe in pregnancy. There is no live virus in the vaccine. Healthcare workers who are pregnant should be offered this vaccine because of their risk of getting the COVID-19 infection while working. Talk with your healthcare provider.
   • Breastfeeding: There is no research data to answer the question of whether the COVID-19 vaccine is safe in breastfeeding women. Experts believe that there should be no risks to the breastfeeding infant. Healthcare workers who are breastfeeding should be offered this vaccine because of their risk of getting the COVID-19 infection while working. Talk with your healthcare provider.

22. FAQ - Can I Get My Child Vaccinated Against COVID-19?
   • The Pfizer COVID-19 vaccine has been approved for people 16 years and older.
   • The COVID-19 vaccine has not been tested in babies, infants, and children. More research is needed to make certain that it is safe.
   • Therefore, the COVID-19 vaccine is not yet available for children.

23. FAQ - Which COVID-19 Vaccine Should I Get?
   • Any COVID-19 vaccine that has been approved means it is effective and safe.
   • Follow the recommendation of your healthcare provider (doctor, NP, PA) or drug store pharmacist.

24. FAQ - Can I Get COVID-19 From the Vaccine?
   • No.
   • There is no living COVID-19 virus in the vaccine. It is impossible to get COVID-19 from the vaccine.

25. FAQ - If I Already Had COVID-19, Should I Get the Vaccine?
   • Yes. A test for prior infection is not needed to decide if you should get the vaccine.
   • The CDC states that the vaccines should be offered to those with a history of COVID-19 infection.
   • If you are sick with COVID, the vaccination should be postponed until you are feeling well and the isolation period is over.
   • You are unlikely to catch COVID-19 again within 90 days of a proven prior infection (tested positive). Therefore, you may choose to postpone the vaccine until after this 90 day period.

26. FAQ - How Can I Report a Bad Reaction to the COVID-19 Vaccine?
   • Anyone, including parents and patients, can report a bad reaction.
   • Canada: In Canada use the Reporting Adverse Events Following Immunization (AEFI) system. The reporting form can be found at: https://www.canada.ca/en/public-health/services/immunization/reporting-adverse-events-following-immunization/form.html.
   • United States: The best way to report is to use the Vaccine Adverse Event Reporting System (VAERS) website. There is an online form at: https://vaers.hhs.gov/reportevent.html.
27. **Alternate Disposition - Call Employee Health at Your Workplace Within 24 Hours:**
   - You need to call and discuss this with the Employee Health Department for your workplace within the next 24 hours.

28. **FAQ - Do I Need to Still Wear a Mask After I Have Received the COVID-19 Vaccine?**
   - Yes.
   - The COVID-19 vaccine is highly effective. However, no vaccine is perfect.
   - Protect yourself and others. Wear a mask when you are outside your home and in any indoor space or public place.

29. **Alternate Disposition - Call Employee Health at Your Workplace Within 2 Weeks:**
   - Healthcare workers have priority for getting the COVID-19 vaccine.
   - Your hospital or healthcare organization will have a plan for vaccinating their staff.
   - You need to call and discuss this with the Employee Health Department for your workplace within the next 2 weeks.

30. **Alternate Disposition - Long-Term Care Facility:**
   - Residents of long-term care facilities have priority for getting the COVID-19 vaccine.
   - Your facility will have a vaccination plan.
   - Talk with the nurse or medical leadership at the facility in the next 2 weeks.

31. **Alternate Disposition - Call Telemedicine Provider Now:**
   - Telemedicine may be your best choice for care during this COVID-19 outbreak.
   - You should call a telemedicine provider now, if your own healthcare provider is not available.

32. **Note to Triager - If NO PCP, Have Other HCP Re-Triage the Patient, if Available:**
   - During this COVID-19 pandemic, the medical community is trying to prevent unnecessary referrals to the emergency department (ED). Some patients are fearful of being exposed to COVID-19 in a medical setting. Second-level triage (re-triage) by a physician has been shown to reduce ED referrals. Here are resources that may be available in your community.
   - **PCP Second-level Telephone Triage:** Some PCPs (primary care providers) want to provide re-triage before any of their non-emergent patients are referred to an ED. This requires their approval.
   - **Telemedicine:** Telemedicine is often a preferred source of second-level triage and care during this pandemic. Many practices and some hospitals now offer a telemedicine (virtual visit) service. There are also many national telemedicine companies that are delivering COVID-19 care.
33. **FAQ - Can the COVID-19 Vaccine Change My DNA (Genes)?**

- No.
- None of the COVID-19 vaccines work by entering the nucleus (where your DNA is located).
- They cannot change a person's DNA. Instead they work with a person's immune system to fight the virus.

34. **Alternate Disposition - Call Telemedicine Provider:**

- Telemedicine may be your best choice for care during this COVID-19 outbreak.
- You can talk to a telemedicine provider, if your own healthcare provider is not available.

40. **Call EMS 911 Now:**

- Immediate medical attention is needed. You need to hang up and call 911 (or an ambulance).
- *Triage Discretion: I'll call you back in a few minutes to be sure you were able to reach them.*

41. **Go to ED Now:**

- You need to be seen in the Emergency Department.
- Go to the ED at ___________ Hospital.
- Leave now. Drive carefully.

42. **Go To ED Now (or PCP triage):**

- **If No PCP (Primary Care Provider) Second-Level Triage:** You need to be seen within the next hour. Go to the ED/UCC at ___________ Hospital. Leave as soon as you can.
- **If PCP Second-Level Triage Required:** You may need to be seen. Your doctor (or NP/PA) will want to talk with you to decide what's best. I'll page the provider on-call now. If you haven't heard from the provider (or me) within 30 minutes, go directly to the ED/UCC at ___________ Hospital.

43. **See HCP Within 4 Hours (or PCP triage):**

- **If Office Will Be Open:** You need to be seen within the next 3 or 4 hours. Call your doctor (or NP/PA) now or as soon as the office opens.
- **If Office Will Be Closed and No PCP (Primary Care Provider) Second-Level Triage:** You need to be seen within the next 3 or 4 hours. A nearby Urgent Care Center (UCC) is often a good source of care. Another choice is to go to the ED. Go sooner if you become worse.
- **If Office Will Be Closed and PCP Second-Level Triage Required:** You may need to be seen. Your doctor (or NP/PA) will want to talk with you to decide what's best. I'll page the on-call provider now. If you haven't heard from the provider (or me) within 30 minutes, call again. **NOTE:** If on-call provider can't be reached, send to UCC or ED.
44. See PCP Within 24 Hours:
   • If Office Will Be Open: You need to be seen within the next 24 hours. Call your doctor (or NP/PA) when the office opens and make an appointment.
   • If Office Will Be Closed and No PCP (Primary Care Provider) Second-Level Triage: You need to be seen within the next 24 hours. A clinic or an urgent care center is often a good source of care if your doctor's office is closed or you can't get an appointment.
   • If Office Will Be Closed and PCP Second-Level Triage Required: You may need to be seen within the next 24 hours. Your doctor (or NP/PA) will want to talk with you to decide what's best. I'll page the on-call provider now. NOTE: Since this isn't serious, hold the page between 10 pm and 7 am. Page the on-call provider in the morning.
   • If Patient Has No PCP: Refer patient to a clinic or urgent care center. Also try to help caller find a PCP for future care.

45. See PCP Within 3 Days:
   • You need to be seen within 2 or 3 days. Call your doctor (or NP/PA) during regular office hours and make an appointment. A clinic or urgent care center are good places to go for care if your doctor's office is closed or you can't get an appointment. NOTE: If office will be open tomorrow, tell caller to call then, not in 3 days.
   • If Patient Has No PCP (Primary Care Provider): A clinic or urgent care center are good places to go for care if you do not have a primary care provider. NOTE: Try to help caller find a PCP for future care (e.g., use a physician referral line). Having a PCP or "medical home" means better long-term care.

46. See PCP Within 2 Weeks:
   • You need to be seen for this ongoing problem within the next 2 weeks. Call your doctor (or NP/PA) during regular office hours and make an appointment.
   • If Patient Has No PCP (Primary Care Provider): A primary care clinic or an urgent care center are good places to go for care if you do not have a primary care provider. NOTE: Try to help caller find a PCP (e.g., use a physician referral line). Having a PCP or "medical home" means better long-term care.

47. Home Care - Information or Advice Only Call.

48. Home Care:
   • You should be able to treat this at home.

49. Call PCP Now:
   • You need to discuss this with your doctor (or NP/PA).
   • I'll page the on-call provider now. If you haven't heard from the provider (or me) within 30 minutes, call again.

50. Call PCP Within 24 Hours:
   • You need to discuss this with your doctor (or NP/PA) within the next 24 hours.
   • If Office Will Be Open: Call the office when it opens tomorrow morning.
   • If Office Will Be Closed: I'll page the on-call provider now. Exception: from 9 pm to 9 am. Since this isn't urgent, we'll hold the page until morning.
51. **Call PCP When Office Is Open:**
   - You need to discuss this with your doctor (or NP/PA) within the next few days.
   - Call the office when it is open.

52. **Go To L&D Now:**
   - You need to be seen.
   - Go to the Labor and Delivery Unit or the Emergency Department at __________ Hospital.
   - Leave now. Drive carefully.

89. **Call Back If:**
   - You become worse.

90. **Call Back If:**
   - You have more questions.

201. **First Aid Advice for Anaphylaxis - Epinephrine:**
   - If the patient has an epinephrine autoinjector, **give it now**. Do not delay.
   - Use the autoinjector on the upper outer thigh. You may give it through clothing if needed.
   - Give epinephrine first, then call 911.
   - Epinephrine is available in autoinjectors under trade names: **EpiPen**, **EpiPen Jr**, and **Auvi-Q** (Allerject in Canada). Auvi-Q has an audio chip and talks patients and caregivers through injection process.
   - You may give a second (repeat) dose of epinephrine 10-15 minutes later, IF the person with anaphylaxis does not respond to the first dose AND ambulance arrival takes longer than 10 minutes.

202. **First Aid Advice for Anaphylaxis - Benadryl:**
   - Give antihistamine by mouth **Now** if able to swallow.
   - Use Benadryl (diphenhydramine; adult dose: 50 mg) or any other available antihistamine medicine.

225. **Note to Triager - Discussing Common vs. Rare Reactions:**
   - Discuss the **Common Reactions** with the caller. Reassure the caller that these reactions are generally harmless.
   - Discuss **Rare Reactions** only if the caller specifically asks.
1001. **Pain Medicines:**
- For pain relief, you can take either acetaminophen, ibuprofen, or naproxen.
- They are over-the-counter (OTC) pain drugs. You can buy them at the drugstore.
  - **Acetaminophen - Regular Strength Tylenol:** Take 650 mg (two 325 mg pills) by mouth every 4 to 6 hours as needed. Each Regular Strength Tylenol pill has 325 mg of acetaminophen. The most you should take each day is 3,250 mg (10 pills a day).
  - **Acetaminophen - Extra Strength Tylenol:** Take 1,000 mg (two 500 mg pills) every 8 hours as needed. Each Extra Strength Tylenol pill has 500 mg of acetaminophen. The most you should take each day is 3,000 mg (6 pills a day).
  - **Ibuprofen (e.g., Motrin, Advil):** Take 400 mg (two 200 mg pills) by mouth every 6 hours. The most you should take each day is 1,200 mg (six 200 mg pills), unless your doctor has told you to take more.
  - **Naproxen (e.g., Aleve):** Take 220 mg (one 220 mg pill) by mouth every 8 to 12 hours as needed. You may take 440 mg (two 220 mg pills) for your first dose. The most you should take each day is 660 mg (three 220 mg pills a day), unless your doctor has told you to take more.

1002. **Fever Medicines:**
- For fevers above 101° F (38.3° C) take either acetaminophen or ibuprofen.
- They are over-the-counter (OTC) drugs that help treat both fever and pain. You can buy them at the drugstore.
- The goal of fever therapy is to bring the fever down to a comfortable level. Remember that fever medicine usually lowers fever 2 degrees F (1 - 1 1/2 degrees C).
  - **Acetaminophen Regular Strength Tylenol:** Take 650 mg (two 325 mg pills) by mouth every 4-6 hours as needed. Each Regular Strength Tylenol pill has 325 mg of acetaminophen. The most you should take each day is 3,250 mg (10 pills a day).
  - **Acetaminophen - Extra Strength Tylenol:** Take 1,000 mg (two 500 mg pills) every 8 hours as needed. Each Extra Strength Tylenol pill has 500 mg of acetaminophen. The most you should take each day is 3,000 mg (6 pills a day).
  - **Ibuprofen (e.g., Motrin, Advil):** Take 400 mg (two 200 mg pills) by mouth every 6 hours. The most you should take each day is 1,200 mg (six 200 mg pills), unless your doctor has told you to take more.
1003. **Pain and Fever Medicines:**
- For pain or fever relief, take either acetaminophen or ibuprofen.
- They are over-the-counter (OTC) drugs that help treat both fever and pain. You can buy them at the drugstore.
- Treat fevers above 101° F (38.3° C). The goal of fever therapy is to bring the fever down to a comfortable level. Remember that fever medicine usually lowers fever 2 degrees F (1 - 1 1/2 degrees C).
- **Acetaminophen Regular Strength Tylenol:** Take 650 mg (two 325 mg pills) by mouth every 4-6 hours as needed. Each Regular Strength Tylenol pill has 325 mg of acetaminophen. The most you should take each day is 3,250 mg (10 pills a day).
- **Acetaminophen - Extra Strength Tylenol:** Take 1,000 mg (two 500 mg pills) every 8 hours as needed. Each Extra Strength Tylenol pill has 500 mg of acetaminophen. The most you should take each day is 3,000 mg (6 pills a day).
- **Ibuprofen (e.g., Motrin, Advil):** Take 400 mg (two 200 mg pills) by mouth every 6 hours. The most you should take each day is 1,200 mg (six 200 mg pills), unless your doctor has told you to take more.

1004. **Pain Medicines - Extra Notes and Warnings:**
- Use the lowest amount of medicine that makes your pain better.
- Acetaminophen is thought to be safer than ibuprofen or naproxen in people over 65 years old. Acetaminophen is in many OTC and prescription medicines. It might be in more than one medicine that you are taking. You need to be careful and not take an overdose. An acetaminophen overdose can hurt the liver.
- McNeil, the company that makes Tylenol, has different dosage instructions for Tylenol in Canada and the United States. In Canada, the maximum recommended dose per day is 4,000 mg or twelve Regular-Strength (325 mg) pills. In the United States, the maximum dose per day is ten Regular-Strength (325 mg) pills.
- Bayer, the company that makes Aleve, has different dosage instructions for Aleve in Canada and the United States. In Canada, the maximum recommended dose per day is 440 mg (2 pills or caplets). In the United States, the maximum dose per day is 660 mg (3 pills or caplets).
- **Caution:** Do not take acetaminophen if you have liver disease.
- **Caution:** Do not take ibuprofen or naproxen if you have stomach problems, kidney disease, are pregnant, or have been told by your doctor to avoid this type of anti-inflammatory drug. Do not take ibuprofen or naproxen for more than 7 days without consulting your doctor.
- **Before taking any medicine, read all the instructions on the package.**
1005. **Fever Medicines - Extra Notes and Warnings:**
   - Use the lowest amount of medicine that makes your fever better.
   - Acetaminophen is thought to be safer than ibuprofen or naproxen in people over 65 years old. Acetaminophen is in many OTC and prescription medicines. It might be in more than one medicine that you are taking. You need to be careful and not take an overdose. An acetaminophen overdose can hurt the liver.
   - McNeil, the company that makes Tylenol, has different dosage instructions for Tylenol in Canada and the United States. In Canada, the maximum recommended dose per day is 4,000 mg or twelve Regular-Strength (325 mg) pills. In the United States, the maximum dose per day is ten Regular-Strength (325 mg) pills.
   - **Caution:** Do not take acetaminophen if you have liver disease.
   - **Caution:** Do not take ibuprofen if you have stomach problems, kidney disease, are pregnant, or have been told by your doctor to avoid this type of anti-inflammatory drug. Do not take ibuprofen for more than 7 days without consulting your doctor.
   - *Before taking any medicine, read all the instructions on the package.*

1006. **Pain and Fever Medicines - Extra Notes and Warnings:**
   - Use the lowest amount of medicine that makes your pain or fever better.
   - Acetaminophen is thought to be safer than ibuprofen or naproxen in people over 65 years old. Acetaminophen is in many OTC and prescription medicines. It might be in more than one medicine that you are taking. You need to be careful and not take an overdose. An acetaminophen overdose can hurt the liver.
   - McNeil, the company that makes Tylenol, has different dosage instructions for Tylenol in Canada and the United States. In Canada, the maximum recommended dose per day is 4,000 mg or twelve Regular-Strength (325 mg) pills. In the United States, the maximum dose per day is ten Regular-Strength (325 mg) pills.
   - **Caution:** Do not take acetaminophen if you have liver disease.
   - **Caution:** Do not take ibuprofen if you have stomach problems, kidney disease, are pregnant, or have been told by your doctor to avoid this type of anti-inflammatory drug. Do not take ibuprofen for more than 7 days without consulting your doctor.
   - *Before taking any medicine, read all the instructions on the package.*

1047. **COVID-19 - How to Protect Your Family and Yourself From Getting Sick:**
   - *Avoid close contact with people known to have this new coronavirus infection.*
   - *Avoid close contact with people outside your family unit.*
   - Avoid closed spaces (indoors) when possible and all crowds (even outdoors).
   - When you must leave your home, wear a mask and observe social (safe) distancing.
   - Try to stay at least 6 feet (2 meters) away from anyone who is coughing.
   - Wash hands often with soap and water.
   - Alcohol-based hand cleaners are also effective.
   - Avoid touching the eyes, nose or mouth. Germs on the hands can spread this way.
   - Do not share eating utensils (e.g., spoon, fork).
1048. **COVID-19 - Face Masks for Prevention:**
- Face masks are essential for reducing the spread of COVID-19. They will also reduce the spread of influenza. Wearing a mask means you care about other people.
- **Sick Patients:** People who are sick with COVID-19 must always wear a face mask if they need to leave the home. Example: for medical visits. *Exception:* patients with trouble breathing (CDC). Consider a loose face covering such as a bandana.
- **Well People:** When community spread is high, the CDC also recommends face masks or coverings for everyone going outside the home. They are critical if entering a public building, such as a grocery store. *Reason:* Many people with COVID-19 have no symptoms but can spread the virus. *Exceptions:* Face mask or covering is optional if outdoors and you can avoid being within 6 feet (2 meters) of other people. Some examples are an outdoor walk or run.
- **Age Limits:** Face coverings also are not recommended for children under 2 years (CDC).

1049. **Keep Your Mind Positive:**
- **Live in the Present:** Live in the present, not the future. The future is where your needless worries live.
- **Think Positive:** Use a mantra to reduce your fears, such as "I am strong". Stay positive.
- **Get Outdoors:** Take daily walks. Go to a park if you have one. Being in nature is good for your immune system.
- **Stay in Touch With Your Friends and Family:** Use regular phone calls and video chats to stay in touch with those you love. Schedule virtual video dinners with friends and family!

1050. **Keep Your Body Strong:**
- Get your body ready to fight the COVID-19 virus.
- Get enough sleep.
- Stay physically active. Walk or exercise every day. Take the stairs.
- Stay well hydrated.
- Eat healthy meals. Avoid overeating to deal with your fears.
- Avoid the over-use of anti-fever medicines. Fever helps fight infections and ramps up your immune system.

1051. **Ask for Help:**
- If you feel so sad or worried that you cannot function, reach out to your health care provider, local mental health center, or national helpline.
FIRST AID ADVICE for Anaphylaxis - Epinephrine

- If the patient has an epinephrine autoinjector, give it now. Do not delay.
- Use the autoinjector on the upper outer thigh. You may give it through clothing if needed.
- Give epinephrine first, then call 911.

Epinephrine is available in autoinjectors under trade names: EpiPen, EpiPen Jr, and Auvi-Q (Allerject in Canada). Auvi-Q has an audio chip and talks patients and caregivers through injection process.

You may give a second (repeat) dose of epinephrine 10-15 minutes later, IF the person with anaphylaxis does not respond to the first dose AND ambulance arrival takes longer than 10 minutes.

FIRST AID ADVICE for Anaphylaxis - Benadryl

- Give antihistamine by mouth now if able to swallow.
- Use Benadryl (diphenhydramine; adult dose 50 mg) or any other available antihistamine.

BACKGROUND INFORMATION

Key Points

- Vaccines are generally safe and effective.
- Side effects such as local pain, fever, fatigue are common after any vaccination. They are normal symptoms after a vaccination.
- Serious reactions, such as anaphylaxis, are very rare.
- The Pfizer - BioNTech and the Moderna COVID-19 vaccines were approved for use in December 2020. Many other vaccines are in development.

Types of COVID-19 Vaccines

Several COVID-19 vaccines have been approved or are nearing approval for use in Canada and the United States:

- AstraZeneca (Oxford)
- Janssen
- Johnson & Johnson (single shot)
- Novavax.

There are many COVID-19 vaccines still in development.

COVID-19 Vaccine Reactions

Three types of reactions can occur after any type of vaccination: local, systemic, and anaphylactic.

A local reaction can occur at the injection site after a COVID-19 vaccination. These symptoms usually last 1 to 3 days. Side effects are more frequent after the second vaccine shot.

- Lymph node swelling in armpit of injection (12%)
• Pain at injection site (84-92%)
• Redness at injection site (6%)
• Swelling at injection site (9%)

Symptoms from a **systemic reaction** are common and normal after a COVID-19 vaccination. These symptoms usually last 1 to 2 days. Side effects are more frequent after the second vaccine shot.

• Chills (32-43%)
• Fatigue (63-69%)
• Fever (14-15%)
• Headache (55-63%)
• Joint pain (24-45%)
• Muscle pain (38-60%)

Rarely, a **severe allergic reaction** (anaphylactic reaction) of the body's immune system may occur after a COVID-19 vaccination. This is a severe and sometimes life-threatening overreaction (allergic reaction) of the body's immune system.

• **Symptoms:** Symptoms of an anaphylactic reaction include breathing difficulty, dizziness, face and throat swelling, fast heart beating, rash all over body, and weakness.
• **Onset:** Most allergic reactions to vaccines occur within minutes to two hours after getting the vaccine injection.

The following are NOT side effects of the COVID-19 vaccine: cough, loss of taste or smell, runny nose, shortness of breath, and sore throat. Instead, they may be symptoms of a COVID-19 or another infection.

**Internet Resources**


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**REFERENCES**


SEARCH WORDS

2019-NCOV
ADVERSE REACTION
ADVERSE REACTIONS
ANTHRAX
BOOSTER
BOOSTER SHOT
CORONAVIRUS
CORONAVIRUS EXPOSURE
COVID19
COVID-19
COVID-19 EXPOSURE
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