DATE: 2/18/2022
TO: Health Alert Network
FROM: Keara Klinepeter, Acting Secretary of Health
SUBJECT: Update to Recommendations Regarding COVID-19 Vaccination

This transmission is a “Health Update,” and provides updated information regarding an incident or situation; unlikely to require immediate action.

HOSPITALS: PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, NURSING AND LABORATORY STAFF IN YOUR HOSPITAL; EMS COUNCILS: PLEASE DISTRIBUTE AS APPROPRIATE; FQHCs: PLEASE DISTRIBUTE AS APPROPRIATE LOCAL HEALTH JURISDICTIONS: PLEASE DISTRIBUTE AS APPROPRIATE; PROFESSIONAL ORGANIZATIONS: PLEASE DISTRIBUTE TO YOUR MEMBERSHIP; LONG-TERM CARE FACILITIES: PLEASE SHARE WITH ALL MEDICAL, INFECTION CONTROL, AND NURSING STAFF IN YOUR FACILITY

SUMMARY

- **Guidance** released on February 11, 2022 from the CDC updates COVID-19 vaccination guidance.
  - For immunocompromised individuals only, the interval between completion of the primary vaccine series and the booster dose has been shortened from 5 months to 3 months for mRNA vaccines and remains at 2 months for the Janssen vaccine.
  - **Moderate to Severely immunocompromised individuals** ages 18 years and older who received a single dose of the Janssen vaccine should receive an additional dose an mRNA vaccine 28 days after the Janssen vaccine.
  - It is no longer necessary to delay COVID-19 vaccination for those patients who have received monoclonal antibodies or convalescent plasma for the treatment or prophylaxis of COVID-19.
  - Patients who have received their full primary series outside the United States with a WHO approved COVID-19 vaccine may receive either of the 2 mRNA vaccines for their booster dose.
  - The CDC has added to their guidance information regarding potential characteristics of allergic reactions, vasovagal reactions, and vaccine side effects following COVID-19 vaccination.

If you have any questions, please call PA DOH at 1-877-PA-HEALTH (1-877-724-3258) or your local health department.
Background

Vaccination with COVID-19 vaccines is one of the most important ways patients can prevent infection, hospitalization, and death from COVID-19. The Pfizer BioNTech COVID-19 vaccine received full FDA approval on August 23, 2021, the Moderna COVID-19 vaccine received full FDA approval on January 31, 2022 and the Janssen COVID-19 vaccine received an Emergency Use Authorization from the FDA on February 27, 2021. As more information is gathered over time about the effectiveness of these vaccines against COVID-19, guidance is updated to provide the maximum protection for patients. On February 11, 2022 the CDC updated its COVID-19 vaccine guidance to improve protection for certain patient populations from infection, serious illness, and death from COVID-19.

1. **Guidance** for Moderately to Severely Immunocompromised Patients

Patients with moderately to severely immunocompromising conditions are at higher risk for morbidity and mortality due to COVID-19 and may not mount an adequate immune response to the traditional COVID-19 vaccine series. The following recommendations for this patient population should improve the protection and immune response for immunocompromised patients.

- The mRNA vaccines (Pfizer BioNTech and Moderna):
  - **A three dose primary series** is recommended for those aged 5 years and older who are moderately to severely immunocompromised at the time of vaccination.
    - The same vaccine product should be used for all doses in the primary series.
    - **Pfizer BioNTech vaccine (5 years and older):**
      - The second dose is administered at least 21 days after the first dose and the third dose is administered at least 28 days after the second dose.
      - The full dose of 30mcg for ages 12 and up and 10mcg ages 5-12 should be given for all doses in the primary series.
    - **Moderna vaccine (18 years and older):**
      - The second dose is administered at least 28 days after the first dose and the third dose is administered at least 28 days after the second dose.
      - The full dose of 100mcg should be given for all doses in the primary series.
  - Moderately to severely immunocompromised patients ages 12 and older who received one of the mRNA vaccines as their primary series should receive a booster dose of an mRNA vaccine **3 months** after the completion of their primary series.
    - Booster doses have only been approved for ages 12 and older.
    - **Pfizer BioNTech vaccine (ages 12 and older) booster dose is 30mcg which is the same dose as the primary series.**
    - **Moderna vaccine (ages 18 and older) booster dose is 50mcg which is half the dose of the primary series.**
• The Johnson and Johnson (Janssen) vaccine:
  o A two dose primary series is recommended for patients aged 18 years and older who are moderately to severely immunocompromised at the time of vaccination.
    ▪ This two dose series consists of a dose of the Janssen vaccine followed at least 28 days later by a full dose of one of the mRNA vaccines.
  o These patients should then receive a booster dose of an mRNA vaccine at least 2 months after the completion of their primary series.
    ▪ The Pfizer BioNTech vaccine booster dose is 30mcg which is the same dose as the primary series.
    ▪ The Moderna vaccine booster dose is 50mcg which is half the dose of the primary series.

**COVID-19 Vaccination Schedule for Patients who are Moderately to Severely Immunocompromised**

<table>
<thead>
<tr>
<th>Primary vaccination</th>
<th>Age group</th>
<th>Number of primary vaccine doses</th>
<th>Number of booster doses</th>
<th>Interval between 1st and 2nd dose</th>
<th>Interval between 2nd and 3rd dose</th>
<th>Interval between 3rd and 4th dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pfizer-BioNTech</td>
<td>5–11 years</td>
<td>3</td>
<td>NA</td>
<td>3 weeks</td>
<td>≥4 weeks</td>
<td>N/A</td>
</tr>
<tr>
<td>Pfizer-BioNTech</td>
<td>≥12 years</td>
<td>3</td>
<td>1</td>
<td>3 weeks</td>
<td>≥4 weeks</td>
<td>≥3 months</td>
</tr>
<tr>
<td>Moderna</td>
<td>≥18 years</td>
<td>3</td>
<td>1</td>
<td>4 weeks</td>
<td>≥4 weeks</td>
<td>≥3 months</td>
</tr>
<tr>
<td>Janssen</td>
<td>≥18 years</td>
<td>1 Janssen, followed by 1 mRNA</td>
<td>1</td>
<td>4 weeks</td>
<td>≥2 months</td>
<td>N/A</td>
</tr>
</tbody>
</table>

2. **Guidance** for patients who have received monoclonal antibodies or convalescent plasma for the treatment or prophylaxis of COVID-19.

  ▪ COVID-19 vaccination no longer needs to be delayed for patients who have received monoclonal antibodies or convalescent plasma for the treatment or prophylaxis of COVID-19.
  ▪ Patients who have received a COVID-19 vaccine, the administration of tixagevimab/cilgavimab (Evushield) for pre-exposure prophylaxis still should be deferred for 2 weeks following COVID-19 vaccination.
3. **Guidance** on COVID-19 booster vaccine for patients who received their primary series outside of the United States

- Patients who received the full primary series of the FDA approved COVID-19 vaccines (Pfizer BioNTech, Moderna, and Janssen) outside of the United States may proceed with a booster vaccine as if they had been vaccinated in the United States.
- Immunocompetent patients who received a full primary series of a WHO approved but non-FDA authorized vaccine, should receive a booster dose of **either of the 2 mRNA vaccines** (Pfizer BioNTech or Moderna) at least 5 months after the completion of their primary COVID-19 vaccine series.
- Moderately to severely immunocompromised patients who received a full primary series of a WHO approved but non-FDA authorized COVID-19 vaccine, should receive a booster dose of **either of the 2 mRNA vaccines** (Pfizer BioNTech or Moderna) at least **3 months** after the completion of the primary COVID-19 vaccine series.
- In all of the above situations, the recommended dose of the mRNA booster vaccine is as follows:
  - The Pfizer BioNTech vaccine (ages 12 and older) booster dose is 30mcg.
  - The Moderna vaccine (ages 18 and older) booster dose is 50mcg.

4. **Guidance** on managing anaphylaxis post COVID-19 vaccination

- The CDC added information about characteristics of allergic reactions, vasovagal reactions and vaccine side effects following COVID-19 vaccination. This information is provided to assist providers with determining the etiology of post vaccination symptoms and whether a patient should proceed with future doses of COVID-19 vaccine.
- This information is presented in table form and is available [here](#).
- All vaccine providers must report adverse reactions through the [VAERS reporting system](#).
- All vaccine recipients are encouraged to download and report on the [V-safe app](#) which was developed by the CDC to monitor COVID-19 vaccine adverse events.

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Categories of Health Alert messages:
- **Health Alert**: conveys the highest level of importance; warrants immediate action or attention.
- **Health Advisory**: provides important information for a specific incident or situation; may not require immediate action.
- **Health Update**: provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of February 18, 2022 but may be modified in the future.