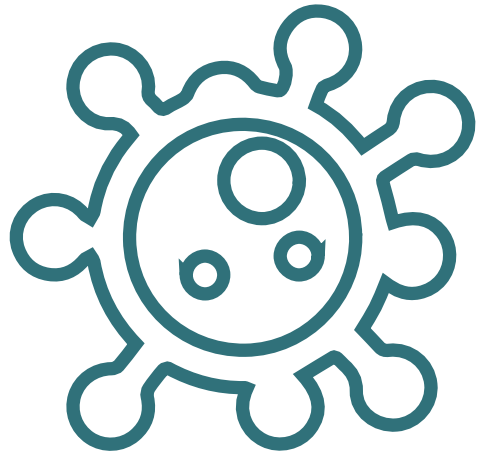
Primary Care Alberta

Communicable Disease Control – Public Health, CDC & Screening

COVID-19 LP.8.1 Immunization Program Fall 2025



September 2025

Objectives

- To provide a clinical information update related to the fall 2025 COVID-19 LP.8.1 Immunization Program.

*Always use the online resources for the most up to date information.

Key Program Resources

For more detailed information refer to additional program resources:

- COVID-19 Health Professional Immunization webpage
  - Insite for AHS employees or External site for non-AHS employees
- Immunization Program Standards Manual (IPSM) Vaccine Biological pages are located at
  - Insite for AHS employees or External site for non-AHS employees
- COVID-19 Vaccine Product Monograph
- Vaccine Storage and Handling Standard and e-learning module
- Primary and Preventative Health Services Adverse Events Following Immunization (AEFI) Policy
- Site specific reporting requirements and data collection guidelines
- Alberta Immunization Policy: Alberta Outreach Immunization Program

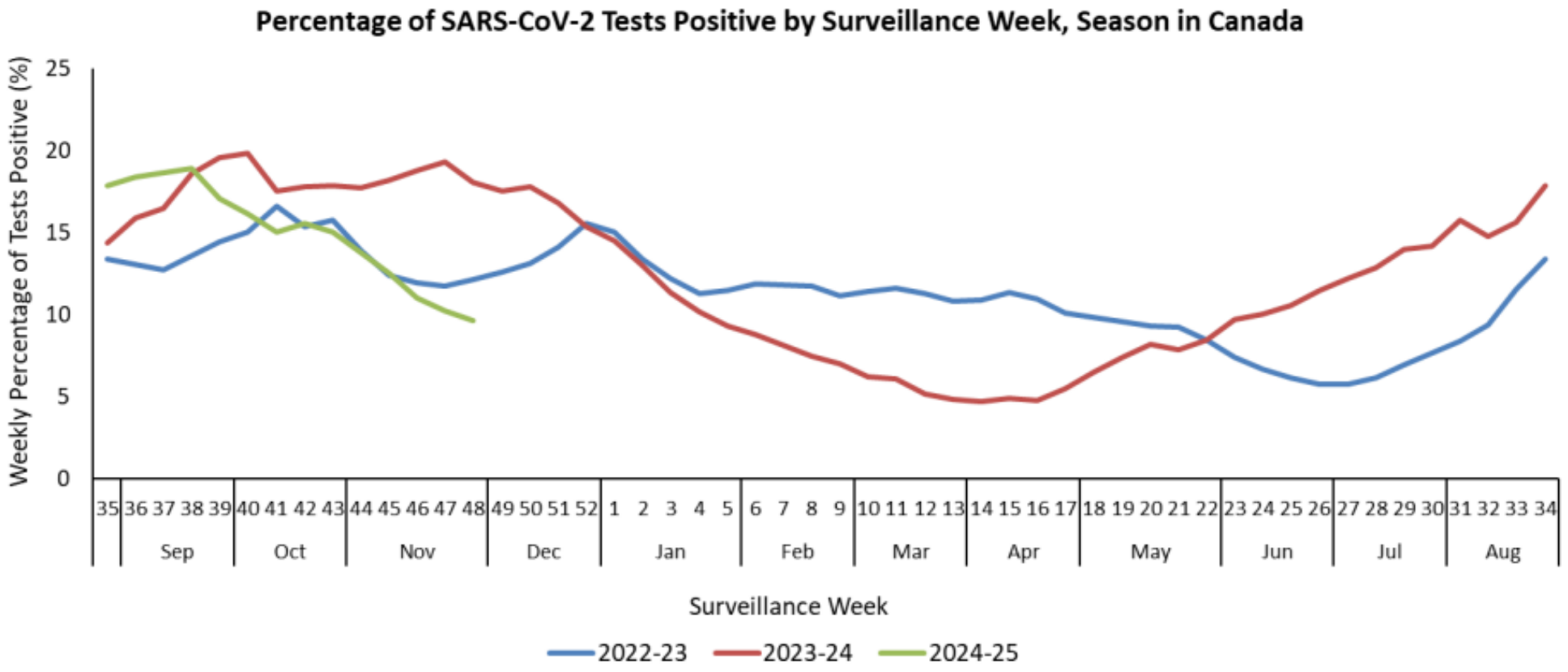
Burden of COVID-19 Disease

COVID-19 is a respiratory infection caused by SARS-CoV-2 and can cause mild to severe illness, including hospitalization and death. Certain populations, such as young infants, older adults, and those with chronic health conditions are at higher risk for serious illness.

The evolutionary trajectory of SARS-CoV-2 is uncertain, but the virus undergoes antigenic changes over time, resulting in distinct variants or subvariants that are not as well neutralized by antibodies induced by vaccines made based on previously circulating variant or subvariants. Antigenic changes have resulted in regular reassessments of the strain(s) selected for the COVID-19 vaccines internationally.

Burden of COVID-19 Disease

Figure 1. Percentage of SARS-CoV-2 tests positive by surveillance week, season in Canada (from 2022 Week 35 to 2024 week 48, RVDSS)



Fall 2025 Eligibility for Provincially Funded COVID-19 Vaccine

COVID-19 vaccines will be available to individuals through a phased approach.

Phase 1 (October 1):

- Eligible healthcare workers
- Albertans who reside in continuing care homes, senior supportive living accommodations
- Individuals 65 years of age and older receiving the Alberta Seniors Benefit
- Home care clients who are homebound
- Individuals 6 months of age and older who:
  - have certain moderate to severe immunocompromising conditions or underlying medical conditions
  - individuals experiencing houselessness

Note: **Individuals who present to a clinic in phase 1 but do not meet eligibility criteria must be deferred until phase 2 and book an appointment October 20 or later.**

Fall 2025 Eligibility for Provincially Funded COVID-19 Vaccine

Eligible healthcare workers include:

- Individuals actively registered with one of our colleges
- Union Members (for example, UNA, HSAA, AUNP, AUPE, CUPE) as well as individuals who work in patient-facing settings such as:
  - Hospital staff (including students in health disciplines, contract workers and volunteers)
  - Staff in community health settings (e.g. clinical labs, home care, shelters)
  - Medical first responders
  - Staff in continuing care and supportive living
  - Disability support workers and staff working in recovery settings
  - Health care aides on the provincial registry
  - Students training in facilities such as hospitals, clinics, pharmacies, continuing care and supportive living accommodations

See Primary and Preventative Health Services (PPHS) website for further information https://www.alberta.ca/coronavirus-info-for-albertans

Underlying Medical Conditions and Eligibility for COVID-19 Vaccine

Individuals with the following underlying medical conditions will be eligible for COVID-19 vaccine that is provincially funded:

- Cancer (currently receiving treatment)
- Cerebrovascular disease
- Chronic kidney disease and not on peritoneal dialysis or hemodialysis
- Chronic liver disease
- Chronic lung disease
- Cystic fibrosis
- Diabetes Mellitus
- Disabilities (for example, Down syndrome, learning, intellectual, or developmental disabilities, ADHD, cerebral palsy, congenital disabilities, spinal cord injuries).

Underlying Medical Conditions and Eligibility for COVID-19 Vaccine con't

Individuals with the following underlying medical conditions will be eligible for COVID-19 vaccine that is provincially funded:

- Heart conditions (for example, cardiomyopathies, coronary artery disease, heart failure, etc)
- HIV infection
- Mental health disorders (limited to: mood disorders, including depression, psychotic disorders such as schizophrenia)
- Obesity
- Pregnancy
- Tuberculosis
- Primary immunodeficiency diseases not mentioned above
- Use of corticosteroids or other immunosuppressive medications that are not mentioned above

Certain Moderate to Severe Immunocompromising Conditions

Specific immunocompromising conditions that make an individual eligible for provincially funded COVID-19 vaccine:

- Solid organ transplant (SOT) recipients – pre-transplant and post-transplant.
- Hematopoietic stem cell transplant (HSCT) recipients – pre-transplant and post- transplant while in an immunosuppressed state and individuals receiving Chimeric Antigen Receptor (CAR) T-Cell therapy. See:
  - Standard for Immunization of Transplant Candidates and Recipients
  - Immunization for Adult HSCT Transplant Recipients
  - Immunization for Child HSCT Transplant Recipients
- Individuals with malignant hematologic disorders and non-hematologic malignant solid tumors while receiving active treatment which includes chemotherapy, targeted therapies, and immunotherapy (does not include individuals receiving solely hormonal therapy, radiation therapy or a surgical intervention).

Certain Moderate to Severe Immunocompromising Conditions

Immunocompromised Individuals cont'd

- Individuals with chronic kidney disease on peritoneal dialysis or hemodialysis.
- Individuals on:
  - long term high-dose systemic steroid treatment (prednisone equivalent of equal to or greater than 2 mg/kg/day or 20 mg/day if weight greater than 10 kg, for 14 days or greater), or
  - alkylating agents, or
  - anti-B-cell therapies-including anti-CD19, anti-CD20, anti-CD22 and anti-CD52 monoclonal antibodies (such as rituximab, ocrelizumab, and ofatumumab), or
  - antimetabolites (e.g. methotrexate, azathioprine, mycophenolate), or
  - tumor-necrosis factor (TNF) inhibitors (e.g., adalimumab, certolizumab, etanercept, golimumab, infliximab)

Certain Moderate to Severe Immunocompromising Conditions

Immunocompromised Individuals cont'd

- HIV-infected individuals without viral suppression or those with acquired immunodeficiency syndrome (AIDS).
- Individuals with moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome).
- Documentation of immunocompromising conditions is not required. Individuals who identify themselves as meeting at least one of the criteria above should be offered COVID-19 vaccine.
- Immunization of immunocompromised individuals should occur at a time when the individual is most likely to mount an immune response. Consult physician as required regarding timing of immunization.

Fall 2025 Eligibility for Provincially Funded COVID-19 Vaccine

Phase 2 (October 20):

- All other individuals 6 months of age and older
  - an administrative fee will apply

COVID-19 Vaccines Available in Alberta

- **mRNA**
  - Moderna (Spikevax) LP.8.1 Vaccine
  - Pfizer (Comirnaty) LP.8.1 Vaccine

Moderna LP.8.1 COVID-19 Vaccine

Moderna (Spikevax) LP.8.1 mRNA COVID-19 Vaccine Summary

	Moderna COVID-19 Frozen Vaccine
Dosage/Route	6 months of age to 11 years of age – 0.25 mL (25 mcg) IM (deltoid or vastus lateralis) 12 years of age and older - 0.5 mL (50 mcg) IM (deltoid or vastus lateralis)
Packaging	6 months to 11 years -Multi-dose vial: 10 pediatric doses per vial 12 years and older-Pre-filled syringe: 10 doses per package
Diluent	No
Indication	Albertans 6 months of age and older See biological page for specific information.
Ingredients	• mRNA (new technology) – nucleoside-modified mRNA (modRNA) platform • formulated in lipid nanoparticles (LNPs) • no adjuvants, preservatives or antibiotics
Schedule	**6 months to 4 years of age** • Previously unimmunized – 2 doses • Previously immunized (1 or more previous COVID-19 vaccine, regardless of product type) – 1 dose **5 years of age and older** • 1 dose, at least three months from previous COVID-19 vaccine dose, regardless of the number of doses received in the past. PLEASE SEE BIOLOGICAL PAGE FOR SPACING CONSIDERATIONS AND SCHEDULE FOR IMMUNOCOMPROMISED PERSONS.

Moderna LP.8.1 mRNA COVID-19 Vaccine Dosage and Schedule

6 months to 4 years of age

- Previously unimmunized:
  - Dose 1: day 0
  - Dose 2: at least 8 weeks after dose 1
- Previously immunized with one dose of a non-LP.8.1 COVID-19 vaccine series, regardless of product type:
  - 1 dose, at least 8 weeks from previous dose,
- Previously received two or more non-LP.8.1 COVID-19 vaccine doses, regardless of product type:
  - 1 dose, at least 3 months from previous dose

Dosage

- 6 months to 4 years of age 0.25 mL

Moderna LP.8.1 mRNA COVID-19 Vaccine Dosage and Schedule

Individuals 6 months to 4 years of age should complete a two-dose series of COVID-19 vaccine, regardless of the product that was administered for the first dose. The series should not be restarted.

Moderna LP.8.1 mRNA COVID-19 Vaccine Dosage and Schedule

Individuals 5 years of age and older

- 1 dose, at least 3 months from a previous non-LP.8.1 COVID-19 vaccine dose, regardless of the number of doses received in the past.

Dosage

- 5 to 11 years of age 0.25 mL
- 12 years of age and older 0.5 mL

Schedule for Individuals with Certain Immunocompromising Conditions

Moderna – 6 months of age and older

Unimmunized/previously received fewer than 3 doses of non-LP.8.1 COVID-19 vaccine:

- Immunocompromised individuals should follow the schedule below and receive the appropriate number of COVID-19 vaccine doses to complete a three-dose COVID-19 series. Regardless of whether they have received one or two non-LP.8.1 COVID-19 vaccine doses, the previous dose(s) should be counted, and the series should not be restarted.
  - Dose 1: day 0
  - Dose 2: at least 28 days after dose 1
  - Dose 3: 8 weeks after dose 2; however, a minimum interval of 4 weeks may be considered.

Schedule for Individuals with Certain Immunocompromising Conditions

Previously received 3 or more doses of COVID-19 vaccine

- 1 dose, at least 3 months from previous non-LP.8.1 COVID-19 vaccine dose, regardless of the number of doses received in the past.

Provide appropriate dose for age and vaccine being administered.

Moderna LP.8.1 mRNA COVID-19 Vaccine Reactions

Common	• Pain, redness or swelling at injection site • Chills, fever • Fatigue • Headache, myalgia, arthralgia • Nausea, vomiting • Axillary swelling or tenderness • Dizziness • Hypoaesthesia or paraesthesia • In children under 5 years of age: irritability, crying, sleepiness, loss of appetite, otitis media
Rare	• Allergic reaction • Anaphylaxis • Erythema multiforme • Facial paralysis/Bell’s palsy

Moderna LP.8.1 COVID-19 Vaccine Storage

Multi-dose Vials

- Store in freezer between -50˚C to -15˚C.
- Protect from light.
- Do not refreeze after thawing.

Thawed, unpunctured vials:

- Can be stored at +2˚C to +8˚C for up to 50 days prior to first use.
- Can be stored at +8˚C to +25˚C for up to 12 hours.

Thawed, punctured vials:

- Can be stored at +2°C to +8°C for 24 hours.
  - Discard after 24 hours.
- Can be stored at +8°C to +25°C for 12 hours.
  - Discard after 12 hours.

Moderna Vaccine Preparation

Multi-Dose Vials

Multi-dose vials are supplied as a frozen dispersion, does not contain preservative. Thaw vaccine before use:

- Vaccine can be thawed in two ways:
  - Thaw time when stored between +2˚C to +8˚C is 2 hours.
  - Thaw time when stored between +15˚C to +25˚C is 45 minutes.
- After thawing, let vial stand at room temperature for 15 minutes before administering.
- Must not be reconstituted, mixed with other medicinal product, or diluted.
- Swirl gently after thawing and before each withdrawal.
- Do not shake vial.
- Pediatric clients should be grouped to minimize vaccine wastage

Recommendations for Pediatric Moderna COVID-19 Vaccine Doses

To minimize vaccine wastage, immunization sites are encouraged to follow the appointment booking guidelines below:

- Rural Immunization Sites: Schedule a minimum of 4 pediatric appointments
- Urban Immunization Sites: Schedule a minimum of 6 pediatric appointments

If there are remaining doses of the COVID-19 vaccine after pediatric appointments:

- These doses may be offered to individuals 12 years of age and older

Moderna Vaccine Transportation

Multi-Dose Vials – Punctured Vials

- Transportation of punctured vials is permitted at +2°C to +8°C.
- However, transport with caution as there is a risk of microbial contamination during transport of punctured vials.
- As much care as possible should be taken to minimize movement/vibration of the punctured vials.
- The time in transit of punctured vials at +2°C to +8°C should be considered part of the 24 hours allowed for storage of punctured vials at refrigerated temperatures.
- The Alberta Vaccine Storage and Handling for COVID-19 Vaccine Policy will be updated with this transportation information.

Moderna LP.8.1 COVID-19 Vaccine Storage

Pre-filled Syringe

- Store in freezer in original carton between -50˚C to -15˚C.
- Protect from light.
- Do not refreeze after thawing.
- Can be stored between +2˚C to +8˚C for up to 50 days prior to first use.
- Can be stored between +8˚C to +25˚C for up to 12 hours.
- Discard thawed pre-filled syringes if not used within this time.
- Pre-filled syringes should not be returned to the refrigerator after being thawed at room temperature

Moderna Vaccine Preparation

Pre-filled Syringe

Individual syringe

- Thaw time when stored between +2˚C to +8˚C is 1 hour and 40 minutes.
- Thaw time when stored between +15˚C to +25˚C is 40 minutes.
- Do not shake syringe.

Carton of 10 syringes

- Thaw time when stored between +2˚C to +8˚C is 2 hours and 40 minutes.
- Thaw time when stored between +15˚C to +25˚C is 1 hour and 20 minutes

Pfizer LP.8.1 COVID-19 Vaccine

Pfizer (Comirnaty) LP.8.1 mRNA COVID-19 Vaccine Summary

	Pfizer COVID-19 Ultra Frozen
Dosage/Route	12 years of age and older - 0.3 mL (30 mcg) / IM (deltoid or vastus lateralis)
Packaging	Pre-filled syringe: 10 doses per package
Diluent	No
Indication	Albertans 12 years of age and older See biological page for specific information
Ingredients	• mRNA (new technology) – nucleoside-modified mRNA (modRNA) platform • formulated in lipid nanoparticles (LNPs) • no adjuvants, preservatives and antibiotics
Schedule	**12 years of age and older** • 1 dose, at least three months from previous non-LP.8.1 COVID-19 vaccine dose, regardless of the number of doses received in the past PLEASE SEE BIOLOGICAL PAGE FOR SPACING CONSIDERATIONS AND SCHEDULE FOR IMMUNOCOMPROMISED PERSONS.

Schedule for Individuals with Certain Immunocompromising Conditions

Pfizer – 12 years of age and older

Unimmunized/previously received fewer than 3 doses of non-LP.8.1 COVID-19 vaccine:

- Immunocompromised individuals should follow the schedule below and receive the appropriate number of COVID-19 vaccine doses to complete a three-dose COVID-19 series. Regardless of whether they have received one or two non-LP.8.1 COVID-19 vaccine doses, the previous dose(s) should be counted, and the series should not be restarted.
  - Dose 1: day 0
  - Dose 2: at least 28 days after dose 1
  - Dose 3: 8 weeks after dose 2; however, a minimum interval of 4 weeks may be considered.

Schedule for Individuals with Certain Immunocompromising Conditions

Previously received 3 or more doses of COVID-19 vaccine

- 1 dose, at least 3 months from previous non-LP.8.1 COVID-19 vaccine dose, regardless of the number of doses received in the past.

Provide appropriate dose for age and vaccine being administered.

Pfizer LP.8.1 mRNA COVID-19 Vaccine Reactions

Common	• Pain, swelling/induration, erythema at injection site • Axillary swelling/tenderness • Fatigue, headache, chills, fever • Myalgia, arthralgia • Nausea, vomiting, diarrhea, loss of appetite • Irritability, crying • Hypoaesthesia • Paraesthesia
Uncommon	• Lymphadenopathy • Asthenia • Hyperhidrosis, night sweats
Rare	• Allergic reaction • Anaphylaxis • Facial swelling/Bell's Palsy • Myocarditis/Pericarditis • Erythema multiforme Unexpected or unusual side effects can occur. Refer to the product monograph for more detailed information.

Pfizer LP.8.1 mRNA COVID-19 Vaccine Storage and Preparation

- Store in a refrigerated suspension and **do not freeze**
- Protect from light until thawed
- Can be stored between +2˚C to +8˚C until the expiration date printed on the carton and syringe label.
- Pre-filled syringes may be transported between +2˚C to +8˚C.
- Pre-filled syringes can be handles in room light conditions.
- Minimize exposure to room light and avoid exposure to direct sunlight and ultraviolet light.
- **Regardless of storage condition, the vaccine should not be used after the expiration date printed on the syringes and cartons.**

Interval between previous COVID-19 infection and COVID-19 immunization

- Individuals who have had a recent COVID-19 infection may receive COVID-19 vaccine after acute symptoms of COVID-19 have resolved and they are no longer infectious, unless there is a history of multisystem inflammatory syndrome in children or adults (MIS-C or MIS-A).

- Individuals with a history of multisystem inflammatory syndrome in children or adults (MIS-C or MIS-A), regardless of immunocompromised status, should receive the vaccine when clinical recovery has been achieved or at least 90 days since the onset of MIS-C or MIS-A, whichever is longer.

COVID-19 Vaccine – Contraindications and Precautions

Contraindications

COVID-19 vaccine should **not** be administered to individuals who:

- Have a known severe hypersensitivity to any component of the vaccine.
- Two non-medicinal ingredients in the vaccine that have been associated with allergic reactions in other products:
  - Polyethylene glycol (PEG). The potential allergen may be found in bowel preparation products for colonoscopy, laxatives, cough syrup, cosmetics, contact lens care solutions, skin products and some food and drinks.
  - Tromethamine (trometamol or Tris). Component found in contrast media, oral and parenteral medications.
- Anaphylaxis to a previous dose of COVID-19 mRNA vaccine may not be an absolute contraindication.
  - See COVID-19 Vaccine biological page for details.
- Are less than licensed age for the product being used.

Precautions

- The safety and effectiveness of Moderna Spikevax and Pfizer BioNTech is inferred from studies and based on safety data from clinical trials which evaluated primary and booster vaccination and post marketing safety data; safety data accrued are relevant to the subsequent variant updated vaccines because these vaccines are manufactured using the same process.
- Individuals receiving anticoagulant therapy or those with a bleeding disorder that would contraindicate intramuscular injection should not be given the vaccine unless the potential benefit clearly outweighs the risk of administration.
- Administration should be postponed in individuals suffering from acute severe febrile illness.
- Individuals who have had a serious allergic reaction to another vaccine, drug or food should talk to their health care provider before receiving the vaccine.

Myocarditis and/or Pericarditis

- Very rare cases of myocarditis and/or pericarditis following immunization with COVID-19 vaccines have been reported during post authorization use.
  - Compared to the original monovalent primary series, the risk of myocarditis and/or pericarditis is now expected to be lower due to the use of a 1-dose schedule in most individuals.
  - Post-market safety surveillance data on previous formulations of mRNA COVID-19 vaccine indicate that the risk of myocarditis following a booster dose is lower compared to that following the second dose in the primary series, and current data do not show a product-specific difference in the risks of myocarditis and/or pericarditis after a booster dose of an mRNA COVID-19 vaccine.
- Anyone receiving a COVID-19 vaccine should be informed of the risk of myocarditis and pericarditis and advised to seek medical attention if they develop related symptoms including shortness of breath, chest pain, or the feeling of a rapid or abnormal heart rhythm.

Myocarditis and/or Pericarditis

- Generally, deferral of COVID-19 immunization is not required for those with a prior history of myocarditis or pericarditis that is unrelated to COVID-19 vaccines.
  - If these individuals have questions or concerns about their prior history of myocarditis or pericarditis and immunization, it is recommended that individuals consult with their clinician. However, consultation with a clinician is not required to receive COVID-19 vaccines.

Myocarditis and/or Pericarditis

In most circumstances, further doses of COVID-19 vaccines should be **deferred** among people who experienced myocarditis (with or without pericarditis) within 6 weeks of receiving a previous dose of an COVID-19 vaccine.

- However, further doses may be offered if individuals with confirmed myocarditis or pericarditis with abnormal cardiac investigation choose to receive another dose of vaccine after discussing the risks and benefits with their clinician.

- Individuals with a history compatible with pericarditis within 6 weeks of receiving a dose of a COVID-19 vaccine, who either had no cardiac workup or who had normal cardiac investigations, can be re-immunized when they are symptom free and at least 90 days have passed since previous immunization.

- Informed consent should discuss the lower risk of recurrence of myocarditis and/or pericarditis following additional doses of COVID-19 vaccine in individuals with a history of confirmed myocarditis and/or pericarditis after a previous dose of COVID-19 vaccine.

Pregnancy

- COVID-19 vaccine should be offered to pregnant individuals regardless of trimester of pregnancy because of the increased risk that infection poses in pregnancy.
- The safety and efficacy of Moderna Spikevax and Pfizer Comirnaty LP.8.1 in pregnant women has not yet been established.
- However, data available on COVID-19 vaccines administered in pregnancy did not detect safety signals from post-marketing surveillance. COVID-19 mRNA vaccines can be offered to pregnant individuals as they are more at risk for severe illness from COVID-19 compared with non-pregnant individuals.
  - It is recommended that individuals consult with their primary health care provider or medical specialist for any vaccine related questions or concerns.
  - However, consultation with a primary health care provider or medical specialist is not required to receive COVID-19 vaccine.

Pregnancy

COVID-19 mRNA Vaccine use in Pregnancy and Newborn and Early Infant Outcomes

Study done in Ontario, Canada, using multiple linked health administration databases, singleton births with estimated dates of delivery from May 1, 2021, to September 2, 2022, in which the mother received at least one mRNA COVID vaccine while pregnant.

- 142 006 infants included in the study, 85 670 were exposed to 1 or more COVID-19 vaccine doses in utero
- Infants of vaccinated mothers had lower risks of severe neonatal morbidity, neonatal death and NICU admission compared with no maternal COVID-19 vaccination before delivery
- No association between maternal vaccination in pregnancy and neonatal readmission or 6-month hospital admission
- Maternal mRNA COVID-19 vaccination during pregnancy was not associated with increased adverse newborn and early infant outcomes and may be protective against adverse newborn outcomes.

Jorgensen SCJ, Drover SSM, Fell DB, et al. Newborn and Early Infant Outcomes Following Maternal COVID-19 Vaccination During Pregnancy. *JAMA Pediatr.* Published online October 23, 2023. doi:10.1001/jamapediatrics.2023.4499

Lactation

- It is unknown whether COVID-19 vaccine is excreted in human milk as breastfeeding individuals were excluded from the initial trials. A risk to the newborns/infants cannot be excluded.
- Recent reports have shown that breastfeeding people who have received mRNA COVID-19 vaccines have antibodies in their breastmilk, which could help protect their babies. More data are needed to determine the level of protection these antibodies might provide to the baby.
- COVID-19 vaccine is recommended for individuals who are breastfeeding
  - It is recommended that individuals consult with their primary health care provider or medical specialist for any vaccine related questions or concerns.
  - However, consultation with a primary health care provider or medical specialist is not required to receive COVID-19 vaccine.

Co-administration with other vaccines

- COVID-19 vaccines may be co-administered with, or at any time before or after other vaccines (including, live, inactivated, adjuvanted, or unadjuvanted vaccines), tuberculin skin tests or IGRA (QFT) tests to individuals 6 months of age and older.
- Deferral of COVID-19 immunization is not recommended for individuals who have received anti-SARS-CoV-2 monoclonal antibodies or convalescent plasma provided for treatment or prophylaxis of COVID-19.
- See COVID-19 vaccine biological page for further details.

Other Program Resources

Commitment to Comfort

Needle Fears

- This can affect people to a degree that they avoid immunization

Commitment to Comfort | Alberta Health Services outlines five principles to improve the immunization experience, health outcomes, satisfaction and encourage repeat attendance to healthcare encounters.

- Make a comfort plan
- Use positive language
- Use comfort positions
- Shift attention
- Use numbing cream

Adverse Events following Immunization (AEFI)

- An adverse event following immunization (AEFI) is defined as a serious or unexpected event temporally associated with immunization.
- Alberta Health developed an Active Surveillance and Reporting of AEFI Policy for COVID-19 vaccine, found in the IPSM and on the Alberta Health website. The policy includes a list of reportable AEFI and Adverse Events of Special Interest (AESI). AESI are additional reportable events specific to COVID-19 vaccine.
- Severe reactions, i.e., anaphylaxis, death and other high-profile / serious events (VITT), should be reported within 24 hours and all other reactions within 3 days to the AEFI Team.
- “Reportable AEFIs” are reported to Primary and Preventative Health Services, and in turn to the National Surveillance Program.

AEFI Reporting

- **AHS Public Health** - AEFI reporting will continue to follow the procedure outlined in the AEFI Standard in the Immunization Program Standards Manual (IPSM).

- **Non-AHS Public Health Practitioners** report AEFI through the AEFI report form found at: Adverse Event Following Immunization Reporting

- Consult with AHS Adverse Event Following Immunization (AEFI) Team at AEFI@primarycarealberta.ca or 1-855-444-2324 as soon as possible for any case where there is uncertainty as to whether a symptom following immunization is related to the immunization.

Anaphylaxis Management Resources

Alberta Health Services employees need to ensure they have completed the Anaphylaxis Management | Insite (albertahealthservices.ca) learning module.

Covenant Health employees need to ensure they have completed Covenant Health Anaphylaxis Learning Module found on CLiC.

All other providers must have Anaphylaxis Management Guidelines in place.

- Additional information available in the Canadian Immunization Guide – Vaccine Safety

Infection Prevention and Control (IPC)

IPC's mandate is to reduce the incidence of healthcare associated infections in patients, residents, and clients by:

- process and outcome surveillance
- outbreak identification and management
- consultation and education
- policy and procedure development
- research

For more information go to the AHS IPC website at:

https://www.albertahealthservices.ca/info/page6410.aspx

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QUESTIONS

Email: CDCIMM@primarycarealberta.ca

Ph: 1-855-444-2324

Primary Care Alberta

Thank you