

Saskatchewan Immunization Manual Amendments 2021-11-22

Instructions: Please remove and discard the corresponding pages in each chapter section as applicable and insert the amended pages as noted below in each corresponding chapter section.

Chapter 10 Biological Products

- TOC
 - Pfizer BioNTech Comirnaty 5-11 years added to TOC

- AstraZeneca COVISHIELD COVID-19 vaccine
 - **New** information under dose and scheduling row:
Primary series for non-immune compromised individuals
 - 2 doses of 0.5 ml
 - Dose 1: day 0
 - Dose 2: **8 weeks** is the recommended interval between the first and second doses (minimum interval of 28 days).
 - NOTE: mRNA vaccine **is preferred** as the second dose for those who received AZ or COVISHIELD as their first dose (unless contraindicated), resulting in increased immunogenicity.
 - It is recommend that people who received two doses of AZ and/or COVISHIELD as a primary series receive an mRNA booster vaccine at 6 months after completion of their primary series. A viral vector vaccine could be given to those for whom there is a contraindication to an mRNA vaccine.

 - Primary series for moderately to severe immune compromised individuals**
 - 3 doses of 0.5 ml
 - Dose 1: day 0
 - Dose 2: min. 28 days later
 - Dose 3: min. 28 days later
 - For those who are moderately to severely immunocompromised in the authorized age group who have not yet been immunized, a primary series of three doses of an authorized mRNA vaccine should be offered. For those who are moderately to severely immunocompromised in the authorized age group who have previously received a 1- or 2-dose COVID-19 vaccine series (with a homologous or heterologous schedule using mRNA or viral vector vaccines), an additional dose of an authorized mRNA COVID-19 vaccine should be offered (NACI, 2021).
 - Addition to Anaphylaxis under contraindication row: NOTE: In individuals with a confirmed severe, immediate (≤ 4 h following exposure) allergy (e.g., anaphylaxis) to a component of a specific COVID-19 vaccine, a consultation with an allergist is recommended before receiving the specific COVID-19 vaccine.

- Janssen (Johnson & Johnson) COVID-19 vaccine
 - **New** addition under schedule:
 - 1-dose primary series;
 - It is recommended that an mRNA booster vaccine be given at least 2 months after the primary dose of Janssen was received, if only a single dose has been received.
 - Addition to Anaphylaxis under contraindication row: NOTE: In individuals with a confirmed severe, immediate (≤ 4 h following exposure) allergy (e.g., anaphylaxis) to a component of a specific COVID-19 vaccine, a consultation with an allergist is recommended before receiving the specific COVID-19 vaccine.

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- Moderna COVID-19 vaccine
 - **New** information under dose and scheduling row:
Primary series for non-immune compromised individuals
 - 2 doses of 0.5 ml
 - Dose 1: day 0
 - Dose 2: **8 weeks** is the recommended interval between the first and second doses (minimum interval of 28 days).
 - NOTE: mRNA vaccine **is preferred** as the second dose for those who received AZ or COVISHIELD as their first dose (unless contraindicated), resulting in increased immunogenicity.
 - It is recommend that people who received two doses of AZ and/or COVISHIELD as a primary series receive an mRNA booster vaccine at 6 months after completion of their primary series. A viral vector vaccine could be given to those for whom there is a contraindication to an mRNA vaccine.

 - Primary series for moderately to severe immune compromised individuals**
 - 3 doses of 0.5 ml
 - Dose 1: day 0
 - Dose 2: min. 28 days later
 - Dose 3: min. 28 days later
 - For those who are moderately to severely immunocompromised in the authorized age group who have not yet been immunized, a primary series of three doses of an authorized mRNA vaccine should be offered. For those who are moderately to severely immunocompromised in the authorized age group who have previously received a 1- or 2-dose COVID-19 vaccine series (with a homologous or heterologous schedule using mRNA or viral vector vaccines), an additional dose of an authorized mRNA COVID-19 vaccine should be offered (NACI, 2021).
 - Addition to Anaphylaxis under contraindication row: NOTE: In individuals with a history of a severe, immediate (≤ 4 h following vaccination) allergic reaction (e.g., anaphylaxis) after previous administration of an mRNA COVID-19 vaccine, re-vaccination (i.e. administration of a subsequent dose in the series when indicated) may be offered with the same vaccine or the same mRNA platform if a risk assessment deems that the benefits outweigh the potential risks for the individual and if informed consent is provided.

- Pfizer **+12 years** COVID-19 vaccine (**Purple cap**)
 - **Statement removed:** Children born in 2009 are eligible for immunization with this vaccine until a pediatric (5-11 years) formulation is licensed.
 - **New** information under dose and scheduling row:
Primary series for non-immune compromised individuals
 - 2 doses of 0.3 ml
 - Dose 1: day 0
 - Dose 2: **8 weeks** is the recommended interval between the first and second doses (minimum interval of 28 days).
 - NOTE: mRNA vaccine **is preferred** as the second dose for those who received AZ or COVISHIELD as their first dose (unless contraindicated), resulting in increased immunogenicity.
 - It is recommend that people who received two doses of AZ and/or COVISHIELD as a primary series receive an mRNA booster vaccine at 6 months after completion of their primary series. A viral vector vaccine could be given to those for whom there is a contraindication to an mRNA vaccine.

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Primary series for moderately to severe immune compromised individuals

- 3 doses of 0.3 ml
 - Dose 1: day 0
 - Dose 2: min. 28 days later
 - Dose 3: min. 28 days later
 - For those who are moderately to severely immunocompromised in the authorized age group who have not yet been immunized, a primary series of three doses of an authorized mRNA vaccine should be offered. For those who are moderately to severely immunocompromised in the authorized age group who have previously received a 1- or 2-dose COVID-19 vaccine series (with a homologous or heterologous schedule using mRNA or viral vector vaccines), an additional dose of an authorized mRNA COVID-19 vaccine should be offered (NACI, 2021).
- Addition to Anaphylaxis under contraindication row: NOTE: In individuals with a history of a severe, immediate (≤ 4 h following vaccination) allergic reaction (e.g., anaphylaxis) after previous administration of an mRNA COVID-19 vaccine, re-vaccination (i.e. administration of a subsequent dose in the series when indicated) may be offered with the same vaccine or the same mRNA platform if a risk assessment deems that the benefits outweigh the potential risks for the individual and if informed consent is provided.
- Under possible reaction row, common side effect updated as per the most current product monograph.
- **NEW** recommendation:
 - **Second Dose for 12 Year Olds if First Dose was Pediatric Formulation**
 - Give vaccine appropriate for age at time of second dose, regardless of initial dose received: e.g., for children who received the **pediatric** vaccine as a first dose when they were 11, complete second dose with the **12+ years** formulation.
- **NEW!** Pfizer **5-11 years** COVID-19 vaccine (**Orange cap and Labe border**)
 - Please review content.
 - This vaccine **cannot** be stored between -25 to -15C.
 - **PLEASE review storage and handling information as different that +12 years formulation.**
 - DOSE: 0.2 ml. NOTE: an 11 year old who previously received the +12 years formulation 0.3ml dose and is still 11 at time of second dose should receive the pediatric 0.2 ml dose to complete their series.
 - **NEW** Precaution for Comirnaty:
 - Multi-inflammatory syndrome in children (MIS-C)
 - For children with a previous history of MIS-C, vaccination with COVID-19 vaccine should be postponed until clinical recovery has been achieved or until it has been at least 90 days since diagnosis, whichever is longer.
- Provision of COVID-19 Vaccine Booster Doses
 - Pfizer-Pfizer-Moderna and Modern-Moderna-Pfizer added to table.