'I LOVED MY JOB'

Nancy Adams, **Senior VP and Chief Operating** Officer to retire

The curtain on a four-decade career of caring service is drawing closed for Senior Vice President and Chief Operating Officer Nancy Adams, and UPMC Western Maryland will have some big shoes to fill when



Nancy Adams

she says farewell at the end of March.

"I want to express my sincere gratitude to everyone here," Nancy said. "I've learned so much from so many people, and I will do my best to continue to pass on the lessons I've learned, even in retirement. I had many more good days than bad."

Nancy began her career as a labor and delivery charge nurse in 1982. Over the next nearly 40 years, she rose her way through the nursing and administrative ranks at both Memorial Hospital and Western Maryland Health System.

She credits several factors to her successful career. "I loved my job," she said. "I never once dreaded coming to work. The flexibility of being a nurse was a key factor for me. I was proud to be a part of the fabric of our culture here that has been created by so many great nurses and medical staff, as well as a support staff who all work together with the best interest of our patients in mind."

She also passes on credit to recently retired UPMC Western Maryland President Barry Ronan, whom called a "near-perfect mentor who always promoted excellence, provided a wealth of knowledge and rewarded autonomy." Additionally, Nancy attributes her success to being able to work with an astute, contemporary Board of Directors that placed the patient first in making decisions, as well as her executive team colleagues and an executive support staff that Nancy said "could make any thing possible."

With her career approaching the rearview, Nancy is, of course, understandably eager to enjoy the fruits of her years of hard work. "I am looking forward to so much," she said. That includes spending time with her husband, their kids and grandkids, and traveling.

"My husband is the love of my life, and he has supported me without hesitation over these many years, and my son and daughter both have such an amazing work ethic and contribute to society in such positive ways. We also have two granddaughters that are the joy of all our lives. I just want to take the time to recognize all of the blessings I've been given in a more thoughtful way and find ways to continue to serve."

As for what she will miss the most when she leaves her office for the last time, Nancy said it will be the people above everything else. "I will miss my work family tremendously. They are all such good people."





Left, Karen and Greg Johnson happy to be home and together again. Right, Rachel Willison and her dog, Bane, get some sun. All three of these beloved members of the UPMC Western Maryland family were impacted by COVID-19, and all have now thankfully recovered.

COVID-19 hits close to home

Employees and their families rebound from the virus

It was a dramatic role reversal they never saw coming, but one that thankfully came with a happy

Karen and Greg Johnson

ending and a lot of newfound perspective.

WMHS Foundation Chief Development Officer Karen Johnson and her husband Greg were both stricken with COVID-19 shortly after Christmas, and while Karen experienced only mild symptoms, Greg spent nine days hospitalized at UPMC Western

"It's a life-changing experience," Greg said, now approaching two months on the right side of his illness. "I was in there with a whole floor of people in the same situation as me, and not all of them left. That was in the back of my mind the whole time."

Karen was the first to get sick, feeling ill a couple of days after Christmas and being diagnosed with COVID-19 soon after that. "I did pretty well," she said. see KAREN AND GREG - page 3

"I tried to keep as active

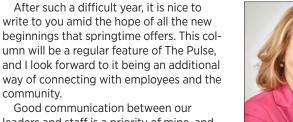
Rachel Willison, RN in the UPMC Western Maryland Emergency Department, does not do well with downtime. She thrives in the intense atmosphere of the ED. She works long hours, signs up for back-to-back shifts

and enjoys the grind - even amid the challenging atmosphere resulting from the COVID-19 pandemic.

At the end of last year, Rachel was forced to do something she hates. She had to stop.

Shortly after Thanksgiving, after experiencing symptoms consistent with COVID-19, Rachel tested positive and figured she would be back to work in about two weeks. After having a hard time recovering from the virus, it was clear she would need to be away a lot longer. Rachel didn't return to work for 68 days.

"At first I was just congested," she said. "My taste was a little off, but I just thought it was my typical allergies and sinus trouble. I had no idea what I was in see RACHEL - page 3 store for."



Good communication between our leaders and staff is a priority of mine, and it is important that you know we are here for you. Over the coming days, weeks, and months, we will be rewarding and recognizing those staff members who are getting it right, and we will be providing an open line of communication so we can address issues

Hopefully, you are reading this as a proud, vaccinated member of our UPMC Western Maryland staff or a member of our community who has received or soon will receive the COVID-19 vaccine. Every day seems to bring more access to this game-changing step that will one day end this terrible disease and allow us to get back to our lives with family and friends.

I would like to recognize the efforts of our



Michele Martz

A Minute with **Michele**

staff who have gone above and beyond to get the vaccine out into the community through several clinics held in our

auditorium. Thanks to your hard work and service, as of March 1 we have administered more than 2,700 vaccines to Allegany County residents who met the criteria established by the State of Maryland.

Our staff has volunteered to take part in this critical initiative, and for that I thank

Regarding the vaccine, please be sure to read the Q&A's on page 2 of this edition for answers to frequently asked questions about the COVID-19 vaccine. These Q&A's are just one of the many ways our new Vice President of Medical Affairs, Dr. Matt Simmons, is making himself available to answer questions and to encourage everyone to get the vaccine.

Rachel

Willison

To help our UPMC Western Maryland family stay informed about the great things happening in other departments, I encourage everyone to continue sending your success stories--as well as your heart-warming stories--to our Community Relations and Marketing team so these can be shared throughout our hospital, our community, and potentially the entire UPMC organization.

In closing, I want to thank and congratulate Nancy Adams on her upcoming retirement. She is an icon within our hospital and our community, and her strong leadership has helped make our hospital what it is today. I extend my best wishes to Nancy on her very well-deserved retirement.

We have many things to look forward to as 2021 takes shape, and I am eager and proud to lead such a great team here at UPMC Western Maryland.





Let's talk about the vaccine

On Tuesday, February 16, nearly 100 UPMC Western Maryland employees joined a virtual "Let's Talk" meeting with Vice President of Medical Affairs, Matthew Simmons, MD, to address questions about COVID-19 vaccines.

Dr. Simmons has studied the science and history of infectious disease extensively, but it is a personal experience from his childhood that truly provides his motivation in getting as much information as possible out to employees and the public. As an adolescent, he became ill with the flu. While laid up on the couch with orange Jell-O and cartoons, his grandmother also came down with the same virus.

Dr. Simmons recalled it was the most exhausted he had ever felt and that he was particularly frightened one night when he became short of breath, but his mother reassured him. "She told me I would be alright because I was young and healthy," he said, "and, surely, as moms are almost always right, I did get better." Sadly, his grandmother did not. Within days, she passed away from complications from pneumonia due to influenza. Now Dr. Simmons wonders: Why didn't she get a vaccine?

"Growing up in Elk Garden, W.Va., there was no doctor, and people were quite distrustful of medical science," he said. "Thirty years later, some of that hesitancy and misunderstanding still remains. I don't want another person to be like my grandmother -- to have access to health care but not get it because of disinformation or fears. It's important to me, as a new person in leadership here and as a member of this community, to be part of a cultural shift."

While the COVID-19 vaccine is clearly one of the biggest breakthroughs that has occurred since the start of the pandemic and is historically notable, this is not the first time the world has had to tackle an infectious virus. "There are years of science behind the methods and technologies fueling this pandemic response, with years of research at the front-end," Dr. Simmons said. "The development situation with COVID has been faster because issues with patents and bureaucracy have been limited, allowing the focus to remain on emergency use authorization and dissemination."

Still, Dr. Simmons acknowledges that inherent doubts and apprehension exist and that past experiences and events may compound personal and community concern. He points out that COVID-19 is uniting the world – every country has to deal with the virus, which doesn't discriminate or respond to privilege or resources. It affects everyone. "We are one giant human family, fighting back against the pandemic," he said. "We're all in this together"

About the vaccines

All three vaccines came to the market unprepared for the sheer demand. Production has been a slow ramp-up, but the country is able to utilize good infrastructure to create and deploy doses at an increasing pace. Maryland and West Virginia show strong vaccination rates, and the UPMC system, particularly in Western Maryland, is moving quickly to disperse this to the public. Our system is very dedicated to getting this out to all parts of

our community. I am personally very moved by the power of the people of this organization - working late, early, and tirelessly to get the job done for our neighbors.

The following questions were submitted by staff via email in the days leading up to the event.

How long does the vaccine last? Will I need a booster?

After almost a year in wait for a vaccine for COVID-19, and with many undergoing their first or second dose, there is uncertainty about how long it is effective and if there will be a need for boosters. The short answer is: we don't know yet, but right now I'd be ready to roll up my sleeve at least once a year. Studies are still tracking the immunity of people from early trials and taking the recent introduction of mutations into account. Given that COVID-19 does mutate, it is likely the strategy will be similar to the annual flu vaccine. Pfizer and Moderna are both already talking about a possible booster for the recent South African variant. Between the lives and dollars saved, I'd say a shot a year is not too bad. As the Johnson & Johnson and AstraZeneca vaccines come to market, and production grows overall, there will be more opportunity to explore boosters and possible fall timelines for those doses.

One piece of advice: Keep your vaccination card! This way you know what vaccine you received, when, and where, in the event that has bearing on future boosters.

How soon after my flu vaccine can I get a COVID-19 vaccine?

The professional guidance recommends at least two to three weeks between vaccines of any kind, not specific to this type. The idea is that it could confuse the immune system as it is trying to build protection, and waiting helps to ensure the vaccine is deployed to its maximum benefit.

Does getting vaccinated protect only the individual or other people too?

It takes about two weeks after the vaccine to develop any kind of immunity, and beyond. Further, while you may be effectively protected, it doesn't mean you can't or don't harbor the virus in your airway and could give it to other people. Growing data suggests it could have a wider protective effect, but it's best practice, out of concern for others in your community, to continue wearing a mask and social distancing.

Do you think the State will only vaccinate residents or move to serving the tri-state region?

UPMC Western Maryland is deeply rooted in the convergence of our three service states: Maryland, West Virginia, and Pennsylvania. This overlap is deeply engrained in our family, work, and community life. As of now, the federal government has the reigns over all vaccine supply and deploys it to the states under specific strategy to ensure equal and appropriate access per capita. With vacci-

nation opportunities expanding to grocery stores, pharmacies, etc., I believe there will be adjustments and expansion to pursing vaccination in areas you frequent, in and out of your home state.

Can/Should I get the vaccine if I _____

We received a number of questions about specific conditions and if it's safe to receive the vaccine in those cases. It comes down to this: If you are at risk for bad outcomes from COVID-19, you should try to get the vaccine. You want to protect yourself however possible.

If you are uncertain and concerned, make an appointment with a primary care or other provider or physician to discuss it further. In particular, staff mentioned those with weakened lungs, low blood platelets, or hypertension as questionable groups. In all cases, I recommend people be vaccinated, as the dose does not show contraindication, and these base conditions can be correlated to negative COVID-19 outcomes.

Is it safe in pregnancy?

Early on, there were not enough people in the safety trials for professionals to make a call about those with child or lactating. Now, I point to my colleagues at the American College of Obstetrics and Gynecology who have started to guide women to undergo the vaccine based on the science and lack of contraindication so far. Your risk of detriment or death from COVID-19 seems to outweigh any concern, and the vaccine structure and how it's made do not appear to interfere with essential development. Given this information, I would encourage pregnant women to move ahead with the vaccination process.

If I get the vaccine and have a bad reaction, does that mean I had COVID-19 already?

The only thing we can know for sure is that if you have a strong immune response to the vaccination, the dose is working. Having a strong response – meaning the immune system is learning how to deal with, process and fight off the virus – is a positive sign, despite how a headache, nausea, or fatigue might feel in the moment. Hang in there; it will pass, and you'll be protected for the future. Many people who had COVID-19, knowingly or unknowingly, have been vaccinated, and no reports of any issues have emerged.

If I have had COVID-19, how long do I wait before being vaccinated?

The Centers for Disease Control and Prevention has provided guidance to wait 90 days after having the COVID-19 virus before undergoing the vaccination. This is likely to change. At the start, with limited vaccine supply and assuming these people had 'durable immunity' for some time, we prioritized doses for more vulnerable people. As more vaccine arrives, it's likely we will see the CDC lessen that amount of time. However, active cases would still be ineligible, as to not confuse an already-on-alert immune system.

If I am feeling sick, should I still get the vaccine?

If you have a cold or flu symptoms at the time of your COVID-19 vaccine appointment, the recommendation is likely to be case by case. While a sniffle or cold may be of no concern to move forward, those with a fever would need to delay. It's best to check with your doctor if you experience this.

Note: If you have a question for Dr. Simmons, you can contact him directly or send your inquiry to Ed DeWitt at dewittej@upmc.edu.

See Page 4 for more coverage on the COVID-19 vaccine



"We are one giant human family, fighting back against the pandemic. We're all in this together."

-Dr. Matt Simmons

DAISY honors nursing staff

The last year has easily been one of the most challenging times to be a nurse. The uncertainty, stress and long hours epitomized by the COVID-19 pandemic are compounded on every level for those dedicated individuals tasked with caring for others.

Because of this, recognizing UPMC Western Maryland nurses and nursing staff for their efforts has become increasingly important. The DAISY award, an ongoing recognition program that honors and celebrates the skillful and compassionate care that nurses provide every day, is one of the ways that UPMC Western Maryland is recognizing these exemplary employees.

DAISY stands for Diseases Attacking the Immune System and is active in over 4,000 health care facilities around the world. The award was established by the family of J. Patrick Barnes who died from complications of Idiopathic Thrombocytopenic Purpura (ITP) in 1999.

During his hospitalization, Pat's family deeply appreciated not only the immense clinical skill but also the enormous compassion shown to Pat and his family by his nurses. When Pat died, they felt compelled to say "thank you!" to nurses in a very personal way.

Honorees, which can be nominated by patients, families, or colleagues, are chosen by a

committee of their peers. Thus far, UPMC Western Maryland has honored two DAISY award winners: Larry Rock, RN, and Jodi Brashear, LPN.

Larry works in our Inpatient Behavioral Health unit and is described as a phenomenal psychiatric nurse who demonstrates care and compassion. He goes out of his way to connect with patients and develop meaningful relationships.

Jodi works on 7 North and is described as an excellent nurse who goes above and beyond for her patients and coworkers. She is supportive and helpful to everyone and stays calm in stressful situations.

"Nursing is selfless, and it makes a huge difference. This past year has been extremely challenging, and this is just another way to give our nurses and nursing staff some much-deserved recognition," said Kayla Ellis, MSN, RN, Unit Based Educator in the Professional Development Department. Kayla also serves on the DAISY selection committee.

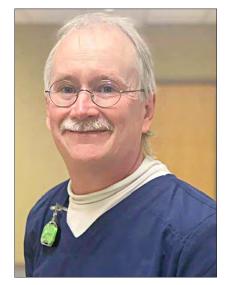
"Nursing is just a natural extension of myself," Larry said. "I like helping people out and helping them feel better. I began my career in 1991, and I'm still in shock as this was a first to be honored like that."

Jodi said the award makes her feel honored and appreciative to be validated for the hard



FOR EXTRAORDINARY NURSESTM

IN MEMORY OF J. PATRICK BARNES





Thus far, UPMC Western Maryland has honored two DAISY award winners, Larry Rock, RN, and Jodi Brashear, LPN, for going above and beyond.

work and compassion she provides to patients. "Since I was little, I always hoped of becoming a nurse. I genuinely love working with people and caring for others."

The DAISY committee is currently seeking nominations for what they hope will be a monthly award. Those

interested coworkers, managers, visitors and patients can submit an online nomination by visiting www. daisynomination.org/WM or they can submit a paper nomination form. Paper nomination forms and collection boxes are located at each nursing unit and outpatient office.

KAREN AND GREG- from page 1

as I could, and Greg was taking care of me. I had a fever and a cough, but it was not that big of a deal."

Greg began feeling bad in the days that followed, spiking a temperature and experiencing the worst chills of his life. After going to the emergency department, receiving medication and heading home, Greg was back at the hospital a few days later after his blood oxygen level plummeted. This time he was admitted.

"I'm glad they caught it fairly early, but, at the same time, that didn't ensure a positive outcome. I was pretty nervous," Greg said. "It was pretty rough," Karen added. "When I heard they were going to keep him, I broke down."

Alone at home, Karen was in an unfamiliar position. "I figured I could either cry and get upset, or I could get ahold of myself and

pray," she said. "One of the first things I did was send

out an email to some close friends to let them know what was going on. Then, I decided I would post on Facebook asking for prayers, and I was just astonished, overwhelmed and amazed with the response.

"I'm not a big Facebook person, but the updates would get 300 responses each. People from far and near were supportive. Each evening I would read Greg the comments over the phone. It was so encouraging. We heard from people we knew years ago as well as people who have been acquaintances and friends from a distance."

Those friends from a distance included people from the Johnsons' past whom Karen called "friends from different seasons of life." People they were close to from previous jobs, school, etc.--many from whom they eventually

grew apart. "But, then they show up, just like this, when you need them most," Karen said.

Still other people whom they have known just peripherally offered prayers and advice, and even shared Karen's Facebook posts to their own friends for prayer. "There were people in California, Florida, Arizona, and across the rural hills of West Virginia – people we've never met – praying for Greg because our friends spread the word."

Thankfully, gradually Greg's lungs started getting better, though his condition was up and down for several days. "I was so grateful for his caregivers," Karen said. "I spoke to his doctor every single morning on the phone. I was never given false hope, but he was also never negative with me, and the nurses were unbelievable."

Meanwhile, and though he is not someone who prefers the

spotlight, Greg was thankful for all the well wishes being sent his way. "In some ways I felt that people were peeking in my window too much and knew too much about what was going on," he said, "but, on the other hand, it was so encouraging knowing how many people were out there praying for me. I didn't know I had that many friends, or even that many people who knew who I was."

Now weeks after being discharged, Greg's recovery continues as the couple looks toward the future with a newfound outlook on life.

Physically, positive steps come every day, and Greg looks forward to resuming his construction and remodeling projects soon. He is also a gifted tenor in the gospel group Servant's Heart and has already resumed singing to prepare for upcoming appearances already scheduled.

Mentally and spiritually, of course, there is a lot for which to be thankful. Karen, so often on the other side of charitable and kind deeds, was the benefactor of countless messages, meals and gestures of goodwill. That experience is not lost on her. "I hope to be half as good a friend as mine were to me," she said. "Greg and I are so fortunate that we are not often the needy ones."

Greg has gained a lease on life he may not have experienced otherwise. "I am much more sensitive now," he said. "I know people are still battling this, and I know not everyone's prayers get answered. I don't understand why, of course, so overall this has made me more tender. It changes your perspective on humanity. All of these people were willing to do anything for us. It's heartwarming."

RACHEL - from page 1

During the first two weeks, Rachel experienced a lot of fatigue. "I felt worn out. I never had a cough or fever, but when I breathed through my nose it felt raw – like I had been running outside in the cold."

Soon, an elevated heart rate resulted from doing simple things. "I chalked it up to sitting around for two weeks, but it progressively got worse to the point where after walking upstairs my heart rate was 140." She was also experiencing dizziness.

These new symptoms resulted in a quick trip to the ED. "My nurse brain told me to go," Rachel said. "I had seen so many different outcomes, including mild patients who got really bad really quickly." Thankfully, she did not need to be admitted to the hospital.

From Christmas through the second week of January was the worst period, as she was more symptomatic. "I was nauseous, dizzy, and my heart rate remained high."

During her illness, she was under constant care from her primary care doctor. He told her that she had likely recovered from COVID itself, but the havoc the illness wreaked on her body was so great she had a hard time recovering. Thankfully, by the end of January, Rachel's symptoms were milder. She was able to increase her levels of activity.

The time away from work was difficult for her for a lot of reasons. "It was hard for me to be off," Rachel said. "I was not that sick. I was one of the lucky ones who didn't need admitted/didn't need a ventilator. It was difficult to talk to my coworkers and know all they were going through in the ED and not be able to help."

However, she knew time was needed for her to heal, and, thankfully, she was never burdened with worrying about putting work ahead of her health. "I had to keep telling myself that I needed to let myself get better," she said. "I'm not one to just sit and not do stuff. Obviously, things weren't right. I couldn't even take my dog outside."

Like she always does, Rachel was able to find a silver lining during those challenging weeks at home. "I did things like read, work puzzles and things I never have time to do

otherwise, so that was kind of nice in a way. I found some time for myself, finally."

When she was finally able to return to work in mid-February, her coworkers welcomed her back with open arms and a funny flyer of her face on a milk carton. "They all know I like to goof around and play jokes and have fun. They sure gave me a hard time and still do, but it's all in good fun."

Now firmly on the right side of the disease, Rachel doesn't forget she is one of the fortunate ones. "I just thought I'd be out two weeks, so I feel like I've been through a lot, but on the other side of that, I've seen how bad it can get for people, so I know I'm blessed."

As she continues to heal, she is glad to be gradually getting back to her normal, busy self. "It's good to be able to be on the side I'm used to and to be able take care of people again. I have a big part of my life back."



After more than two months away, Rachel's coworkers in the emergency department were happy to have her back. They hung these fun flyers up to welcome her when she returned to work.

'An amazing journey'

After a long battle with COVID-19, Cindy Leister turned to the UPMC Western Maryland Comprehensive Inpatient Rehab Unit to help prepare her to go home

Simply put, Cindy Leister of Hyndman wanted to go home.

After battling COVID-19 in the hospital for three weeks (including five days on a ventilator), her instinct to return to her husband, children, church family and friends was pushing her to get better and get discharged.

Though she was out of the woods in terms of her COVID-19 fight, an important part of Cindy's journey to independence needed to take place before she could safely return home. Several caregivers suggested Cindy consider entering the Comprehensive Inpatient Rehabilitation Unit, which is housed on the sixth floor of the main hospital at UPMC Western Maryland.

The CIRU consists of 13 private patient rooms, a bright dining room with views of the mountains, a spacious therapy gym and a transitional apartment for practicing the tasks and skills needed to succeed in life after rehab. Patients can wear their own clothes from home and receive approximately three hours of daily therapy, six days per week.

The program is dedicated to providing comprehensive rehabilitative services for patients with physical, functional thinking, swallowing and/or

communication impairments. Through a team approach, sound rehabilitative therapy is provided to effect positive change in functional ability, independence, and self-reliance across a variety of environments, while protecting and promoting the rights of the patients served.

"From beginning to end, it has been an amazing journey," Cindy said after completing her rehab program and shortly before heading home. "The experience I have had here has been all positive. I don't have anything but positive things to say about the care I've been given." That care encompassed several different service lines, though Cindy spent the most time on 7 South in the COVID-19 unit and then five days in the rehab program as she reconditioned herself to be able to do the tasks she would need to do back home.

Cindy's program centered on getting herself familiarized with doing basic tasks while being hooked up to an oxygen tank. Her days in the CIRU consisted of working with staff to practice things like getting dressed, executing kitchen skills, showering and making the bed without tripping over the cord or knocking over her tank. The tank can be cumbersome for people

who have never had to use one before. During her stay, Cindy made a list of goals and then worked to complete them.

"From top to bottom, the care I received every step of the way was amazing. Everyone was super nice. They made me feel like I was the only person in this hospital. That helped so much."

Her time in the CIRU allowed Cindy to regain the confidence she lost during her COVID-19 battle. "I am so thankful I did this. Going home right away would have been more challenging, and I'd be a lot slower than I am now. I am so glad I was able to do this program. I would recommend it to anyone. It's a good step to take."

As for what the best part about going home would be, Cindy's answer was not a complicated one.

"I just want to be home. Period. I have a big family, and in 47 years I've never been apart from my husband for more than four days."

As for the perspective she gained during her illness and rehab, Cindy knows she is one of the lucky ones. "My life has changed forever," she said. "I've always had a positive attitude, but I will never take anything for granted again."



Cindy Leister spent three weeks fighting COVID-19 before spending time in the UPMC Western Maryland CIRU getting ready to go home. "The experience I have had here has been all positive. I don't have anything but good things to say about the care I've been given," she said.

Understanding the COVID-19 vaccine

Dr. Donald Yealy, UPMC's senior medical director and chair of the Department of Emergency Medicine at UPMC and the University of Pittsburgh, wrote this column.

Many questions exist about COVID-19 vaccines, and myths continue to circulate. The first step to answering questions, and dispelling myths, is understanding how the vaccines work and affect the body. The COVID-19 vaccines currently available are mRNA vaccines, which means they do not contain live virus. Instead, these vaccines use a small instruction – the mRNA – to teach the body to respond to a part or parts of the virus. This generates an immune response, allowing the body to develop antibodies and immunity cells that recognize the virus and provide protection.

You cannot get COVID-19 from this type of vaccine – there is no virus in the vaccine. These vaccines were produced quickly, but with excellent science and rigorous evaluation. The Moderna and Pfizer COVID-19

vaccines both decrease serious COVID-19 infection rates in clinical trials by about 95% a week after the second dose. This is an impressive statistic for any vaccine.

While both vaccines have been authorized for emergency use by the U.S. Food and Drug Administration, there are some caveats. The Centers for Disease Control and Prevention (CDC) recommends that anyone with a history of anaphylaxis or severe allergies talk with their physician before getting the vaccines currently available, and anyone who had an anaphylactic reaction (that is, immediate severe breathing and fainting/near fainting events that needed advanced medical care) to the first dose of a COVID-19 vaccine should not receive the second dose. Other reactions, much more common, do not preclude you from being vaccinated.

Women who are pregnant or lactating can receive the COVID-19 vaccine, as can people who were previously infected with COVID-19; again, discuss this with your doctor

first. If you had a positive COVID-19 infection and were treated with either monoclonal antibodies or convalescent plasma, you should wait for 90 days to receive the vaccine. Otherwise, once you recover from a COVID 19 infection – or any infection – you could receive the vaccine, though your immunity is likely good.

The most common side effects are muscle aches, fatigue, soreness at the injection site, headache and fever— but these typically persist for only one to three days following vaccination.

There is no evidence of COVID-19 vaccines causing fertility problems, and serious allergic reactions are very rare. If you are concerned you may have a reaction, talk to your physician. Additionally, the COVID-19 vaccine will not alter your genetic composition.

To see an end to this pandemic, a large percentage of the population needs to be immunized against COVID-19. Getting vaccinated achieves that much more safely than infection followed by recovery. Get



Dr. Donald Yealy

vaccinated and tell all you know to do the same. The strongest immunity occurs at about seven days after receiving the second dose.

Even after vaccination, it is crucial to continue masking, distancing and hand washing as increasing numbers of people are vaccinated. UPMC is eager to vaccinate more people in the communities we serve, and we have the infrastructure, staff and clinics to do so. When we are

notified that more vaccine is on its way to support these efforts, we will engage our patients and the public, providing clear instruction on how to request vaccination. It bears repeating that the most effective way to protect yourself from COVID-19 continues to be masking, distancing and handwashing.













Drop us a line!

