

COVID-19 Update

April 16: Johnson & Johnson Vaccine and Patient Vaccination Updates

Today's issue includes information about the use of the Johnson & Johnson vaccine, as well as research and recommendations regarding blood clots reported in vaccinated individuals. It also includes an update on Northwestern Medicine patient vaccinations.

JOHNSON & JOHNSON VACCINE USE PAUSED

In accordance with [Tuesday's recommendation](#) from the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA), Northwestern Medicine has paused all plans to administer the Johnson & Johnson COVID-19 vaccine, and will provide only the Moderna and Pfizer-BioNTech vaccines until further notice. The Johnson & Johnson vaccine has not been administered to patients or employees at any NM vaccination clinic. At all currently scheduled vaccination appointments, patients will receive either the Moderna or Pfizer-BioNTech vaccine based on availability. No vaccine appointments will be canceled or postponed.

The CDC and FDA are reviewing data involving eight reported U.S. cases of a rare and severe type of blood clot in individuals after receiving the Johnson & Johnson vaccine, out of a total of more than 7.4 million people in the U.S. who have received the Johnson & Johnson vaccine. In Illinois, approximately 290,000 doses of the Johnson & Johnson vaccine have been administered to date.

At the request of federal health authorities, please encourage patients who have received the Johnson & Johnson vaccine at an alternative location to seek medical attention if they develop severe headache, abdominal pain, leg pain or shortness of breath within three weeks after vaccination. Please report any patient who experiences symptoms related to any of the COVID-19 vaccines via the VAERS system. Additional information is available on the [CDC](#) and [FDA](#) websites.

NM will continue to monitor information and guidance from the CDC and FDA, and provide updates in the [Patient Vaccine Toolkit](#) on Physician Focus and [NM Interactive](#) (login required).

VACCINATION AND BLOOD CLOTS

Several cases of unusual thrombotic events following receipt of adenovirus vector COVID-19 vaccines have been reported in the U.S. and Europe. Like the Johnson & Johnson vaccine in the U.S., the AstraZeneca vaccine may also be linked to similar events in Europe. Eleven cases from Germany and Austria and another five from Norway — all involving the AstraZeneca vaccine — were reported in [two articles](#) published April 9 in the *New England Journal of Medicine*. While venous thromboembolism rarely has been associated with mRNA vaccines, the unusual reports following adenovirus vector vaccines appear to represent a distinct clinical syndrome.

Patients who present with thrombosis and thrombocytopenia — vaccine-induced immune thrombotic thrombocytopenia (VITT) — typically experience symptom onset between five and 16 days after vaccine administration. Notably, venous thromboembolism events have occurred in unusual locations: A majority of reported cases had cerebral sinus vein thrombosis, and cases of splanchnic (abdominal) vein thrombosis have occurred as well, in addition to pulmonary embolism and deep vein thrombosis. Patients tend to be young (ages 18 to 54; median age of 36 in one case series) with a female predominance. There is no known association with medications or use of oral contraceptives in the vaccine recipients.

In all of the cases reported in Europe, patients tested positive for antibodies against PF4-heparin, which is the antibody complex that causes heparin-induced thrombocytopenia (HIT). Therefore, this may represent an immune reaction that clinically mimics HIT but is triggered by the vaccine in the absence of prior heparin exposure.

Summary points

Vaccine-induced immune thrombotic thrombocytopenia (VITT):

- May occur following receipt of an adenovirus vector COVID-19 vaccine (Johnson & Johnson, AstraZeneca)
- Predominantly affects young women
- Presents with thrombosis (including cerebral sinus vein thrombosis, abdominal vein thrombosis) and thrombocytopenia five to 16 days after receiving the vaccine
- Patients should monitor for symptoms of thrombosis and bleeding (headache, neurologic symptoms, abdominal pain, chest pain, shortness of breath, leg pain, leg swelling, unexplained bleeding and bruising) for up to 21 days after vaccination
- Evaluation should include CBC, HIT PF4 antibody and imaging for thrombosis
- Advisable to treat as if positive for HIT with non-heparin anticoagulant, until additional data and information emerges

PATIENT COVID-19 VACCINATION STATUS UPDATE

A total of 79,345 patients and employees have been fully vaccinated by NM as of April 13. In addition, more than 430,000 vaccination invitations have been sent to all established patients age 65 and older, as well as established patients age 16 and older who have at least one high-risk medical condition as defined by IDPH. NM continues to administer almost 10,000 first doses per week across the health system.

Beginning Monday, April 19, all established patients age 16 and older will be invited to schedule vaccination appointments. Please continue to monitor the [Patient Vaccine Toolkit](#) on Physician Focus and [NMI](#) (login required) for notification that distribution is complete.

NM is now distributing CDC vaccination cards to patients when they receive their first and second doses at an NM facility. For patients who received their final vaccine dose prior to April 12, they can now submit a request to have a CDC vaccine card mailed to their home. A MyNM request workflow is under development, and in the meantime, cards can be requested via phone or email as follows:

- Phone: 877.9.RECORD (877.973.2673)
- Email: releaseofinformation@nm.org

Please note duplicate CDC cards are not available due to limited supply. Additional information to assist patients in accessing vaccination cards is available in the [Patient Vaccine Toolkit](#) on Physician Focus and [NMI](#) (login required).

Since vaccine supply remains limited, patients should schedule an appointment at any available vaccination provider site. The website links provided below offer vaccination locations in Illinois.

Government locations

- [City of Chicago](#)
- [Cook County](#)
- [DeKalb County](#)
- [DuPage County](#)
- [Kane County](#)
- [Lake County](#)
- [McHenry County](#)
- [State of Illinois](#)
- [Will County](#)

Retailers and other public locations

- [CVS](#)
- [Hy-Vee](#)
- [Jewel-Osco](#)
- [Kroger](#)
- [Mariano's](#)
- [Meijer](#)
- [United Center](#)
- [Walgreens](#)
- [Walmart](#)

The Epic dotphrase [VaccineNoApptAvailable](#) includes a link to the main [Illinois vaccine finder page](#). To further assist patients, NM also offers the following resources:

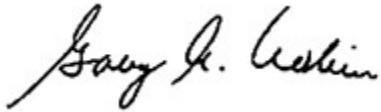
- For patients encountering difficulty with scheduling online, **the COVID-19 Vaccine Hotline at 312.694.6600** is available for assistance.
- If a patient qualifies as eligible due to a high-risk medical condition as defined by IDPH but has not received an invitation, please follow the workflow outlined in the [COVID-19 Vaccine Generic First Dose Order High Risk 16-64 SmartSet tip sheet](#) to place an invitation order. The patient will receive the invitation to schedule a vaccination appointment within two business days of the order being placed.

For additional information and tip sheets regarding patient vaccination, please visit the “Tip Sheets for Patients” and “Tip Sheets and Protocols for Physicians and Staff” sections in the [Patient Vaccine Toolkit](#) on Physician Focus and [NMI](#) (login required).

Additional COVID-19 reminders

- Completing the **Symptom Check** prior to entering an NM building is still required. Access it through the NM Workforce app on your mobile device or by visiting nmsymptomcheck.nm.org.
 - Continue to follow **established safety protocols**, including universal masking, physical distancing and proper hand hygiene, even if you are fully vaccinated. While the CDC has loosened some restrictions for those who are fully vaccinated, the changes do not apply to healthcare settings.
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As a reminder, COVID-19 test positivity and number of cases continue to increase across Illinois, so testing should be performed in any patient with symptoms consistent with COVID-19. Also, continue to encourage patients to avoid large gatherings, to consistently wear masks and to get vaccinated. This is particularly true for young adults.

A handwritten signature in black ink that reads "Gary A. Noskin". The signature is written in a cursive style with a large, sweeping initial "G".

Gary A. Noskin, MD
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