



ADVOCATE ILLINOIS MASONIC MEDICAL CENTER  
JOHN H. STROGER JR. HOSPITAL OF COOK COUNTY  
NORTHWESTERN MEMORIAL HOSPITAL  
UNIVERSITY OF CHICAGO MEDICAL CENTER

**DATE:** December 11, 2020

**TO:** Region 11 EMS Providers

**FROM:** REGION 11 EMS MEDICAL DIRECTORS CONSORTIUM

**SUBJECT:** NEW VACCINE ADMINISTRATION POLICY AND PROCEDURE, COMMUNITY PARAMEDIC POLICY

**There are two new Policies and one new Procedure that will be effective Friday, December 11<sup>th</sup>, 2020.**

- Vaccine Administration Policy and Vaccine Administration Procedure
- Community Paramedic Policy

The **Vaccine Administration Policy** and **Vaccine Administration Procedure** are part of the additional paramedic scope of practice per IDPH under an approved EMS System Plan. All EMS Vaccine Training Programs shall be approved by the Resource Hospital and include components that are specific to the vaccine administered under an approved Vaccination Program. Paramedics that are trained and deployed to administer vaccines are required to submit documentation of the vaccination event using the "Paramedic Vaccination Tracking Form" to the Resource Hospital and IDPH.

The **Community Paramedic Policy** defines the role, training, and credentialing of Community Paramedics that operate within an approved Mobile Integrated Healthcare (MIH) Program in Region 11. The current Mobile Integrated Healthcare (MIH) Program is in pilot status under the Chicago South EMS System.

These documents will be posted with all current Region 11 EMS System Protocols, Policies, and Procedures on our website <http://chicagoems.org>

Please contact your Resource Hospital with questions.

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Enclosed: Region 11 Vaccine Administration Policy  
Region 11 Vaccine Administration Procedure  
Region 11 Community Paramedic Policy

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<b>REGION 11 CHICAGO EMS SYSTEM POLICY</b>	Title: Vaccine Administration
	Section: EMS Personnel
	Approved: EMS Medical Directors Consortium
	Effective: December 11, 2020

## **VACCINE ADMINISTRATION**

### **I. PURPOSE:**

This policy outlines the guidelines for licensed Paramedics within the Region 11 Chicago EMS System to administer vaccines in order to assist state and local partner agencies with mass vaccination efforts as per IDPH (Illinois Department of Public Health) policies.

### **II. DEFINITION:**

Vaccines include any vaccines under an IDPH mass vaccination plan.

### **III. ROLE:**

Vaccine administration is part of the additional Paramedic scope of practice per IDPH under an approved EMS System Plan.

### **IV. TRAINING PROGRAM:**

Training programs shall be approved by the Resource Hospital and include the following components that are specific to the vaccine administered under an approved Vaccination Program.

#### **A. Vaccine Education**

1. Pharmacology of vaccine
2. Administration
  - a. Storage and handling of vaccine
  - b. Dosage and route of administration
  - c. Indication or eligibility for administration
  - d. Contraindication for administration
3. Vaccine side effects or adverse reactions
4. Emergency treatment for vaccine reactions
5. Vaccine Information Statement (VIS)

#### **B. Vaccine Administration Record (VAR) documentation**

#### **C. Reporting of possible adverse effects to the Vaccine Adverse Events Reporting System (VAERS)**

#### **D. Vaccine Administration procedure skills validation**



<b>REGION 11 CHICAGO EMS SYSTEM POLICY</b>

Title: Vaccine Administration
Section: EMS Personnel
Approved: EMS Medical Directors Consortium
Effective: December 11, 2020

E. Roster of Paramedics that have completed the training

**V. REPORTING:**

There should be communication between the EMS Agency and the Resource Hospital regarding the site and date that Paramedics are performing vaccine administration.

**VI. QUALITY ASSURANCE:**

A quality assurance plan must be in place for tracking and documenting the use of paramedics performing vaccine administration.

**VII. CONTINUING EDUCATION:**

Annual continuing education is required for paramedics performing vaccine administration.



## Paramedic Vaccination Tracking Form

This form must be filled out and sent in to the EMS System after the vaccination event.

Please email this completed form to the Resource Hospital EMS System Coordinator.

<i>EMS Agency Name:</i>	
<i>EMS Agency Address:</i>	
<i>Contact Name:</i>	<i>Contact Phone Number:</i>

<i>Vaccine Manufacturer:</i>	<i>Lot Number:</i>	<i>Expiration Date:</i>
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The following paramedics have been approved to administer vaccines in the Region 11 Chicago EMS System. All paramedics listed have gone through Just-In-Time or annual vaccination training for an approved Vaccination Program.

<i>Paramedic Name</i>	<i>Paramedic License #</i>	<i># of Vaccines Administered</i>

*Signature of Contact:* \_\_\_\_\_ *Date:* \_\_\_\_\_



**REGION 11  
CHICAGO EMS SYSTEM  
PROCEDURE**

Title: Vaccine Administration
Section: Medication Administration/Access
Approved: EMS Medical Directors Consortium
EMS Level: ALS

## **VACCINE ADMINISTRATION**

### **INDICATIONS**

- Adult or pediatric (age  $\geq 6$  years) recipient that has not previously received the vaccine or as an annual schedule

### **CONTRAINDICATIONS**

- Age less than 6 years
- Severe allergic reaction (e.g. anaphylaxis) after a previous dose or to a vaccine component
- Additional vaccine specific contraindications

### **EQUIPMENT**

- CDC Vaccine Information Statement (VIS)
- Vaccine Administration Record (VAR)
- Alcohol swab
- Needle (1 inch length, 22-25 gauge)
- Syringe
- Vaccine medication

### **PROCEDURE**

1. Provide recipient the appropriate CDC Vaccine Information Statement (VIS).
2. Complete the information for the Vaccine Administration Record (VAR).
3. Review completed VAR, this serves as written consent for vaccination.
4. Apply personal protective equipment.
5. Prepare and verify appropriate name, medication, dose, route, and expiration date.
6. The injection site (left or right deltoid) should be identified and cleansed with alcohol pad.
7. Select 1-inch needle (22-25 gauge) and draw up vaccine medication with syringe.
8. Stretch the skin flat between the thumb and forefinger.
9. Insert the needle at 90 degrees to the skin and deliver medication in a quick, steady manner.
10. If possible, monitor the patient for allergic reaction 15-20 minutes after administering vaccine.



## REGION 11 CHICAGO EMS SYSTEM PROCEDURE

Title: Vaccine Administration

Section: Medication Administration/Access

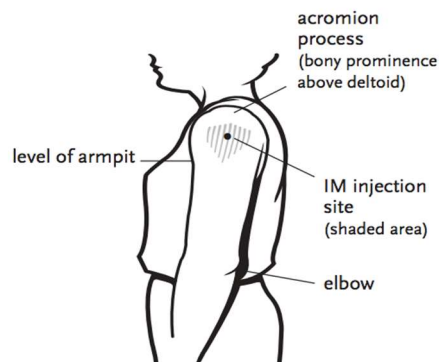
Approved: EMS Medical Directors Consortium

EMS Level: ALS

### ADMINISTRATION<sup>1</sup>

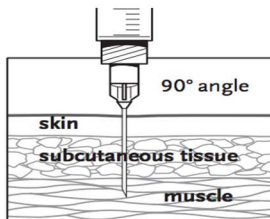
#### A. Intramuscular Injection Site

##### **Intramuscular (IM) injection site for children and adults**



Give in the central and thickest portion of the deltoid muscle – above the level of the armpit and approximately 2–3 fingerbreadths (~2") below the acromion process. See the diagram. To avoid causing an injury, do not inject too high (near the acromion process) or too low.

#### B. Needle Insertion



##### **Needle insertion**

Use a needle long enough to reach deep into the muscle.

Insert needle at a 90° angle to the skin with a quick thrust.

(Before administering an injection of vaccine, it is not necessary to aspirate, i.e., to pull back on the syringe plunger after needle insertion.<sup>1</sup>)

Multiple injections given in the same extremity should be separated by a minimum of 1", if possible.

<sup>1</sup> CDC. "General Best Practices Guidelines for Immunization: Best Practices Guidance of the ACIP" at <https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf>

<sup>1</sup> Referenced from Immunization Action Coalition (IAC) - <https://www.immunize.org/catg.d/p2020.pdf>



**REGION 11  
CHICAGO EMS SYSTEM  
PROCEDURE**

Title: Vaccine Administration
Section: Medication Administration/Access
Approved: EMS Medical Directors Consortium
EMS Level: ALS

**C. Emergency Treatment for Vaccine Reactions**

Administering any medication, including vaccines, has the potential to cause an adverse reaction. To minimize the likelihood of an adverse event, screen patients for vaccine contraindications and precautions prior to vaccination. When adverse reactions do occur, they can vary from minor to the rare and serious. Be prepared for any type of reactions.

Reaction	Signs and Symptoms	Management
Localized	Soreness, redness, itching or swelling at the injection site	Apply a cold compress to the injection site. Consider giving an analgesic or antipruritic medication.
	Slight bleeding	Apply pressure and an adhesive compress over the injection site.
	Continuous bleeding	Place thick layer of gauze pads over site and maintain direct and firm pressure.
Psychological fright, pre-syncope and syncope	Fright before injection is given	Have patient sit or lie down for the vaccination.
	Patient feels “faint” (e.g. light-headed, dizzy, weak, nauseated or has visual disturbance)	Have patient lie flat. Loosen any tight clothing and maintain open airway. Apply cool, damp cloth to patient’s face and neck. Keep them under close observation until fully recovered.
	Fall without loss of consciousness	Examine the patient to determine if injury is present before attempting to move the patient. Place patient flat on back with feet elevated.
	Loss of consciousness	Check to determine if injury is present before attempting to move the patient. Place patient flat on back with feet elevated.
Anaphylaxis	<b>Skin and mucosal symptoms</b> such as generalized hives, itching or flushing; swelling of lips, face, throat or eyes. <b>Respiratory symptoms</b> such as nasal congestion, change in voice, sensation of throat closing, stridor, shortness of breath, wheezing, or cough <b>Gastrointestinal symptoms</b> such as nausea, vomiting, diarrhea, cramping abdominal pain. <b>Cardiovascular symptoms</b> such as collapse, dizziness, tachycardia, hypotension	See the Allergic Reaction and/or Anaphylaxis Region 11 EMS Protocol – ALS.

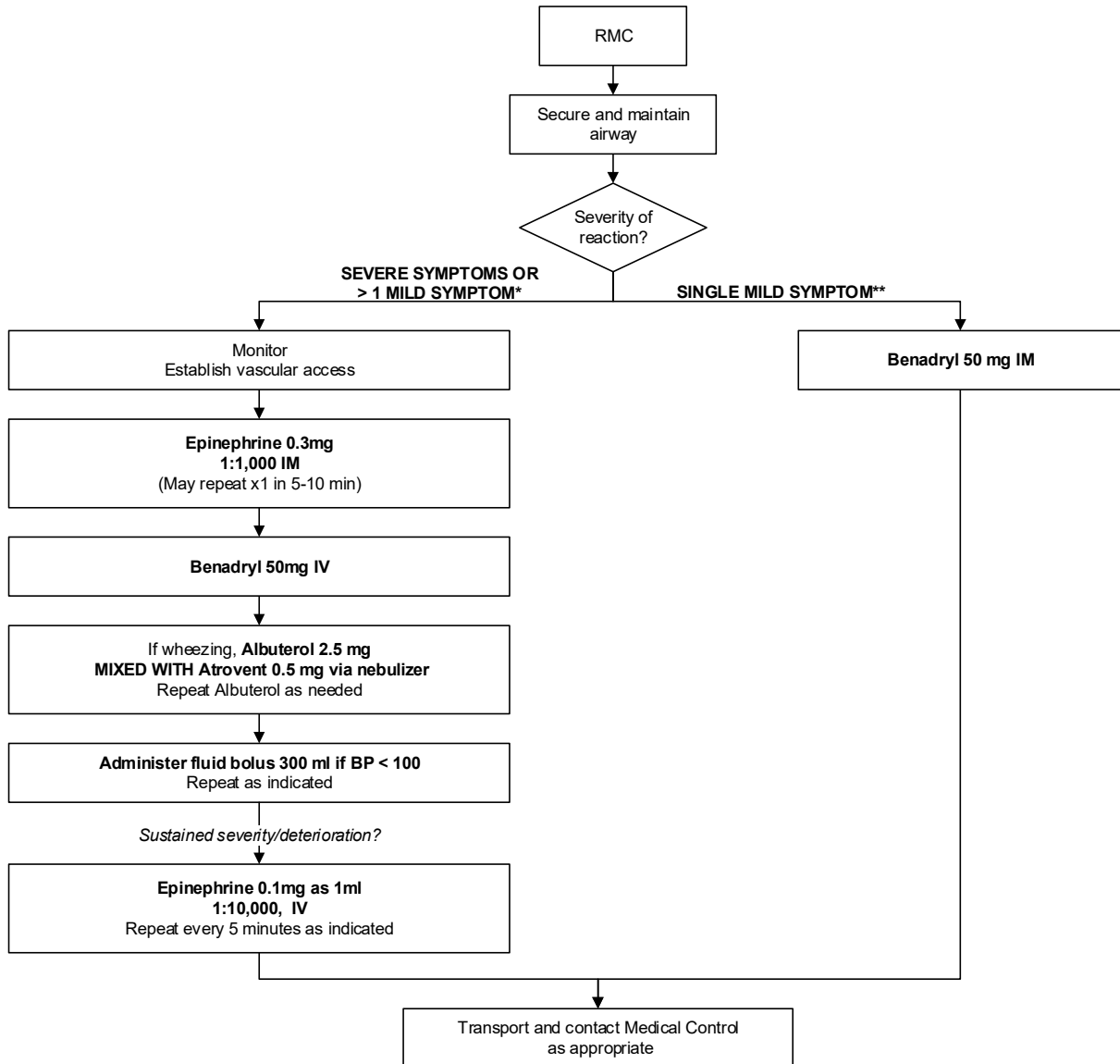




**REGION 11  
CHICAGO EMS SYSTEM  
PROTOCOL**

Title: Allergic Reaction / Anaphylaxis - ALS
Section: Respiratory
Approved: EMS Medical Directors Consortium
Effective: April 1, 2017

**ALLERGIC REACTION and/or ANAPHYLAXIS - ALS**



\*Severe symptoms of an allergic reaction may include any combination of the following:

RESPIRATORY – Shortness of breath, wheezing, repetitive coughing  
CARDIOVASCULAR – Pale, cyanotic, low blood pressure, dizzy  
THROAT – Tightness, hoarse, trouble breathing/swallowing  
MOUTH – Swelling of the tongue and/or lips  
SKIN- Diffuse hives or redness  
GI – Repetitive vomiting, severe diarrhea  
NEURO – Anxiety, confusion, sense of doom

\*\*Mild symptoms of an allergic reaction may include any combination of the following:

NOSE – Itchy/runny nose, sneezing  
MOUTH – Itching  
SKIN- Few hives, mild itching  
GI – Mild nausea/discomfort





**REGION 11  
CHICAGO EMS SYSTEM  
POLICY**

Title: Community Paramedic

Section: EMS Personnel

Approved: EMS Medical Directors Consortium

Effective: December 11, 2020

## **COMMUNITY PARAMEDIC**

### **I. PURPOSE:**

To define the role of the Community Paramedic (CP) within a Mobile Integrated Healthcare (MIH) Program in the Region 11 EMS System.

### **II. DEFINITION:**

A Community Paramedic (CP) is a licensed Paramedic that completes a standardized Community Paramedic education program through an approved college or university and operates as an advanced paramedic in the provision of health education, monitoring and services beyond the roles of traditional emergency care and transport. Community Paramedic education programs using the North Central EMS Institute Community Paramedic curriculum are recognized by the Region 11 EMS System.

### **III. ROLE:**

The Community Paramedic will assist individuals in overcoming healthcare barriers by identifying and mitigating gaps in their health and wellness needs and evaluation of specific disease processes. The Community Paramedic coordinates with community resources to support relationships between the patient and medical and social services. Community Paramedics are credentialed by the Region 11 EMS System to work in an IDPH approved Mobile Integrated Healthcare Program.

### **IV. CREDENTIALING:**

To be credentialed as a Community Paramedic by the Region 11 EMS System, the candidate must:

- A. Maintain a current IDPH Paramedic license;
- B. Have two years minimum of field experience as a Paramedic;
- C. Successfully complete a Community Paramedic education program with certificate from a Region 11 approved program that includes clinical experience provided under the supervision of the EMS Medical Director;
- D. Submit a letter of interest to the EMS Medical Director;
- E. Submit a letter of recommendation in support of the candidate from a mentor that supports the recommended qualities as listed below;
- F. Attend a Region 11 EMS orientation session for the MIH Program;



<b>REGION 11 CHICAGO EMS SYSTEM POLICY</b>	Title: Community Paramedic
	Section: EMS Personnel
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- G. Practice in accordance with the Region 11 Community Paramedic Protocols;
- H. Complete an additional 12 hours of Continuing Education every year at the Paramedic level that is focused on Community Paramedic topics.

**V. MOBILE INTEGRATED HEALTHCARE (MIH) PROGRAM PARAMEDIC SELECTION:**

Community Paramedics are advanced Paramedics that require a specialized knowledge base and essential characteristics to ensure success in the role. Community Paramedics credentialed within Region 11 are eligible to participate in an approved Mobile Integrated Healthcare (MIH) Program as defined by the EMS Agency, the EMS System, and IDPH. The following are recommended qualities that Community Paramedics should display:

- A. Proficient patient assessment skills;
- B. The ability to work collaboratively as a member of a healthcare team;
- C. Good communication and social skills;
- D. Empathy;
- E. Acceptable EMS System and EMS Agency personnel file upon review.