



BC Centre for Disease Control  
Provincial Health Services Authority

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**Date:** May 20, 2021

**Administrative Circular:** 2021:20

**ATTN:** Medical Health Officers and Branch Offices  
Public Health Nursing Administrators and Assistant Administrators  
Holders of Communicable Disease Control Manuals

**Re: Update to Communicable Disease Control Manual, Chapter 2: Immunization,  
Part 4 – Biological Products, Part 5 – Adverse Events Following Immunization &  
Appendix E – Management of Biologicals**

## **Part 4 – Biological Products**

### **COVID-19 Vaccines**

#### **COVID-19 mRNA Vaccine BNT162b2 (Pfizer)**

The product page has been revised as follows:

- **Doses and Schedules:**
  - Revised to 12 years of age and older.
- **Administration:**
  - Content regarding the duration of storage of the vaccine at refrigerated temperatures (+2°C to +8°C) was revised from 5 days (120 hours) to 31 days.
- **Precautions:**
  - For individuals with a history of Multisystem Inflammatory Syndrome in Children (MIS-C) and Adults (MIS-A), it is unclear if there is a risk of recurrence of the same dysregulated response following reinfection with SARS-CoV-2 or in response to a COVID-19 vaccine. These individuals should delay vaccination until they have recovered from illness and for 90 days after the date of diagnosis of MIS-C or MIS-A, recognizing that the risk of reinfection and, therefore, the benefit from vaccination might increase with time following initial infection.
- **Special Considerations:**
  - COVID-19 vaccines can be given concomitantly with, or any time before or after any other live or inactivated vaccine. This is a change from the previous recommendation for a 14-day interval before or after receipt of a COVID-19 vaccine. The original advice against co-administration was based on a cautionary approach, as specific studies of co-administration with other vaccines have not been performed. The basis for this change in recommendation is referenced to general administration guidance for vaccines and guidance from the US Advisory Committee on Immunization Practice (ACIP).

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**Please remove page numbers:** 1-5 dated May 7, 2021  
**Please add new page numbers:** 1-5 dated May 20, 2021

### **COVID-19 mRNA Vaccine mRNA-1273 (Moderna)**

The product page has been revised as follows:

- **Precautions:**
  - For individuals with a history of Multisystem Inflammatory Syndrome in Children (MIS-C) and Adults (MIS-A), it is unclear if there is a risk of recurrence of the same dysregulated response following reinfection with SARS-CoV-2 or in response to a COVID-19 vaccine. These individuals should delay vaccination until they have recovered from illness and for 90 days after the date of diagnosis of MIS-C or MIS-A, recognizing that the risk of reinfection and, therefore, the benefit from vaccination might increase with time following initial infection.
- **Special Considerations:**
  - COVID-19 vaccines can be given concomitantly with, or any time before or after any other live or inactivated vaccine. This is a change from the previous recommendation for a 14-day interval before or after receipt of a COVID-19 vaccine. The original advice against co-administration was based on a cautionary approach, as specific studies of co-administration with other vaccines have not been performed. The basis for this change in recommendation is referenced to general administration guidance for vaccines and guidance from the US Advisory Committee on Immunization Practice (ACIP).

**Please remove page numbers:** 1-4 dated May 7, 2021  
**Please add new page numbers:** 1-4 dated May 20, 2021

### **COVID-19 Vaccine (ChAdOx1-S [recombinant]) (AstraZeneca/Verity Pharmaceuticals)**

The product page has been revised as follows:

- **Precautions:**
  - For individuals with a history of Multisystem Inflammatory Syndrome in Children (MIS-C) and Adults (MIS-A), it is unclear if there is a risk of recurrence of the same dysregulated response following reinfection with SARS-CoV-2 or in response to a COVID-19 vaccine. These individuals should delay vaccination until they have recovered from illness and for 90 days after the date of diagnosis of MIS-C or MIS-A, recognizing that the risk of reinfection and, therefore, the benefit from vaccination might increase with time following initial infection.
- **Special Considerations:**
  - COVID-19 vaccines can be given concomitantly with, or any time before or after any other live or inactivated vaccine. This is a change from the previous

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recommendation for a 14-day interval before or after receipt of a COVID-19 vaccine. The original advice against co-administration was based on a cautionary approach, as specific studies of co-administration with other vaccines have not been performed. The basis for this change in recommendation is referenced to general administration guidance for vaccines and guidance from the US Advisory Committee on Immunization Practice (ACIP).

**Please remove page numbers:** 1-4 dated May 7, 2021  
**Please add new page numbers:** 1-4 dated May 20, 2021

### **COVID-19 Vaccine (Ad26.COV2.S [recombinant]) (Janssen Inc.)**

The product page has been revised as follows:

- **Precautions:**

- For individuals with a history of Multisystem Inflammatory Syndrome in Children (MIS-C) and Adults (MIS-A), it is unclear if there is a risk of recurrence of the same dysregulated response following reinfection with SARS-CoV-2 or in response to a COVID-19 vaccine. These individuals should delay vaccination until they have recovered from illness and for 90 days after the date of diagnosis of MIS-C or MIS-A, recognizing that the risk of reinfection and, therefore, the benefit from vaccination might increase with time following initial infection.

- **Special Considerations:**

- COVID-19 vaccines can be given concomitantly with, or any time before or after any other live or inactivated vaccine. This is a change from the previous recommendation for a 14-day interval before or after receipt of a COVID-19 vaccine. The original advice against co-administration was based on a cautionary approach, as specific studies of co-administration with other vaccines have not been performed. The basis for this change in recommendation is referenced to general administration guidance for vaccines and guidance from the US Advisory Committee on Immunization Practice (ACIP).

**Please remove page numbers:** 1-4 dated May 7, 2021  
**Please add new page numbers:** 1-4 dated May 20, 2021

### **COVID-19 Vaccination Aftercare Sheet**

The COVID-19 Vaccination Aftercare Sheet has been updated as follows:

- The following content was removed: "If you need to get another vaccine before you get your second COVID-19 vaccine dose, talk to your healthcare provider first."

**Please remove page numbers:** 1-2 dated May 7, 2021  
**Please add new page numbers:** 1-2 dated May 20, 2021

### **COVID-19 Vaccine Screening Checklist**

The screening checklist has been updated as follows:

- Question 10 has been added under Precautions related to previous diagnosis of Multisystem Inflammatory Syndrome in Children (MIS-C) and Adults (MIS-A).

**Please remove page number:** 1 dated May 7, 2021  
**Please add new page number:** 1 dated May 20, 2021

The [COVID-19 Vaccines HealthLinkBC File](#) is being updated and will be posted shortly.

### **Part 5 – Adverse Events Following Immunization**

- Section 6. Summary of Reporting Criteria, the table has been revised as follows:
  - ‘Physician-diagnosed’ has been included under ‘Reporting Criteria’ for Adenopathy/Lymphadenopathy.
  - ‘Physician-diagnosed’ has been removed from under ‘Reporting Criteria’ for Anaesthesia/Paraesthesia.
  - ‘Myelitis or Transverse myelitis’ have been added to ‘Encephalopathy or Encephalitis or Acute Disseminated Encephalomyelitis (ADEM)’. These have also been added to the ‘Reporting Criteria’.
  - The ‘Reporting Criteria’ for ‘Syncope with injury’ has been revised to include “that required hospital or urgent care services”.
- Section 10.1 Anaesthesia/Paraesthesia has been revised to remove ‘Physician-diagnosed’ from ‘Reporting Criteria’.
- Section 11.2 Intussusception/Hematochezia has been revised to include ‘Physician-diagnosed’ in ‘Reporting Criteria’.
- Section 11.3 Syncope with Injury has been revised to include “that required hospital or urgent care services” in ‘Reporting Criteria’.

**Please remove page numbers:** 8-10, 14, 22 & 30 dated November 2016  
**Please add new page numbers:** 8-10, 14, 22 & 30 dated May 2021

### **Appendix E – Management of Biologicals**

#### **Guidance for Receiving and Handling the Pfizer-BioNTech COVID-19 mRNA Vaccine**

- Content under “Thawing” has been revised to indicate that the vaccine may be stored in the refrigerator for up to 31 days.

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**Please remove page number: 10 dated March 30, 2021**  
**Please add new page number: 10 dated May 20, 2021**

If you have any questions or concerns, please contact Stephanie Meier, Senior Practice Leader, BCCDC (telephone: 604-707-2577 / email: [stephanie.meier@bccdc.ca](mailto:stephanie.meier@bccdc.ca)).

Sincerely,



Monika Naus MD MHS Sc FRCPC FACPM  
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Communicable Diseases & Immunization Service  
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