

Saskatchewan Immunization Manual Amendments **May 2021**

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 7 immunization of Special Populations

- P. 7 Asplenia
 - Pneu-C-13 - 1 dose for Pneu-C-13 vaccine naïve individuals 5 years **and older**.
 - MenB - Complete an age-appropriate primary series for **all ages**.
- P. 10 Malignancies/Cancer
 - Pneu-C-13 - 1 dose for Pneu-C-13 vaccine naïve individuals 5 years **and older**.
- P. 13 Sickle Cell Disease
 - Pneu-C-13 - 1 dose for Pneu-C-13 vaccine naïve individuals 5 years **and older**.
 - MenB - Complete an age-appropriate primary series for **all ages**.
- P. 14 Immunocompromised Conditions
 - Pneu-C-13 - 1 dose for Pneu-C-13 vaccine naïve individuals 5 years **and older**.
 - MenB - Complete an age-appropriate primary series for **all ages**.
- P. 20 Medical treatment
 - Pneu-C-13 - 1 dose for Pneu-C-13 vaccine naïve individuals 5 years **and older**.
- Pp. 33-34, p. 36 Appendix 7.1
 - Pneu-C-13 and MenB eligibility indications updated for adult immunization expansion.

Chapter 10 Biological Products

- AstraZeneca/COVISHIELD, Moderna and Pfizer COVID-19 **vaccine pages updated**.
 - **Please ensure staff review updates as various content updates.**
- Pneu-P-13 indicated for **high risk adults** as per chapter 7 above.

Chapter 11 AEFIs

- TOC updated with new **Appendices 11.6 and 11.7**.
- **P. 15 Appendix 11.6 added: Uploading COVID-19 vaccine AEFI reports into a client's Panorama Record.**
- **P. 16 Appendix 11.6 added: SK AEFI User Guide.**

Saskatchewan Immunization Manual Amendments **June 2021**

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 7 immunization of Special Populations

- P. 42 Appendix 7.4 Post HSCT transplant immunization schedule
 - **MenB added to table.**

Chapter 10 Biological Products

- Bexsero (Page 1 of 2): **solid organ or islet cell transplant candidates or recipients and hematopoietic stem cell transplant (HSCT) recipients added to eligibility list.**
- AZ/COVISHIELD pages – **Under contraindication, new VITT content. Revised content under Pregnancy, Breastfeeding and Immunocompromised and Auto-Immune Conditions sections to align with Precautions document.**
- Moderna and Pfizer pages - **Revised content under Pregnancy, Breastfeeding and Immunocompromised and Auto-Immune Conditions sections to align with Precautions document.**

Saskatchewan Immunization Manual Amendments August 2021

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 5 – Immunization Schedules

- P. 1 – Section 1.1 Routine Imms Schedule for Infants, Children and Adolescents
 - Varicella removed table as were former related footnotes #5, 6 and 8.
 - Other footnotes renumbered accordingly.
- P. 3 – Section 1.3A Pneu-C-13 schedule for Healthy Delayed Children
 - Under 24-59 months, the second column has been revised in row 11 to *0 valid doses or incomplete vaccination schedule with any product* and row 12 *Completed age-appropriate vaccination with Pneu-C-u, Pneu-C-7, Pneu-C-10 or Pneu-C-13*. Third column row 12 now states *Considered up to date*.
- P. 4 – Section 1.3B Pneu-C-13 schedule for Medically HR Delayed Children
 - Footnote 3 removed as not relevant.
- P. 6 – Section 1.5 Children 7-17 years who present for immunization
 - Varicella removed from Grade 6 row.
 - Footnote 5A removed as no longer relevant. Footnote 5B now footnote 5.
- P. 7 – Section 1.6 Adults who Present for Immunization
 - Men-C-C removed from table and former footnote 6 removed.
 - Other footnotes renumbered accordingly.
- P. 9 – Section 1.8 Publicly Funded Vaccine Eligibility Criteria
 - Men-C-C bullets deleted, now only one bullet which states *Infants receive 1 dose at 1 year of age*.
 - Minimum age for Men-C-ACYW-135 vaccine changed to 6 weeks from 8 weeks of age.
- P. 11 – Section 2.1 Minimum Intervals for Specific Vaccine Series
 - Trade names removed from Men-C-ACYW-135 vaccine row.
 - Minimum age of 6 months added to IPV.
- P. 30 – Appendix 5.4 PF Varicella Eligibility
 - Reference to Grade 6 program removed from table.

Chapter 6 – Precautions and Contraindications

- P. 1 – Section 1.3 Client Assessment
 - Second last bullet now states, *History of idiopathic thrombocytopenia within 6 weeks of a previous MMR/MMRV dose*.

Chapter 7 immunization of Special Populations

- P. 5 – Section 2.1 Bleeding Disorders
 - Third bullet now states, *Always consult with the child's physician/specialist prior to MMR/MMRV immunization if they have had an episode of idiopathic thrombocytopenia that occurred within 6 weeks of a previous MMR/MMRV vaccine*.
- P. 17 – Section 3.4 Islet Cell transplant
 - Refer to SIM chapter 10 for specific vaccine eligibility added to bullet 2
- P. 17 – Section 3.5 Solid Organ/Tissue Transplants
 - Refer to SIM chapter 10 for specific vaccine eligibility added to bullet 2.
- P. 35 – Appendix 7.1 Page 35
 - HA program – Targeted Community definition revised to match SIM chapter 10 definition.
- P. 39 Appendix 7.4 High Dose HB renal algorithm
 - Added to ENGERIX-B box – New Footnote – check for same lot #s and expiry dates.
- P. 41 – Appendix 7.6 Adult Stem Cell Transplant Immunization Recommendations
 - Varicella vaccine is no longer contraindicated
 - Herpes zoster (SHINGRIX®) vaccine added to table, it is not publicly funded.

Saskatchewan Immunization Manual Amendments **August 2021**

Chapter 8 Administration of Biological Products

- P. 15 – Section 2.4.3 Ventrogluteal
 - Introduction revised:
 - Do not use this site for vaccine administration. Active immunizing agents should not be administered into the gluteal muscle.
 - The ventrogluteal site is the preferred site for the IM injection of large volumes of immune globulin preparations (i.e., Ig, HBIg, Rablg, Tlg, Varlg). Appropriate site selection of the gluteal muscle is necessary to avoid injury to the sciatic nerve.
 - This site can be used in those over 7 months of age.
 - This muscle is accessible in the supine, prone, and side lying position.
- P. 16 – Section 2.4.4 Dorsogluteal
 - Introduction revised:
 - Do not use this site for vaccine administration. Active immunizing agents should not be administered into the gluteal muscle.
 - The dorsogluteal site is only to be used for the IM injection of large volumes of immune globulin preparations when the ventrogluteal and vastus lateralis sites have had maximum volumes of an immune globulin preparation injected and an additional volume still needs to be administered. This is due to the possibility of sciatic nerve injuries when the injection is done in the dorsogluteal site.
 - This site should only be used in individuals over 5 years of age.

Chapter 10 Biological Products

- TOR first page
 - Third and Fourth COVID-19 Dose Recommendations for Travellers added.
 - Proper abbreviations added to Shingrix (RZV) and Zostavax (LZV) vaccines
- TOR second page
 - HPV-4 removed
 - Influenza vaccines updated for 2021-22 season.
- AstraZeneca COVISHIELD COVID-19 vaccine
 - Refer to Third and Fourth COVID-19 Dose Recommendations for Travellers in this chapter added to Schedule section.
 - GBS added to possible reactions row.
 - NACI statement date and link updated.
- Moderna COVID-19 vaccine
 - Refer to Third and Fourth COVID-19 Dose Recommendations for Travellers in this chapter added to Schedule section.
 - NACI statement date and link updated.
- Pfizer COVID-19 vaccine
 - Children born in 2009 are eligible for immunization before 12 years of age.
 - Refer to Third and Fourth COVID-19 Dose Recommendations for Travellers in this chapter added to Schedule section.
 - NACI statement date and link updated.
- **NEW Page!** Refer to Third and Fourth COVID-19 Dose Recommendations for Travellers for guidance to complete series for Saskatchewan resident and Lloydminster residents who received Saskatchewan Immunization Services.
- Act-Hib and HIBERIX
 - Footnote #2 now reads: The 18 month reinforcement dose may be given at 12 months if there is an 8 week interval following the previous dose.
- SHINGRIX
 - Abbreviation changed to RZV.

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- Zostavax II
 - Abbreviation changed to LZV.
- Gardasil (HPV-4) removed.
- Non-Publicly Funded Influenza Vaccines for 2021-22 season – updated for licensed vaccines.
- FluLaval Tetra, FluZone Quadrivalent and FluZone High Dose Quadrivalent – updated for 2021-22 season.
 - Note that Flu HD is quadrivalent and a 0.7 ml dose.
- MMR II, PRIORIX, PRIORIX Tetra and ProQuad
 - Thrombocytopenia statement under precautions now reads: Physician-diagnosed thrombocytopenia within 6 weeks after first dose of a MMR-containing vaccine.
- Menjugate Liquid and NeisVac –C
 - Indication for those born 1993-01-01 to 2000-09-30 removed as ineligible after age 21 years.
- PREVNAR p. 1 of 2
 - Wording for section of healthy and medically high-risk children 24-59 months first rows of second column now align with revised chapter 5 Pneu-C-13 scheduling pages and state: 0 valid dose or incomplete vaccination schedule with any product.
- Varilrix and Varivax (first pages)
 - Reference to Grade 6 program removed.
- Updated product monographs:
AstraZeneca/COVISHIELD INFANRIX hexa® HAVRIX ENGERIX-B SHNIGRIX MMR II
FluLaval Tetra FluZone Quadrivalent FluZone High Dose Quadrivalent NIMENRIX BEXSERO
Trumenba SYNFLORIX IMOVAX Rabies Rotarix Adacel Boostrix Boostrix-Polio Typhim-V

Chapter 14 – Appendices

- P. 21 – Appendix 14.3 Immunization Fact Sheets
 - Several updates: HA, HB, MMR, Men-C-C, Men-C-ACYW-135, Men B, Pneu-C-13, Rot-1, Tdap and Var because of updated product monographs or program changes (Var for Grade 6 student).

Saskatchewan Immunization Manual Amendments 2021-09-01

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

- AstraZeneca COVISHIELD COVID-19 vaccine
 - Vaccine additional/booster dose eligibility populations added:
As of September 7, 2021 the following people are eligible for an additional 'booster dose'
 - Transplant recipients (including solid organ, islet cell, tissue and hematopoietic stem cell transplants).
 - Recipients of stable, active treatment (chemotherapy, targeted therapies, immunotherapy) for malignant hematologic disorders
 - Recipients of an anti-CD20 agent (e.g. rituximab, ocrelizumab, ofatumumab).
 - Long-term care home and personal care home residents
- Moderna COVID-19 vaccine
 - Vaccine additional/booster dose eligibility populations added:
As of September 7, 2021 the following people are eligible for an additional 'booster dose'
 - Transplant recipients (including solid organ, islet cell, tissue and hematopoietic stem cell transplants).
 - Recipients of stable, active treatment (chemotherapy, targeted therapies, immunotherapy) for malignant hematologic disorders
 - Recipients of an anti-CD20 agent (e.g. rituximab, ocrelizumab, ofatumumab).
 - Long-term care home and personal care home residents
 - NACI statement date and link updated.
 - National Advisory Committee on Immunization. (August 27, 2021). *Recommendation on the use of mRNA COVID-19 vaccines in adolescents 12 to 17 years of age*. https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines/mrna-adolescents.html?hq_e=el&hq_m=2189551&hq_l=1&hq_v=91d220e044#a6
- Pfizer COVID-19 vaccine
 - Vaccine additional/booster dose eligibility populations added:
As of September 7, 2021 the following people are eligible for an additional 'booster dose'
 - Transplant recipients (including solid organ, islet cell, tissue and hematopoietic stem cell transplants).
 - Recipients of stable, active treatment (chemotherapy, targeted therapies, immunotherapy) for malignant hematologic disorders
 - Recipients of an anti-CD20 agent (e.g. rituximab, ocrelizumab, ofatumumab).
 - Long-term care home and personal care home residents
 - NACI statement date and link updated.
 - National Advisory Committee on Immunization. (August 27, 2021). *Recommendation on the use of mRNA COVID-19 vaccines in adolescents 12 to 17 years of age*. https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines/mrna-adolescents.html?hq_e=el&hq_m=2189551&hq_l=1&hq_v=91d220e044#a6

Saskatchewan Immunization Manual Amendments 2021-09-07

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

- **New** to TOC: Provision of COVID-19 Vaccine Booster Doses to Select Populations
- AstraZeneca COVISHIELD COVID-19 vaccine
 - **New** under SCHEDULE row - *Refer to Provision of COVID-19 Vaccine Booster Doses to Select Populations* in this chapter for vaccine information.
 - **New** under Administration with Other Products - All Health Canada approved COVID-19 vaccines can be given concomitantly with other vaccines; no intervals are required before or after COVID-19 vaccine administration.
- Moderna COVID-19 vaccine
 - **New** under SCHEDULE row - *Refer to Provision of COVID-19 Vaccine Booster Doses to Select Populations* in this chapter for vaccine information.
 - **New** under Administration with Other Products - All Health Canada approved COVID-19 vaccines can be given concomitantly with other vaccines; no intervals are required before or after COVID-19 vaccine administration.
 - Updated product monograph date.
- Pfizer COVID-19 vaccine
 - **New** under SCHEDULE row - *Refer to Provision of COVID-19 Vaccine Booster Doses to Select Populations* in this chapter for vaccine information.
 - **New** under Administration with Other Products - All Health Canada approved COVID-19 vaccines can be given concomitantly with other vaccines; no intervals are required before or after COVID-19 vaccine administration.
 - Updated product monograph date.
- **New** section! Provision of COVID-19 Vaccine Booster Doses to Select Populations.

Saskatchewan Immunization Manual Amendments October 2021

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Chapter 5 Immunization Schedules

- [P. 11](#) Section 2.1 Min. Intervals for Specific Vaccine Series
 - IPV minimum age corrected to 6 weeks, from 6 months.
 - Bexsero scheduling revised as per most recent product monograph recommendation for series and ages (6 weeks to 11 months; 12-23 months; 2 years and older).

Chapter 9 – Management of Biological Products

- [TOC](#) page 2
 - Section 5.6 title revised to Vaccine Supply Problem report form.
 - Page numbers 35-38 amended to accommodate section 5.6.
- [P. 27](#) section 5.2 Cold chain Break Report Form
 - Revised form added to chapter.
- [P. 29](#) Section 5.2A How to Complete the Cold Chain Break Report Form
 - Updated instructions: reported email address must be included.
- [P. 30](#) Section 5.3 Product Wastage Form
 - Revised form added to chapter.
- [P. 35](#) Section 5.6 Vaccine Supply Problem Report
 - Revised form added to chapter.

Chapter 10 Biological Products

- [TOC](#): Title change: Provision of COVID-19 Vaccine Booster Doses
- [FluLaval Tetra](#)
 - Updated product monograph link added.
- [AstraZeneca](#) COVISHIELD COVID-19 vaccine
 - **New** bullet under Schedule row: Refer to Provision of COVID-19 Vaccine Booster Doses added.
 - Revised Health Canada statement added to reference list.
- [Moderna](#) COVID-19 vaccine
 - **New** bullet under Schedule row: Refer to Provision of COVID-19 Vaccine Booster Doses added.
 - Revised Health Canada statement added to reference list.
 - Updated product monograph date.
- [Pfizer](#) COVID-19 vaccine
 - **New** bullet under Schedule row: Refer to Provision of COVID-19 Vaccine Booster Doses added.
 - Revised Health Canada statement added to reference list
 - Updated product monograph date.
- [Provision of COVID-19 Vaccine Booster Doses](#)
 - Revised title
- [Bexsero](#)
 - Under row DOSE/SERIES AND REINFORCE-MENT RECOMMENDATIONS BASED ON AGE AT PRESENTATION for those with medical risk factors, second section: age 6 months revised to 6 weeks to match product monograph recommendations.
- Varicella ([Varilrix](#) and [Varivax](#))
 - Dose section expanded to be dose/series of two doses of 0.5 mL SC given a minimum of 28 days apart has been added.
- [Priorix-Tetra](#)
 - Latex removed from contraindication as vaccine is latex-free.

Saskatchewan Immunization Manual Amendments 2021-11-17

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
 - Janssen added to first page
 - Herpes zoster now top of second page

- AstraZeneca COVISHIELD COVID-19 vaccine
 - 8 weeks is recommended interval for scheduling primary series.
 - 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 recommended 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.
 - New Precaution – Immune thrombocytopenia

- **NEW!** Janssen (Johnson & Johnson) COVID-19 vaccine
 - Please review content.
 - 5 dose vial. Single dose series.
 - Specific storage and handling recommendations must be reviewed. Expiry date to be updated when in thawed refrigerated state.

- Moderna COVID-19 vaccine
 - 8 weeks is recommended interval for scheduling primary series.
 - Update Product monograph
 - **NEW! VIAL STOPPERS MAY ONLY BE ENTERED/POKED 20 TIMES (EVEN IF A 14-DOSE VIAL)!**
 - NEW! Reporting Wastage
 - For Moderna Spikevax[®] vaccine: reflect the wastage quantity based on total full doses expected in the vial. However when the wastage quantity includes a half dose, reflect the half dose wasted. For example, if 2.5 doses were utilized from a 10 dose vial, report wastage quantity as 7.5 doses.
 - **NEW! Revised booster dose recommendations:**
 - **Booster doses: the dosage depends on the risk factor:**
 - 0.5 ml for those 70 years and older.
 - 0.5 ml for Long Term Care (Special Care Homes), Personal Care Homes and Seniors' Assisted Living residents, regardless of age.
 - 0.25 ml for all others prioritized for booster doses.

- Pfizer **+12 years** COVID-19 vaccine
 - **New statement:** Children born in 2009 are eligible for immunization with this vaccine until a pediatric (5-11 years) formulation is licensed.
 - 8 weeks is recommended interval for scheduling primary series.
 - Updated product monograph.

Saskatchewan Immunization Manual Amendments 2021-11-22

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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.

Saskatchewan Immunization Manual Amendments 2021-11-22

- 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 0.5 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.

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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.
- 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.

Saskatchewan Immunization Manual Amendments **December 2021**

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Chapter 4- Documentation

- TOC
 - Section 1.3 COVID-19 Quick Entry added.
- P. 1 Section 1.1 Role and Importance of Documented Immunization Records
 - New fourth bullet added from section 1.2
 - Client immunization records may:
 - Be shared with health care professionals in order to provide public health services;
 - Assist with diagnosis and treatment; and,
 - Assist to control the spread of vaccine preventable diseases.
- **New!** P. 2 Section 1.3 COVID-19 Quick Entry (CQE)
 1. CQE is a secure electronic system used in Saskatchewan to record and manage COVID-19 and influenza immunization records and the health information related to immunization for all Saskatchewan residents. The information will be used to manage client immunization records;
 2. Only authorized users will have access to CQE as designated by eHealth, the Ministry of Health and regional/jurisdictional health authorities.
- P. 3 Section 2.2 Agency-Held Immunization Records
 - Refer to Appendix 4.2 added to third last bullet.
- P. 4 Section 2.3 Client-Held Immunization Records
 - **New** bullet #2: Clients should be directed to obtain a MySaskHealthRecord account for their immunization record.
- Appendix 4.2 now has December 2021 on pages, which will make it easier to indicate when future updates have occurred. **These are not included in the All Pages document.**

Chapter 7 Immunization of Special Populations

- P. 5 Section 2.1 Bleeding Disorders
 - Seventh bullet, second sentence now states: Apply direct pressure (without rubbing) to the injection site for 2 minutes or longer following immunization (CIG).

Chapter 8 Administration of Biological Products

- P. 8 – Section 2.1.2 Persons with Bleeding Disorders
 - Pressure at injection site for 2 minutes or longer now recommended in CIG (Nov. 24/21).
- P. 10 **Table 1** Vaccine IM injection site, needle length and total daily volume per age group
 - Ventrogluteal removed as injection site under children and adults rows.
 - Table 2: Daily added before volume

Chapter 10 Biological Products

- Gardasil 9 - Updated Product monograph
- RabAvert – updated product monograph link.
- Shingrix – updated product monograph
- Janssen and AstraZeneca COVID-19 vaccines – Update product monographs.
- Pfizer **+12 years** vaccine - Schedule
 - Dose 2 sentence now states: 8 weeks is the recommended national interval between the first and second doses (minimum interval of 28 days recommended in SK, but 21 days is acceptable).
- Pfizer **5-11 years** vaccine Preparation/Reconstitution
 - Under second bullet, the second sub-bullet changed to **12 hours** from 3 hours.

Saskatchewan Immunization Manual Amendments **December 2021**

Chapter 11 AEFIs

- P. 7 – Section 3.2 AEFI Reporting Guidelines
 - Last paragraph - reference to *The Public Health Act* removed, and now refers only to *The Disease Control Regulations* added.
- Pp 8-9 Section 3.3 Complete an AEFI report
 - All sections detailed to reflect the most current national AEFI reporting form.
- P. 15 **New** Policy to replace previous COVID-19 AEFI policy
 - **Uploading AEFI Reports into a Client's Panorama Record**
- PP. 16-32 Appendix 11.7: Saskatchewan User Guide for Completion and Submission of Adverse Events Following Immunization (AEFI) Report
 - This whole section has been revised to reflect the revised 2021 national AEFI form reporting sections, please ensure staff review it.