

COVID-19 VACCINE TIPS

Vaccine Administration

April 8, 2021

Looking at the Numbers

COVID-19
Deaths

17,023

COVID-19
Cases

846,230

COVID-19
Vaccines

3,799,255

Agenda



Presentation & Discussion

Vaccine Administration



Open Forum

Questions, Answers and
Peer Support



Why are you talking to me about this?

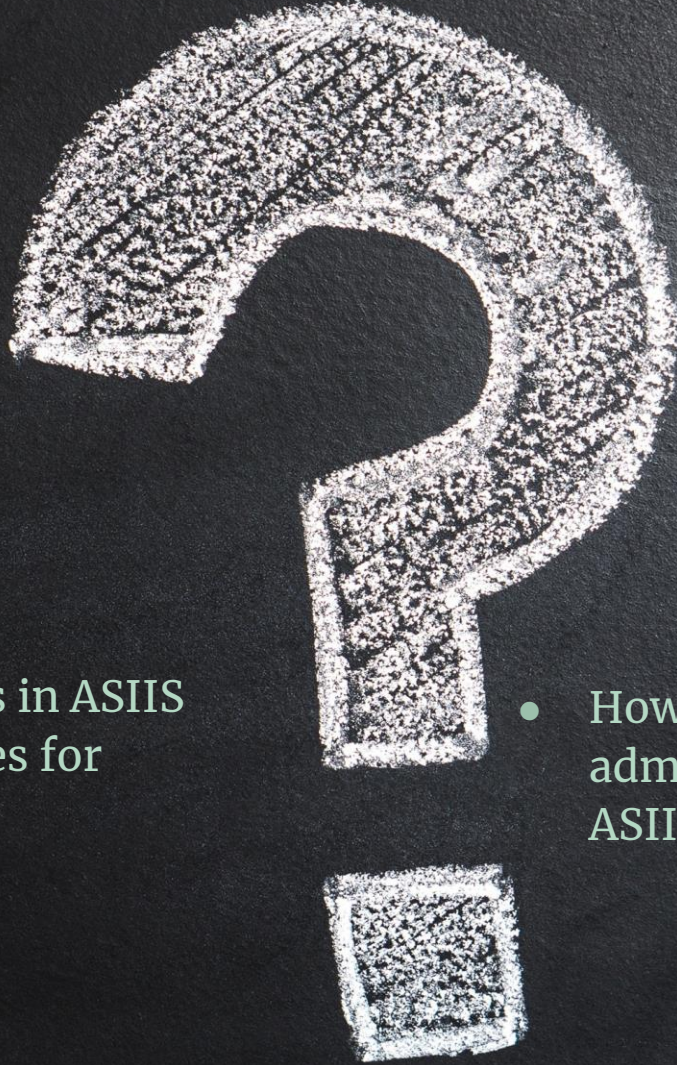
VAERS reports increasing.
Frequent administration errors reported.

Recap

How do I...

Submit a claim for an
uninsured patient
WITHOUT ID or
SSN?

Other Questions



- Do we add our patients in ASIIS like we add the vaccines for VFC?
- How can I verify that the doses administered were sent to ASIIS?

Other Updates

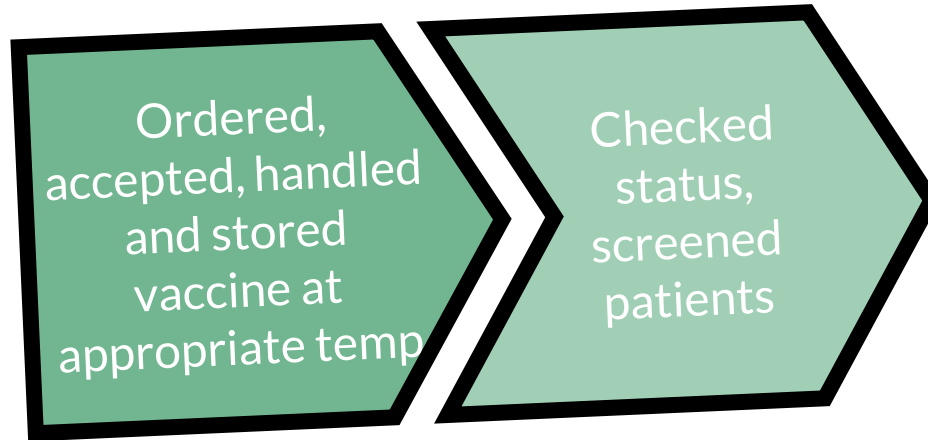
More Vaccine in Primary Care! Counties are starting to send vaccine to your office!

Data Published for Pfizer Pediatric Studies Pfizer released data for trials of 12 years+; **No changes to recommendations-** FDA still reviewing data

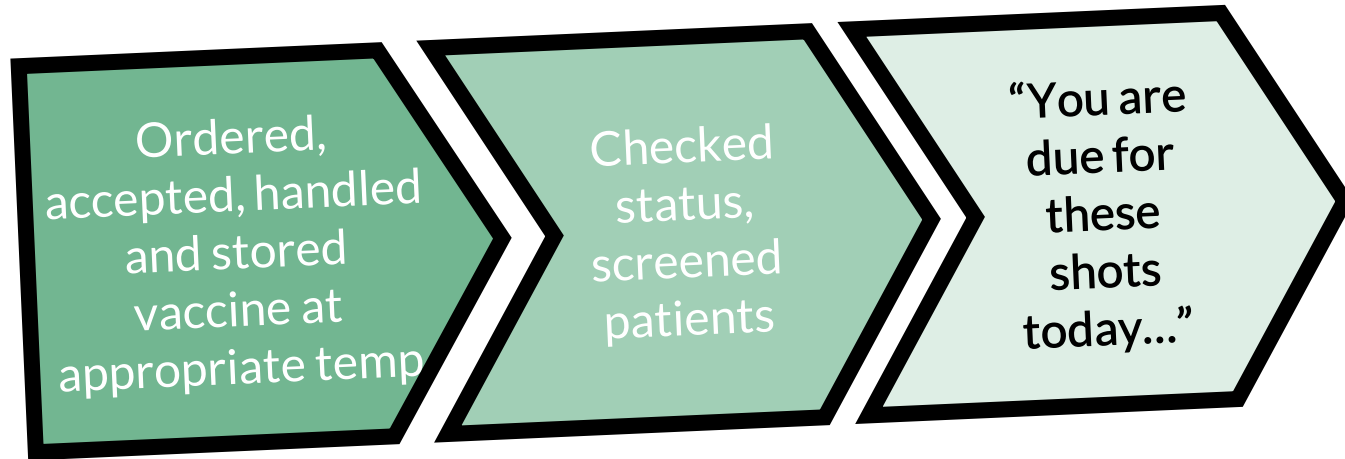
Keep County in the Loop! As you plan community events, let your county know your plans so they don't plan events in the same neighborhoods targeting the same groups

Call in your pediatric patients- Catch Up NOW.

So far...



And now...





Really Important

Screen for contraindications

Offer EUA (“Fact Sheet for Recipients and Caregivers”)

Consent Form

V-Safe

During the visit

- Propose order/ Check **Standing Order**
- Get vaccine
- Check time on the vial
- **Double check** (right vaccine, expiration, time on vial)
- Wash your hands!
- Prep the vaccine and label it
- Go back to the exam room



Vaccine Administration

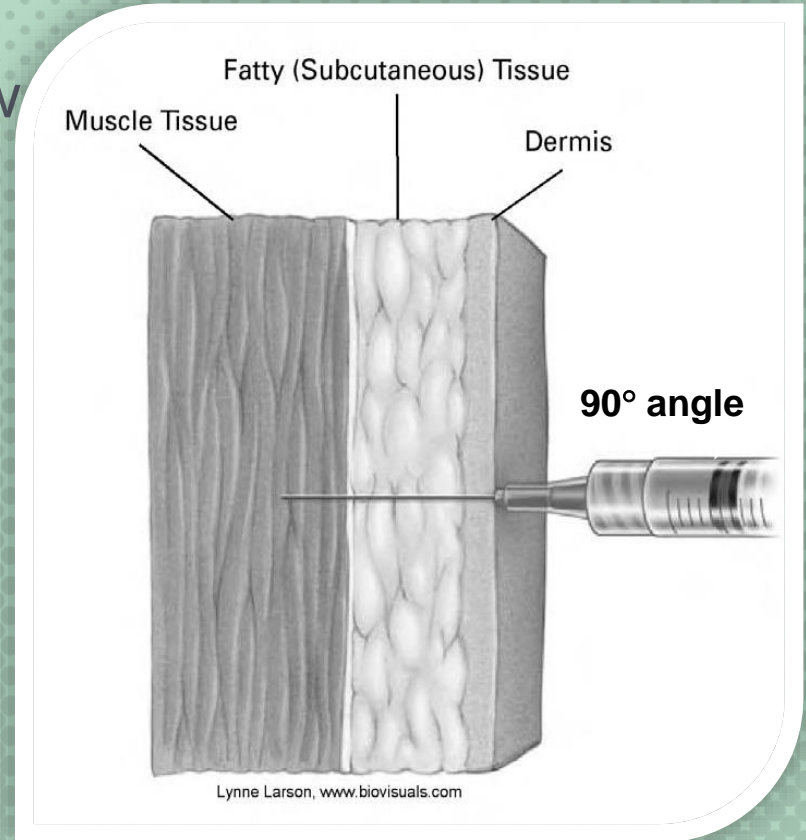
Intramuscular (IM)

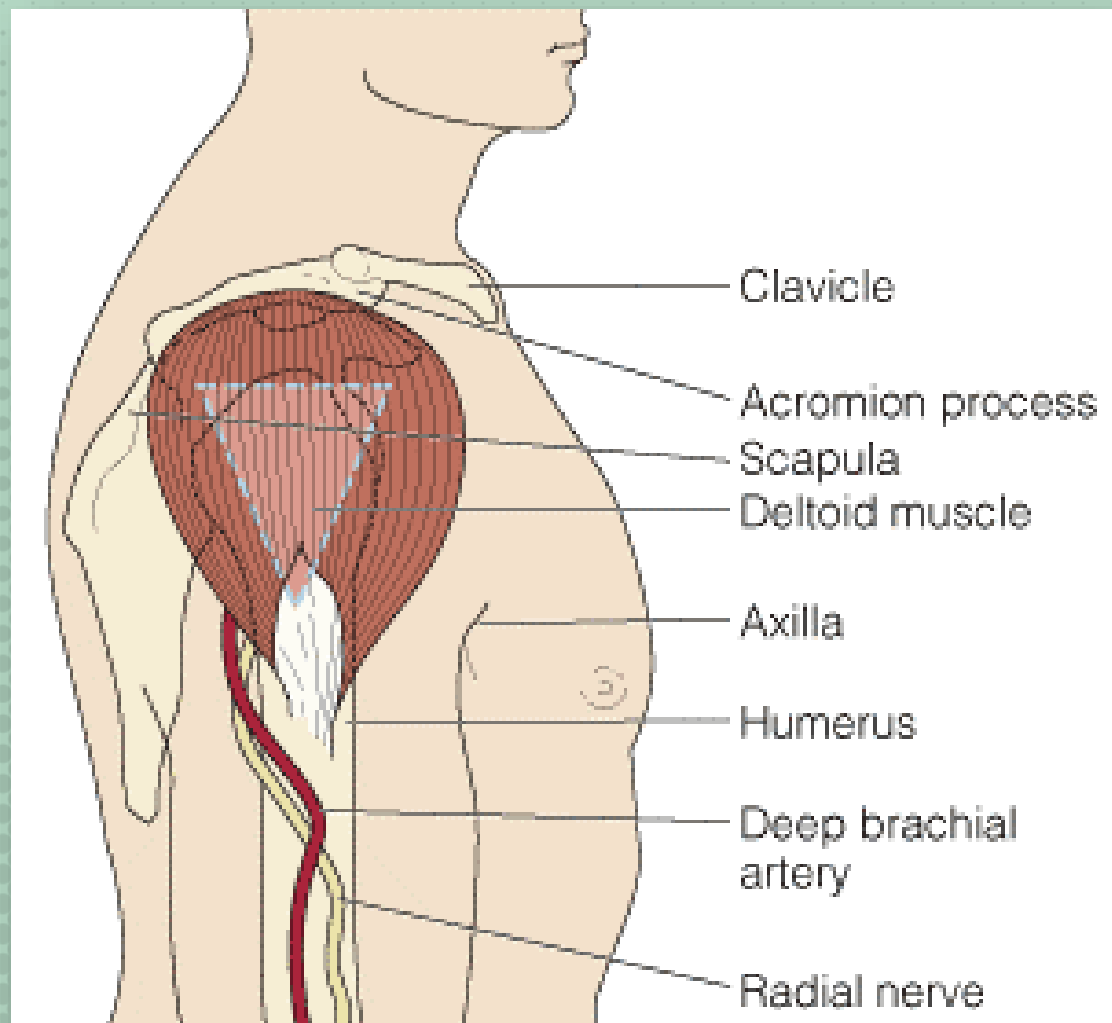
Administered into muscle just below the fatty tissue

Gently Roll

Do NOT aspirate

Separate injection sites by
1-2 inches







A chalkboard with the numbers 1, 2, 3, and 4 drawn in white chalk. The numbers are slightly blurry and have a textured appearance. A piece of white chalk is visible on the right side of the board, angled towards the bottom right.

Common Errors

- Arm extended
- Not locating deltoid
- Prevent Hematoma: Try to not let people “roll up their sleeve”
- Inject the entire thing

Managing Reactions

Localized

- Soreness, redness, itching or swelling at the injection site
- Slight/continuous bleeding

Psychological fright and syncope

- Extreme paleness, sweating, nausea, dizziness
- Fall, without loss of consciousness
- Loss of consciousness

Systemic

- Fever, malaise, muscle pain, headache, loss of appetite

VAERS

Vaccine Adverse Event Reporting System

- Monitors vaccine safety
- Analyzes adverse events
- Identifies possible risk associated with vaccine

Anyone can submit a report

- Parents
- Patients
- Healthcare Professionals





POLL

Have you ever seen
an **adverse** reaction
from a vaccine?

Documentation

- Date administered
- Manufacturer and lot #
- Name/ title of person who administered
- Address of facility where record will reside

Best Practices: Expiration date, route/site, dosage (volume)

Patient Information	
Name (last, first, middle initial)	DOB: / /
HC P ID#	
Initial Assessment	*D
History (pm)	
Exam (pm)	
Medication (pm)	
Procedures (pm)	
Test (pm)	
Follow-up visit	
(if available)	
Ongoing Control	D
Wheezing or chest tightness (<4x/week)	
Shortness of breath (<4x/week)	
Activity limited due to asthma	
Reliever with exercise	
Reliever (<4x/week)	
Exacerbations (hospital admit, ER visit, Walk-in Clinic) since last visit	
Work absence since last visit	
Measurements	D
Pre-exercise	
Post-exercise	
Technique	
Test	
Change	
Notes	D
History of Asthma	
Plan - (ACCP)	
Plan - (verbal)	
Admin. Techniques	
Signs	
Factors	
Environmental control	
Exacerbations	

Documentation

IF THE PATIENT REFUSES:

- Vaccine information was provided
- Patient chose to refuse vaccination
- Refusal forms

(continued from last page) T_{12} (temperature) T_{12} (temperature) or T_{12} (total following)	(continued from last page) T_{12} (temperature) or T_{12} (total following)
Initial Assessment	"D"
Anxiety pm	
pm	
Anxiety pm	
Pressure pm	
pm	
pm	
sounds q visit	
(if available)	
Home Control:	"D"
, wheeze or chest tightness (<4x/wk)	
Straight (<1/wk)	
not actively limited due to asthma	
Reliever with exercise	
Reliever (<4/wk)	
situations (hospital admit, ER visit, Walk-in Clinic) since last visit	
Work absence since last visit	
Summary	"D"
res	
post	
"changes	
res	
out	
change	
re	"D"
tion of Asthma	
Plan -- (ACCP)	
Plan -- (verbal)	
Adm. Techniques	
fig. signs	
or factors	
environmental control	
a. asthma	

Don't forget to tell the provider!

Free Postcards and Posters

- Handout for Patient EUA,
- What to Expect After the shots
- V-Safe and VAERS



Button Up!

Boost Vaccine confidence
Order for your team



WhyImmunize.org

No ID or insurance is required to receive a COVID-19 Vaccine and you will not be charged today. Patients who do have insurance, your insurance company will be billed.

We may be asking you to share:

Your insurance policy information

- Your insurance plan will reimburse us for your COVID-19 immunization administration.
- The payments are used to support these special COVID-19 clinics.

Your Medicare Member Benefits (MBI) number, even if you are covered under an Advantage Plan

- If you have Medicare coverage, we need your MBI to bill Medicare.
- If you are covered under an Advantage Plan – Medicare is requiring doctors submit COVID-19 claims directly to Medicare and NOT to the Advantage Plan. We need both your current MBI and your Advantage Plan policy information.

Social Security Number, Driver's License Number and State of Residence

- If you are covered under Medicare, your Social Security Number will allow us to look up your Medicare Benefits Number.
- If you accidentally made a typo entering your insurance policy, your ID will allow us to look up your insurance coverage.
- We need your ID#, Driver's License Number and State of Residence in order to bill a federal program for the uninsured, if your policy has lapsed or if you don't have insurance.

You will receive COVID-19 Vaccine today if you do not have any insurance or if you are uninsured. No information requested.
Please help us better understand our system, please enter all your personal and insurance information carefully. Thank you for your contribution.



COVID-19 Vaccines are free for everyone!

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- If you are covered under Medicare, your Social Security Number will allow us to look up your Medicare Benefits Number.
- If you accidentally made a typo entering your insurance policy, your ID will allow us to look up your insurance coverage.
- We need your ID#, Driver's License Number and State of Residence in order to bill a federal program for the uninsured, if you don't have insurance.

You will receive COVID-19 Vaccine today if you do not have any insurance or if you are uninsured. No information requested.

Please help us better understand our system, please enter all your personal and insurance information carefully. Thank you for your contribution.



COVID-19 Vaccines are free for everyone!

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- If you accidentally made a typo entering your insurance policy, your ID will allow us to look up your insurance coverage.



Patient Insurance Signs/Handouts to Print

Pick your favorite picture. Content the same

8.5x11 size



Adobe Acrobat
Document

Questions?

Vaccine
Administration



Group Sharing

What have we learned
about immunizing against
COVID-19?



Poll:

What should we talk
about next week?

See You Next Thursday
at 12:00pm!



EVALUATION
Tell us how we can
improve



EMAIL US
We are here to help
you all!
TAPIadmin@tapi.org



NEXT TOPIC



OPEN FORUM
Come with other
questions