

February 22, 2021



COVID-19 Vaccine 2nd Dose Information

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Is It OK to Take a Pain Reliever Before or After Your COVID-19 Vaccination? *Expert advice on best ways to treat common vaccine side effects*

by Michelle Crouch, AARP, February 5, 2021

Don't take those medications before you get your shot, unless advised to do so by your doctor, because you could dampen the effectiveness of the vaccination, said Gregory Poland, M.D., an infectious disease expert at the Mayo Clinic in Rochester, Minnesota, and director of Mayo's vaccine research group.

If you take a pain reliever regularly for a chronic condition like arthritis, you may want to skip it the morning before you receive the vaccine, Poland said, but talk to your doctor first. If it's a medication you can't get through the day without, you're probably better off taking it, he said.

Side effects can be more severe after second dose.

Adults age 55 and older typically have fewer side effects than younger people, but you may still feel under the weather for a few days after your vaccine.

"It means your body is doing what you asked it to do," said Buddy Creech, M.D., an infectious disease specialist and director of the Vanderbilt Vaccine Research Program in Nashville, Tennessee.

Expect more side effects after the second dose. In addition to a sore arm, common symptoms include tiredness, headache, muscle pain, joint pain, chills and fever, according to the CDC.

How to treat vaccine side effects

Fever/chills/muscle pain

If you have a fever but it's not bothering you much, you don't have to do anything to treat it, the doctors said. If you're very uncomfortable, go ahead and take acetaminophen (Tylenol) or a nonsteroidal anti-inflammatory drug (NSAID) such as ibuprofen (Advil or Motrin). "I felt pretty bad the day after with chills and muscle aches, and I can't imagine not taking Tylenol or Motrin that day," Creech said. Also drink plenty of fluids and dress lightly, the CDC advises. Call a doctor if your fever lasts more than a few days or it's paired with other symptoms, such as a cough and sore throat.

Headache

Blumberg had just a mild headache after his second dose, but he said some of his colleagues who also got the vaccine have described pounding headaches that were more like migraines. "Bright lights bothered them. They just wanted to stay in a dark room," he said. Again, pain relievers should help, he said, and get plenty of rest.

Fatigue

If you're tired, don't feel bad about spending the day in bed, Creech said. "I'll tell you, the more we vaccinate, the more we realize fatigue is a real part of this," he said. A nap can help you feel better, he said, as can a brisk walk or other exercise. And if you're one of those people who don't like to sit still, you won't hurt yourself if you decide to push through the fatigue, he said. Fortunately, in most people, the tiredness lasts for only a day or two.

Pain, swelling or a delayed rash at the injection site

Almost everyone has some arm soreness after vaccination. Using or exercising your arm can help ease pain, the CDC says. The agency also recommends applying a cool, wet washcloth over the area. Blumberg said some patients are reporting a delayed rash or redness that appears five to 10 days following immunization. The area may be swollen, red or itchy, he said. In the Moderna clinical trial, 0.8 percent of participants reported delayed injection site reactions. Infectious disease doctors believe it's a mild allergic reaction, Blumberg said. Treat it with an over-the-counter antihistamine such as Benadryl or a topical steroid such as hydrocortisone.

A lump in your armpit

If you have a lump in your armpit or just above your collarbone, it's probably a swollen lymph node, Blumberg said. CDC data show that 12 to 16 percent of clinical trial participants reported swelling somewhere besides the injection site. The swelling may last a few weeks, he said. "It's a normal part of your immune system response, but sometimes it can be uncomfortable," Blumberg said. "There's nothing you need to do for it. Eventually, it will go away."

<https://www.aarp.org/health/drugs-supplements/info-2021/pain-relievers-covid-vaccine.html?intcmp=Outbrain&obref=obnetwork>

COVID-19 Vaccine Resources for Alameda County Residents 65+



COVID-19 Vaccine Resources and Consent Form

Bay Area Community Health is now offering COVID-19 vaccines to patients and community members 65 and older in coordination with county and state guidelines.

If you are younger than 65, please do not contact BACH or fill out these forms. You will be able to register for a vaccine on a future date. Look for more information soon.

[BACH COVID-19 Vaccine Consent Form](#)

NOTICE: The consent form must be filled out before scheduling an appointment and coming to the clinic.

You will not be seen if the form is not filled out beforehand.

SCHEDULE AN APPOINTMENT
online scheduling now available [HERE](#)
or call 510-770-8040

Slots fill up fast and new ones are added daily. If all slots are full, try checking again tomorrow.

<https://bach.health/vaccine>



Washington Hospital Healthcare System

Washington Hospital Healthcare System wants to provide patients and the community with the most up-to-date information about COVID-19 vaccination. To keep you informed, this page will be updated when new details about the vaccine and vaccination are available. For information about Alameda County's active vaccination phases and tiers, please go to <https://covid-19.acgov.org/vaccines>.

Authorized by the Alameda County Public Health Department, Washington Hospital Healthcare System is ONLY offering the vaccine to the following eligible individuals:

- Washington Township Health Care District residents who are 65 and older
- Washington Township Medical Foundation patients who are 65 and older
- Employees and physicians of the Washington Hospital Healthcare System and other eligible health care professionals, per Alameda County Public Health Department guidelines

Vaccination appointments are being made based on vaccine availability. Vaccination appointments are limited and contingent on the county allocating the vaccine. Appointments will be temporarily paused when we fill all available slots, and will be resumed once additional vaccine is confirmed by the county.

For more information about vaccination eligibility in CA and other vaccination resources, go to myturn.ca.gov. If it's not your turn yet to be vaccinated or appointments are not available, you can register at myturn.ca.gov to be notified when you are eligible or when appointments open up.

Washington Township Medical Foundation patients who meet the criteria to be vaccinated can schedule vaccination appointments through their personal MyChart account. Community members can inquire about eligibility and appointments by calling our COVID-19 vaccination phone line at 510-248-8200, but please note that we are experiencing extremely long wait times in our call center.

Updates will be available on this website and through MyChart as necessary. We are not accepting walk-ins.

Thank you for your patience.

<https://www.whhs.com/COVID-19-Coronavirus.aspx>

The above information has been copied directly from Washington Hospitals website. Please click the link above for the full article. Anyone in Alameda County 65+ can call for an appointment even if they are not a Washington Hospital member.

*Please note - If Washington Hospital does not have your personal information they will ask for it including your full social security number.

St. Patrick's Day Drive-Thru Lunch

Wednesday, March 17... *\$5/senior

Drive-Thru 12:00-12:15pm

At the Silliman Activity Center Front Parking Lot

Menu: Corned Beef Sandwich

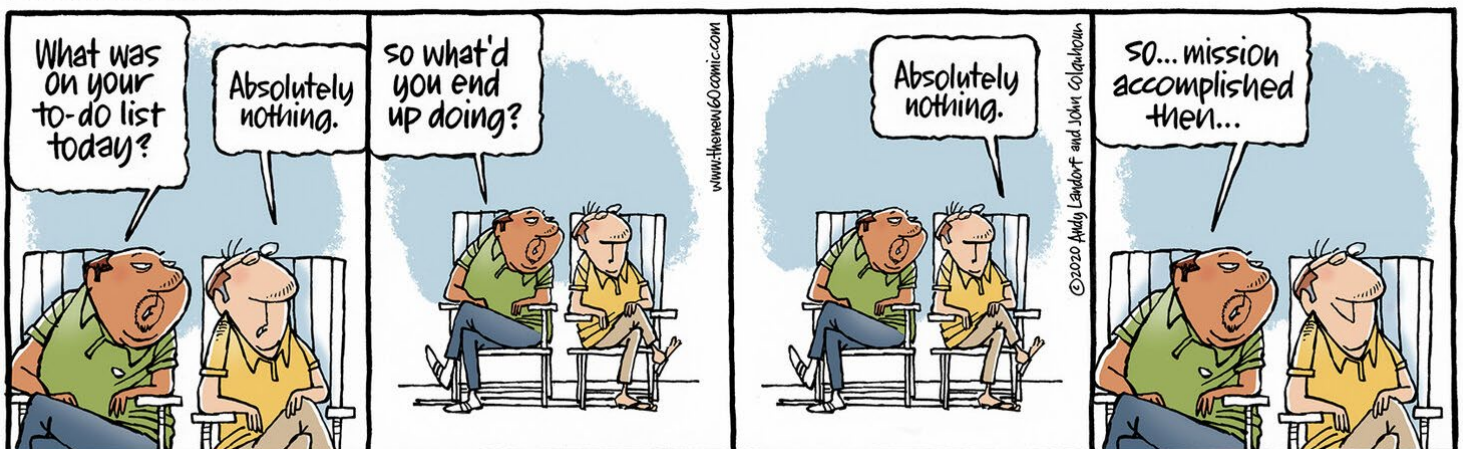
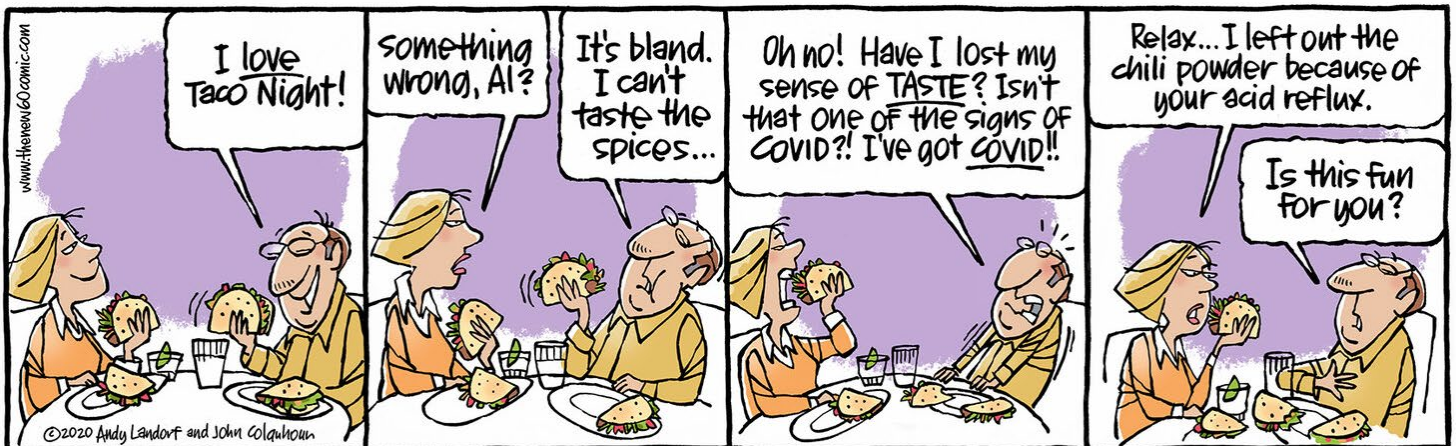
Space is limited.

*Pre-registration required
newarkca.activityreg.com
or use the mail-in
registration form on
the final page of our
Weekly Update.

Please wear a mask and remain in your vehicle.



The New 60



5 TIPS

to help you stay **motivated** to **exercise**



Being physically active is one of the most important things you can do each day to maintain and improve your health and keep doing things you enjoy as you age. Make exercise a priority with the following tips:

1 Find ways to fit exercise into your day.

You are more likely to get moving if exercise is a convenient part of your day.



2 Do activities you enjoy to make it more fun.

Be creative and try something new!



3 Make it social.

Find a virtual "exercise buddy" to help keep you going and provide emotional support.



4 If there's a break in your routine, get back on track.

Start slowly and gradually build back up to your previous level of activity. Ask your family and friends for support.



5 Keep track of your progress.

Make an exercise plan and don't forget to reward yourself when you reach your goals.



RIDE-ON TRI-CITY!

Funded by the Alameda County Transportation Commission through Measure B/BB sales tax revenues. For more information on Measure B/BB, visit: www.alamedactc.org

Ride-On Tri-City!

Services to Newark residents are provided through a partnership between the City of Newark and the City of Fremont's Human Services Department. Eligibility Requirements for RIDE-ON TRI-CITY! transportation services:

- Newark residents who are 70 years of age or older; OR,
- Newark residents who are unable to use public transportation independently due to a disability or disabling health condition.

RIDE-ON TRI-CITY! registrants can use the following:

Taxi Service:

Subsidized curb-to-curb taxi rides in the Tri-City area using a taxi voucher. Taxi vouchers cost \$4 each and subsidize up to \$20 of taxi meter fare.

Ride-Hailing Service (through Lyft):

Pilot program... Subsidized curb-to-curb rides on Lyft in Tri-City area. Participants pay for the first \$4 of their trip and up to \$16 of additional trip costs will be subsidized.

Wheelchair-Accessible Van Service:

Participants requiring special door-to-door assistance can get subsidized wheelchair-accessible van rides in Tri-City area. Participants pay \$4 per one-way trip, using a pre-paid voucher. Call (510) 574-2053 for more information.

Transportation Questions Answered...

A Transportation Resources Specialist from RIDE-ON TRI-CITY! can assess your individual needs and work with you over the phone or by email to answer any questions you have about transportation and how to get around the community.

- Learning how to ride public transit buses or BART
 - Obtaining and learning how to use a Clipper card
 - Finding and applying for affordable transportation alternatives if you no longer drive and cannot take public transit
 - Learning how to use ride-hailing services, like Lyft.
 - Renewing your driver's license, obtaining a DMV Disabled Parking placard or figuring out how to maintain driving safety as you age.
- For more information, call (510) 574-2053 or email rideontricity@fremont.gov

Senior Clipper Card

Seniors 65 years of age or older can obtain a Senior Clipper Card by visiting: www.clippercard.com/discounts MAIL your application form and a copy of your proof-of-age document to: Clipper Youth/Senior Applications, PO Box 318, Concord, CA 94522-0318. Do not send originals, as documents will not be returned. Or EMAIL scans or photos of your application form and your proof-of-age document to senioryouthapps@clippercard.com. Or FAX your application form and proof-of-age document to 877.565.3149.

Please allow 7 business days for delivery.

Visit www.nia.nih.gov/health/staying-motivated-exercise-tips-older-adults to learn more.



Crossword Puzzle

Answers on page 7.

Across

1. Robeson and Pinza
6. Exploit to the max
10. Showed up
14. Squash variety
15. "Mourning Becomes Electra" character
16. Munsters' bat
17. The lowdown
19. "___ Man" (1984)
20. Singer Sayer
21. It may clean itself
22. Show runners
24. Turndowns
25. "___ Swell" (Rodgers & Hart song)
26. Country estates
29. Tell's weapon
33. PLO members
34. Fuel source
35. Year Marcus Aurelius became emperor
36. Dumb one
37. Spaghetti accompaniment
38. Leo's home
39. In the center of
40. Tessellation unit
41. Typeface imitative of handwriting
42. Silver Spring locale
44. Peddled
45. Like the Gobi
46. Brick oven
47. Candy containing fruit
50. Broker's option
51. Vein contents
54. Dairy case spread
55. Rural resident?
58. It's a stretch
59. Coup d'___
60. Pulls down
61. Word with kit or around
62. Adams and Knotts
63. Kind of pen

1	2	3	4	5		6	7	8	9		10	11	12	13	
14						15					16				
17					18						19				
20				21					22	23					
			24					25							
26	27	28					29					30	31	32	
33						34					35				
36					37						38				
39					40					41					
42				43					44						
			45						46						
47	48	49					50						51	52	53
54					55	56					57				
58					59						60				
61					62						63				

Down

1. Something one shouldn't jump
2. Teen trauma
3. Nothing special
4. ___ Lanka
5. Like games in the dome
6. Fashions
7. Driver's selection
8. Backtalk
9. Desk type
10. Big-top performer
11. Ex-Met Tommie
12. Sulk
13. Love god
18. Times for celebrating
23. Cal. units
24. Paul Newman film
25. Hint
26. Sir's analogue
27. Bakery smell
28. Lowest point
29. "It ___ Happen to You"
30. Empty
31. Zinc ___
32. With a hidden microphone
34. Sir Michael
37. Made jump
41. Long-distance auto races (Var.)
43. Hula hoop?
44. Over the ___
46. English odist
47. Revolver name
48. Hodgepodge
49. In-basket item
50. Read a bar code
51. Creole veggie
52. Flat fee
53. "... or ___!"
56. Oklahoma tribe
57. Cereal grass

Sewing Word Search

Find and circle all of the Sewing words that are hidden in the grid.
The remaining letters spell an old saying.

A R E P P I Z T G R O M M E T S S
 S H E A R S A R E K A M S S E R D
 T T F I T I T A P E M E A S U R E
 I S S A L G G N I Y F I N G A M C
 T H P O B S I G C L O T H N P R S
 C R R I K R N T S E S L A C E I E
 H M E O N I I R R E P O I P N B A
 Y E O T D C O C A H I O A S C B M
 R H L N T S U M E W R P G E I O S
 E S E A S U R S T G G S N L L N T
 D M N I S I C H H N M S I D P B R
 I A C O P T I Y I I H P T E A O E
 O S E P T M I C R C O A L E T B S
 R L E R B T A C T A E N I N T B S
 B R W L H R U A S R T S U A E I V
 M E E A T T P B S T N O Q I R N N
 E Y E S G N I N R A D E R S N I P

AWL
 BOBBIN
 BUTTONS
 CLOTH
 DARNING
 DRESSMAKER
 ELASTIC
 EMBROIDERY
 EYES
 FABRIC
 GROMMETS

HEM
 HOOKS
 LACE
 MAGNIFYING GLASS
 MENDING
 NEEDLES
 PATCH
 PATTERN
 PENCIL
 PINCUSHION

PINS
 QUILTING
 RIBBON
 RIPS
 ROTARY CUTTER
 SCISSORS
 SEAM RIPPER
 SEAMSTRESS
 SHEARS
 SNAPS

SPOOL
 STITCH
 TAILOR
 TAPE MEASURE
 TEARS
 THIMBLE
 THREAD
 TRACING PAPER
 TRACING WHEEL
 ZIPPER

B	A	S	S	I		M	I	L	K		C	A	M	E
A	C	O	R	N		O	R	I	N		I	G	O	R
I	N	S	I	D	E	D	O	P	E		R	E	P	O
L	E	O		O	V	E	N		E	M	C	E	E	S
			N	O	E	S		T	H	O	U			
M	A	N	O	R	S		C	R	O	S	S	B	O	W
A	R	A	B	S		C	O	A	L		C	L	X	I
D	O	D	O		S	A	U	C	E		L	A	I	R
A	M	I	D		T	I	L	E		R	O	N	D	E
M	A	R	Y	L	A	N	D		H	A	W	K	E	D
			S	E	R	E		K	I	L	N			
C	O	M	F	I	T		S	E	L	L		O	R	E
O	L	E	O		L	O	C	A	L	Y	O	K	E	L
L	I	M	O		E	T	A	T		E	A	R	N	S
T	O	O	L		D	O	N	S		S	T	A	T	E



Exercise



FREE MORNING EXERCISE/
STRETCH W/ JESSICA,
MONS. & WEDS. @ 10AM
Click [HERE](#) to register!



10 MINUTE CARDIO/
STRENGTH WORKOUT
<https://youtu.be/JN3a1QpzU-8>



ONLINE... at newarkca.activityreg.com or scan the QR Code

MAIL... registration form and payment to "City of Newark":
Silliman Activity & Family Aquatic Center
6800 Mowry Avenue
Newark, CA 94560



PHONE IN REGISTRATIONS ARE NOT ACCEPTED.

Newark Recreation and Community Services Registration Form

Adult/Main Contact Name: _____ Birth Date: ____ / ____ / ____

Day Phone: _____ Cell Phone: _____

Email Address: _____

Address: _____ City: _____ Zip: _____

Emergency Contact Name: _____ Phone: _____

Participant: Name	Birth Date	Gender	Class Name, Date and Time	Fee
_____	____ / ____ / ____	M F	_____	\$ _____
_____	____ / ____ / ____	M F	_____	\$ _____
_____	____ / ____ / ____	M F	_____	\$ _____
_____	____ / ____ / ____	M F	_____	\$ _____

Voluntary donation to the Recreation Scholarship Program: \$ _____

Total: \$ _____

Release of Liability: I understand that my (or my minor child's/ward's) participation in any City activity is voluntary. Further, I understand that participation can be a hazardous activity. By signature below, I agree that neither I, my successors, assigns, nor anyone acting on my behalf will hold the City of Newark, its officers, agents, employees, or volunteers liable for any injury, accident, or illness arising out of my (my minor child's/ward's) voluntary participation in the above named program/activity. I hereby release the City of Newark, its officers, agents, employees, or volunteers from and against any and all claims, cost liabilities, expenses, or judgments, including attorney's fees and court costs arising from my (my minor child's/ward's) participation in the program/activity or any illness/injury resulting therefrom, and hereby agree to indemnify and hold harmless the City of Newark, its officers, agents, employees, or volunteers from and against any and all such claims, whether caused by negligence or otherwise.

I further understand that the City of Newark is not and will not be responsible for Workers Compensation benefits as a result of any injury or illness due to my (my minor child's/ward's) voluntary participation in this activity.

The City of Newark reserves the right to photograph facilities, activities, and program participants for potential use in advertising brochures, department social media, and the City's web page. All photos will remain the property of the City of Newark.

Signature of Participant (or Parent/Guardian, if under 18)

Payment: _____ Check or Money Order made payable to the "City of Newark"

_____ Charge VISA/Mastercard... Card #: _____ - _____ - _____ Expiration: ____ / ____
month/year