Scheduled Substance Treatment Protocol

Comirnaty Original/Omicron BA4-5 for COVID 19 vaccination of over 12 year old

Version 2

Key changes in this version:

Minor formatting changes and update booster recommendations

| Areas Applicable | NT Wide | | |
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| Health Professionals authorised by this SSTP | Nurses Midwives Aboriginal and Torres Strait Islander Health Practitioners. | | |
| Scheduled Substance(s) | SARS-COV-2 (COVID-19) vaccine. Each 0.3mL dose contains 15 micrograms of Tozinameran (original) COVID-19 mRNA vaccine and 15 micrograms of Famtozinameran (Omicron BA.4-5 specific COVID-19 mRNA vaccine). Comirnaty® Original/ Omicron BA 4-5 COVID-19 vaccine is a multi-dose vial containing 6 doses of 0.3mL (30 micrograms total per dose). | | |
| Indication | Active immunisation to prevent coronavirus disease 2019 (COVID-19) caused by SARS-CoV-2 in individuals 12 years of age and older including in pregnancy. | | |
| Contraindications and/or Exclusions* | Contraindications Anaphylaxis to the active substance or any of excipients including a previous dose of mRNA COVID -19 vaccine (Spikevax® or Comirnaty®) Exclusions People under 12 years old Administration of vaccine to individuals with an acute severe febrile illness or acute infection (minor infection or low grade fever should not delay vaccination) should be deferred until they are symptom free. Precautions Individuals with a history of allergy to previous doses of a COVID-19 vaccine or any component of COVID-19 vaccines or with a history of anaphylaxis to other drugs or vaccines or any other serious event attributed to a previous dose of COVID-19 vaccine may need prior assessment before receiving a COVID-19 vaccine. Refer to ATAGI advice for further information. People with confirmed SARS-CoV-2 infection should wait a minimum of six (6) months after their diagnosis (either by PCR test or Rapid Antigen Test) | | |
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| | Vaccination can occur prior to 6 months in exceptional circumstances such as prior to starting an immunosuppressant or prior to overseas travel. People with a history of any of the following conditions Recent (i.e., within the last 3 months) myocarditis or pericarditis Acute rheumatic fever or acute rheumatic heart disease (i.e., with evidence of active inflammation) Acute decompensated heart failure | | | | |
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| | may need prior assessment before receiving a COVID-19 vaccine. Refer to ATAGI advice for further information. | | | | |
| | Please refer to the Product Information for list of precautions Comirnaty Original/Omicron BA.4-5 COVID-19 vaccine Therapeutic Goods Administration (TGA) | | | | |
| Dose and Route* | Only approved in people aged 12 years and over. | | | | |
| | A single dose of 30 micrograms (0.3mL) given intramuscularly, preferably in the deltoid muscle of the upper arm*. | | | | |
| | *preferred route is in the deltoid muscle of the upper arm. However alternate sites, such as vastus lateralis muscle of the thigh or ventrogluteal muscle of the hip, may also be used at clinician's discretion. | | | | |
| Administration* | Each dose must contain 0.3mL of vaccine. | | | | |
| | If the amount of vaccine remaining in the vial cannot provide a full dose of 0.3mL discard the vial. | | | | |
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| Dose Frequency* | Primary series | | | | |
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| Dose Frequency* | All people aged 12 years and older without risk factors. 30 micrograms (0.3mL). 2 doses, 8 weeks apart. The dose interval can be shortened to 3 weeks for people at higher risk of severe infection from COVID-19 infection (such as older adults or people with underlying medical conditions), in an outbreak setting or prior to international travel. The benefits of earlier protection with a shorter interval should be weighed against the benefits of the longer dose interval, such as | | | | |
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| | COVID 19 vaccines and influenza or other immunisation can be administrated without consideration of timing such as on the same day. There is a potential for an increase in mild or moderate adverse event when more than one vaccine is given at the same time. | | | |
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| Monitoring requirements* | Ensure the vaccines are not expired and have been stored in accordance with product information. | | | |
| | Ensure vials are completely thawed before use by placing in refrigerator (2-8°C) for up to 6 hours or | | | |
| | Allow the frozen vial to sit at temperature up to 30°C for 30 minutes for immediate use. | | | |
| | Unopened multi dose vial | | | |
| | Unopened vials can be stored for up to 10 weeks at 2-8°C. Store protected from light. | | | |
| | Open Multi-dose vial | | | |
| | Opened vials should be stored at 2 to 30°C and discarded 6 hours after opening. | | | |
| | Pre-drawn doses | | | |
| | Pre-drawn doses can be stored at room temperature for up to one hour or in a refrigerator for up to 6 hours. | | | |
| | Post vaccination | | | |
| | Follow usual health service post vaccination monitoring and report any adverse events following immunisation to Centre for Disease Control. | | | |
| Health professional Accreditation | Health professionals using this guideline must meet the requirements outlined by the NT Chief Health Officer: | | | |
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| Accreditation | the NT Chief Health Officer: | | | |
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| | completed the assessment of an immuniser program of study that meets the curriculum content requirements of the National Immunisation Education Framework for Health Professionals. | | | | |
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| Documentation (including necessary information to the patient) | The health professional must: Complete all clinical documentation requirements as outlined by the Health Service. Enter the patient details and vaccine brand name, dose, site of administration and batch number in the Australian Immunisation Register within 24 hours and no later than 10 days after administration. | | | | |
| Related Documents | Australian Product Information – COMIRNATY ® (original/ Omicron BA.4-5 COVID-19 VACCINE PI Template (tga.gov.au) | | | | |
| | ATAGI recommendations on use of the Pfizer bivalent (Original/Omicron BA.4/5) COVID-19 vaccine | | | | |
| | ATAGI 2023 booster advice | | | | |
| | ATAGI Clinical guidance on use of COVID-19 vaccine in Australia (most recent version) | | | | |
| | ATAGI recommendations on the use of a third primary dose of COVID-19 vaccine in individuals who are severely immunocompromised ATAGI – COVID-19 vaccination – Shared decision making guide for people with immunocompromise | | | | |
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| | COVID-19 vaccination decision guide for women who are pregnant, breastfeeding or planning pregnancy | | | | |
| | Australian Immunisation Handbook | | | | |
| | Pre Vaccination Screening Checklist | | | | |
| | COVID-19 Vaccination Eligibility Declaration Form for People certain conditions or on therapies leading to severe immunocompromise | | | | |
| | Immunisation: Health Professionals; NT Upskilling Courses | | | | |
| | Australian Immunisation Handbook: After Vaccination | | | | |
| | Australian Government COVID 19 Vaccination Training Program | | | | |
| Chief Health Officer | Signature | Name | Date | | |
| | EDOC 2023/386213 | Adjunct Professor Christine Connors | 22/12/2023 | | |
| Period of effect | This SSTP remains in force until 22/12/2025 unless revoked earlier. | | | | |

References:

^{*} The drug information provided is to act as a guide only, for further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or interactions are present refer to medical officer before administration