




**Community  
HealthPathways**  
Hunter New England

# COVID-19 Vaccination

Referrals and Advice





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## ! Health Alert

All HNE healthcare settings within [lockdown LGAs](#) are on [red alert](#).

COVID-19 information:

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NSW Health – [Latest COVID-19 Case Locations and Alerts](#)

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# COVID-19 Vaccination

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Hunter New England

COVID-19 Vaccination Referrals and Advice

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Vaccination referrals 

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Vaccination advice 


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Adverse event reporting 

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The patient noted above has a history of the following medical condition/s and it is recommended they receive the Pfizer (COMIRNATY™) COVID-19 vaccine according to current ATAGI advice.

- Cerebral venous sinus thrombosis (CVST)
- Heparin-induced thrombocytopenia (HIT)
- Idiopathic splanchnic (mesenteric, portal, splenic) vein thrombosis
- Antiphospholipid syndrome (APLS) with thrombosis and/or miscarriage
- Capillary leak syndrome
- Anaphylaxis, thrombosis with thrombocytopenia syndrome (TTS) or other serious adverse event attributed to the first dose of the AstraZeneca COVID-19 vaccine
- History of anaphylaxis to a component of the AstraZeneca COVID-19 vaccine

## Vaccination referrals ^

1. To refer patients for vaccination, use the [Vaccine Eligibility Checker](#) to confirm eligibility and identify the closest vaccination location.
2. Refer patients aged > 60 years with [indications for Pfizer vaccine](#) to an [HNE LHD vaccination hub](#) by emailing [HNELHD-COVIDClinicBookingChange@health.nsw.gov.au](mailto:HNELHD-COVIDClinicBookingChange@health.nsw.gov.au) with the subject header "Community GP – Patient booking referral", and either:
  - Include indication for vaccination with Pfizer (Comirnaty) in preference to AstraZeneca (ChAdOx1-S)
  - or
  - Attach a completed [Recommendation to Receive the Pfizer \(Comirnaty\) COVID-19 Vaccine Form](#)
3. Consider vaccination options for:

• residential care facility (RCF) staff





Also see [AusVaxSafety COVID-19 vaccine data](#)  for reports received by routine active surveillance.

Significant (rare) syndromes reported to date internationally include

- disorders of clotting and haemostasis
- anaphylaxis
- Bell's palsy
- persistent lymphadenopathy
- other new onset neurological disorders.

Note: Many conditions can arise during normal life, whether or not a vaccine is administered. It remains important to report any new or unexpected events so that safety can be appropriately monitored.



Table 2: Frequency of selected adverse events following COVID-19 AstraZeneca vaccine (ChAdOx1-S)

Non-serious adverse events (generally milder and less frequent in older adults  $\geq 65y$ )

Adverse reactions	Frequency COVID-19 Vaccine (AstraZeneca)	Frequency Control	Notification required
Injection site tenderness	63.7%	39.5%	No  Do not require mandatory notification unless concerned, more serious, persistent or not resolving.
Fever	7.9%	1.2%	
Fatigue	53.1%	38.2%	
Malaise	44.2%	20.2%	
Headache	52.6%	39.0%	
Chills	31.9%	8.3%	
Muscle pain	44.0%	21.6%	
Joint pain	26.4%	12.4%	
Nausea	21.9%	13.1%	

Serious adverse events

Adverse reactions	Frequency	Notification required
Neurological demyelinating events	Very rare	Yes  Requires mandatory notification.
Anaphylaxis or other hypersensitivity	Very rare (around 1/1,000,000)	These and any other rare, unusual or unexpected events leading to hospitalisation, disability or death must be reported urgently.

Frequency of selected adverse events following BNT162b2 (Pfizer-BioNTech)  
(30µg/dose) immunisation

Non-serious adverse events (frequency reported within 7 days following each dose in phase II/III trial)

Adverse reactions	Frequency Dose 1 (16-55y)	Frequency Dose 2 (16-55y)	Frequency Dose 1 (>55y)	Frequency Dose 2 (>55y)	Notification required
Injection site pain	83.1%	77.8%	71.1%	66.1%	No Does not require mandatory notification unless concerned, more serious, persistent or not resolving.
Fever	3.7%	15.8%	1.4%	10.9%	
Fatigue	47.4%	59.4%	22.6%	50.5%	
Headache	41.9%	51.7%	25.2%	39%	
Chills	14%	35.1%	6.3%	22.7%	
Muscle pain	21.3%	37.3%	13.9%	28.7%	
Joint pain	11%	21.9%	8.6%	18.9%	
Required paracetamol	27.8%	45%	19.9%	37.7%	

Serious adverse events

Adverse reactions	Frequency	Notification required
Severe persistent lymphadenopathy or injection site pruritis lasting longer than one week, pain not at the injection site (excluding headache or muscle/joint pain)	Uncommon (≥1/1,000 to <1/100))	Yes These and any other rare, unusual or unexpected events leading to hospitalisation, disability or death must be reported urgently
Acute peripheral facial paralysis (Bell's palsy)	Rare (≥1/10,000 to <1/1,000))	
Anaphylaxis or other hypersensitivity	Rare (around 1/200,000)	