

COVID-19 VACCINATION CLINIC HOMELESS POPULATION *VOLUNTEER TRAINING*

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OBJECTIVES

- Define COVID-19 vaccination efforts for homeless population in the District of Columbia
- Understand the role of volunteers in this particular vaccination effort
- Review screening tool for COVID-19 Vaccine
- Understand Post-Vaccination management and provide counseling to patients

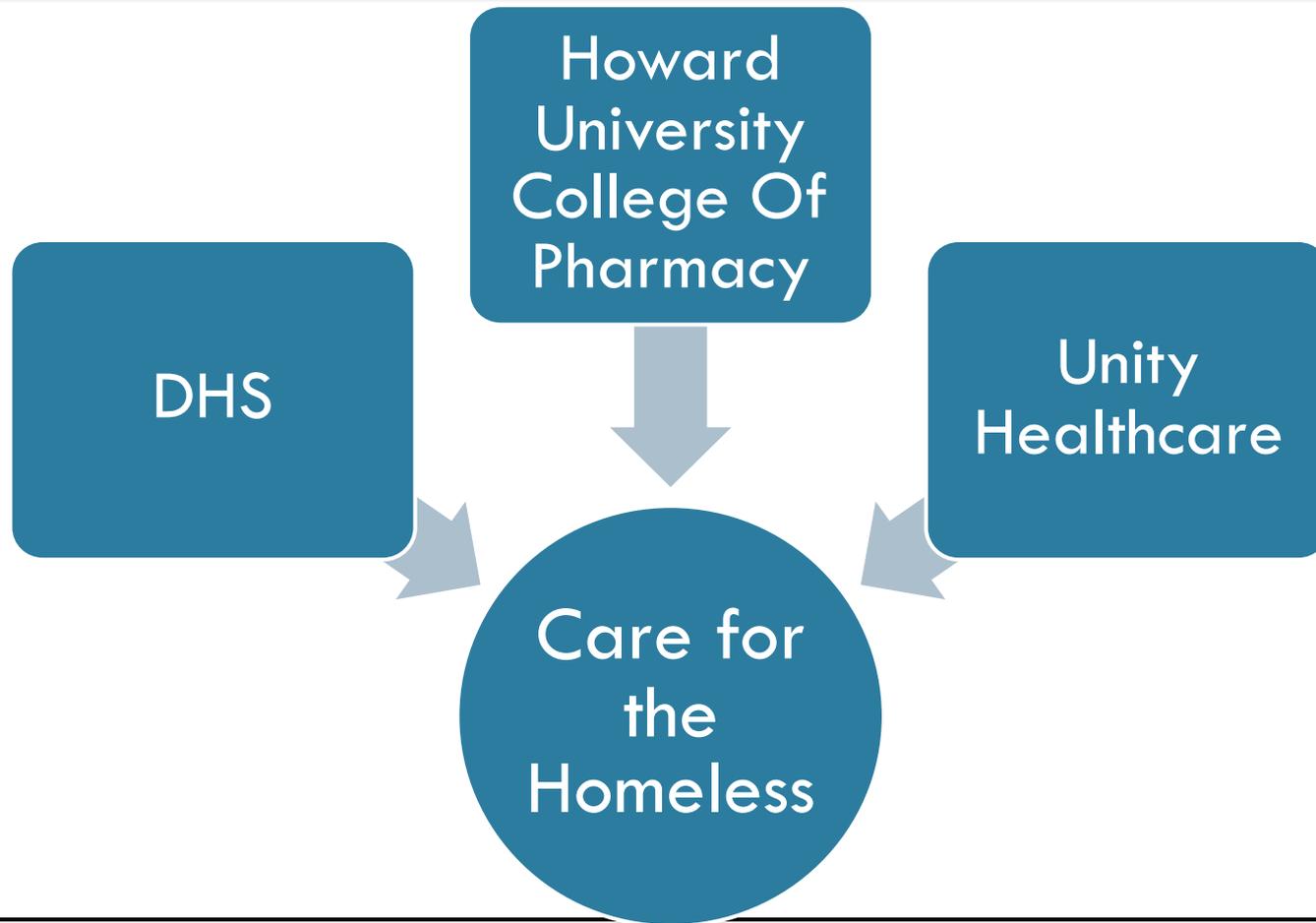
COVID-19 VACCINATION

Homeless Population in DC

HOMELESS POPULATION

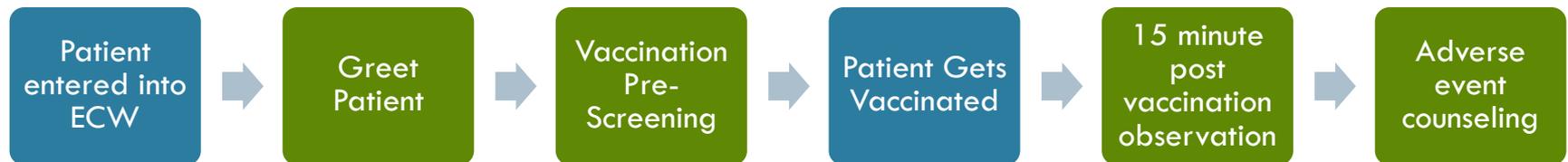
- Lack of housing contributes to poor health outcomes
 - ▣ Older adults and underlying health conditions
- Outdoor Sleeping - Encampment Setting
- Shelter/Congregate Living Facility
- Non-Congregate Settings
 - ▣ Isolation/Quarantine Sites
 - ▣ PEPV – High Risk Patients
- Screening by Shelter Staff

COVID-19 VACCINE FOR HOMELESS



Vaccine Clinic Workflow

Getting Vaccines In Arms



COVID-19 Pre Screening Tool

Monitoring for Adverse Reactions

General Rule: Adverse Reactions

- Inactivated vaccines are expected to commonly produce reactions at the injection site; may be with or without fever
- Live attenuated vaccines are expected to produce a mild form of the natural illness, in the process of replicating, after the incubation period

True vs. False Allergy

- Immediate-type hypersensitivity (typically within minutes to an hour or so)
- True (immediate) allergy
 - Itching, erythema, hives, urticaria; symptoms progressing toward anaphylaxis
- False allergy
 - Fever, GI upset, red eyes w/thimerosal (contact lens solutions), neurologic events

Patient Observation

- ❑ Serious allergic reactions and syncope are rare
- ❑ CDC recommends observing patients for 15 minutes after vaccination
- ❑ If symptoms develop, observe until resolved

Acute Reactions



- ❑ Allow for fainting without injury, plus access to hard surface if CPR is needed
- ❑ Be prepared for anaphylaxis
 - ❑ Extremely rare
 - ❑ Potentially fatal
 - ❑ Usually reversible with immediate recognition and treatment
- ❑ Remind patients and caregivers to report any adverse events that happen at home
 - ❑ Submit these events to VAERS

Adverse Events of Moderna Vaccine

Injection Site Reaction

- Pain
- Tenderness and swelling of the lymph nodes in the same arm of the injection,
- Swelling (hardness)
- Redness

General Side Effects

- Fatigue
- Headache,
- Muscle Pain,
- Joint pain
- Chills
- Nausea and Vomiting
- Fever

Vasovagal Syncope

- Brief loss of consciousness or fainting
 - Most occur in 5–15 minutes
 - Most occurring in teens and women
 - 14% of episodes result in hospitalization
- Symptoms
 - Paleness
 - Sweating
 - Coldness of the hands and feet
 - Nausea
 - Lightheadedness
 - Dizziness
 - Weakness
 - Visual disturbances
 - Loss of consciousness

Syncope

- What do you do if a patient faints after vaccination?
 - ▣ Follow your emergency response protocol
 - ▣ Help the patient to the ground so that he or she does not fall, causing injury
 - ▣ Lay the patient flat on the floor with feet elevated
 - ▣ If the patient does not regain consciousness quickly, call 911



Symptoms of Anaphylaxis

- ❑ Sudden or gradual onset of generalized itching
- ❑ Erythema (redness)
- ❑ Urticaria (hives)
- ❑ Angioedema (swelling of the lips, face, or throat)
- ❑ Severe bronchospasm (wheezing)
- ❑ Shortness of breath
- ❑ Abdominal cramping
- ❑ Shock
- ❑ Cardiovascular collapse

Patient Case: Helen

- You appropriately screen Helen, a 55-year-old patient, during an immunization clinic. Helen does not have any contraindications to influenza vaccination; however, she has never received a previous dose of inactivated influenza vaccine. After administering the vaccine, you request that Helen remain in the pharmacy for 15 minutes. Approximately 5 minutes later, Helen returns to the administration area stating that she does not feel very well and would like a drink of water.

- What do you do?

Patient Case: Helen (continued)

- Over the next few minutes, Helen begins to complain of feeling very hot and starts to complain of shortness of breath

- What do you do?

Patient Case: Helen (continued)

- Next, Helen's respirations become very labored and audible wheezes are observed

- What do you do?

Patient Case: Helen (continued)

- Helen's breathing initially responds to the epinephrine; however, she begins to wheeze and continues to have shortness of breath

- What do you do?

Epinephrine

□ Epinephrine doses

- Based on 1:1,000 w/v, 1 mg/mL
 - Dosing by body weight is preferred
 - 0.01 mg/kg/dose (max of 0.5 mg per dose)
 - Have repeat doses available: dosed 5 to 15 minutes for up to 3 doses.
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- IM is more prompt than SC
 - Dosage forms
 - 1 mg/mL ampule
 - Epinephrine autoinjectors
 - EpiPen and EpiPen Jr.
 - Auvi-Q
 - Generic products may be available, but not necessarily interchangeable

Emergency Preparedness

- ❑ Have a plan and practice it
- ❑ Screen patients before vaccination
- ❑ Observe for 15 minutes post-vaccination
- ❑ If reaction occurs
 - ▣ Evaluate severity and call 911 if necessary
 - ▣ Take blood pressure, pulse and respirations every 5 minutes
 - ▣ Administer epinephrine if necessary
 - ▣ Monitor closely
 - ▣ Be prepared for CPR
 - ▣ Document events

Post-Vaccination Counseling

THREE COUNSELING POINTS

1. Counsel patients on adverse events of Moderna vaccine in the context that immune system is working
2. Determine if patient is on any other Tylenol products if they must take Tylenol
3. Remind patient to get follow-up vaccine one month later