I-VAC Pediatric Learning Collaborative for COVID-19 Vaccination



Please use your first name and health center name when you join the session



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Please remember to mute your microphone unless speaking



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Disclosures

- No one in a position to control the education content of the activity has any relevant financial disclosures with ineligible companies to disclose.
- What gets said here today may change based on new data and recommendations
 - Knowledge is shared more rapidly through ECHO









COVID-19 Common Dosing Errors, Management and Prevention







General Best Practice Guidelines for Immunization

Clear Orders

Right Patient

Right Vaccine and Diluent

Right Dose

Right Site

Right Route

Right Needle Size

Right Documentation

https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf







COVID-19 vaccine products currently approved or authorized in the United States

Pfizer-BioNTech							
A ma in disertion	Ve seine viel sen selev	Label border color	Dilution vonuined	Primary series		Booster doses	
Age indication	Vaccine vial cap color	Label border color	Dilution required	Dose	Injection volume	Dose	Injection volume
6 months-4 years	Maroon	Maroon	Yes	3 µg	0.2 mL	NA	NA
5–11 years	Orange	Orange	Yes	10 μg	0.2 mL	10 µg	0.2 mL
12 years and older	Purple	Purple	Yes	30 µg	0.3 o L	30 µg	0.3 mL
12 years and older	Gray	Gray	No	30 μg	OBrL	30 µg	0.3 mL
Moderna							
Againdication	Vaccine vial cap color	Label border color	Dilution required	Piplary	/ series	Во	oster doses
Age indication	vaccine viai cap color	Label border color	Dilution required	Dose	Injection volume	Dose	Injection volume
6 months–5 years	Dark blue	Magenta	No	25 μg	0.25 mL	NA	NA
6-11 years	Dark blue	Purple	0 1	50 μg	0.5 mL	NA	NA
12–17 years	Red	Light blue	No	100 μg	0.5 mL	NA	NA
18 years and older	Red	Light blue	No	100 μg	0.5 mL	50 µg	0.25 mL
18 vears and older	Dark blue	ur le	No	NA	NA	50 ua	0.5 mL
Janssen	~		rec)			
Againdisation	Vac inc val c p co or	Label border color	Dilytich required	Primary series		Booster doses	
Age indication	Vactine val cip color	Label border color	Dilution required	Dose	Injection volume	Dose	Injection volume
18 years and older	Blue	No Color	No	5×1010 viral particles	0.5 mL	5×10 ¹⁰ viral particles	0.5 mL
Novavax							
Age indication	Vaccine vial cap color	Label border color	Dilution required	Primary series		Booster doses	
Age malcation	vaccine viai cap coloi	Label bolder color	Dilation required	Dose	Injection volume	Dose	Injection volume
18 years and older	Royal blue	No Color	No	5 μg rS and 50 μg of Matrix-M™ adjuvant	0.5 mL	N/A	N/A



https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html



Right Vaccine, Dose and Diluent

- Check vaccine and diluent
 - Do not mix vaccine vials of the same or different vaccines together
 - Use only diluent supplied with vaccine (Peds Pfizer only)
 - Do not mix COVID-19 Vaccines from different vials
 - If you do not have enough for a full dose you need to waste
 - Adjust in ICARE
- Label each vaccine after drawing up
- Do you have the correct vaccine for patient age?
 - Ask the <u>patient their age</u> not birthdate!
- Check again just before giving to patient

Pfizer COVID-19 Vaccine Dose: 10 mcg/<u>0.2 mL</u> Lot # _____ BUD: _____ date @ _____time Age: 5 to 11 years

	er COVID-19 ncg/ <u>0.3 mL</u>	Vaccine
BUD:	date @ears to adult	_time







Adverse Reactions and Contraindications







Know Possible Side-effects

- Types and examples of most common adverse reactions
 - Local (swelling at injection site)
 - Systemic (fever)
 - Allergic (anaphylaxis)
 - Adenopathy
 - Syncope in adolescents
 - Rare to see anything else







Allergic Reactions or Syncope rare, but be prepared

- Prevent syncope (teens, young adults)
 - Sit or lie down for immunization
 - Wait 15-20 minutes after immunization
- Allergic reactions
 - Have a written plan, practice drill
 - Keep CPR certification current
 - Know where epinephrine and equipment to maintain airway are kept
 - Call for MD or NP and call 911
- Document patient chart, VAERS, registry







COVID-19: Administrative Errors and Deviations









COVID-19 Vaccine

Administration Errors and Deviations



A vaccine administration error is any preventable event that may cause or lead to inappropriate use of vaccine or patient harm. This table provides resources for preventing and reporting COVID-19 vaccine administration errors, as well as actions to take after an error has occurred. For completeness, it includes additional scenarios that deviate from CDC recommendations for vaccine intervals but are not considered administration errors.

For all vaccine administration errors:

- Inform the recipient of the vaccine administration error.
- Consult with the state immunization program_and/or immunization information system (IIS) to determine how the dose should be entered into the IIS, both as an administered dose and to account for inventory.
- Follow the revaccination guidance below, using an ageappropriate COVID-19 vaccine and formulation. Continue with the recommended schedule of subsequent dose(s) unless otherwise noted.
 - For doses recommended to be repeated, consider delaying the repeat dose for 8 weeks after the invalid dose based on

- the potential for increased reactogenicity and the rare risk of myocarditis from mRNA COVID-19 vaccines, particularly among males 12-39 years of age.
- The recommendations apply to all FDA-approved or FDA-authorized COVID-19 vaccines and all doses unless otherwise stated.
- Providers are required to report all COVID-19 vaccine administration errors—even those not associated with an adverse event—to VAERS.
- Determine how the error occurred and implement strategies to prevent it from happening again.







Туре	Administration error/deviation	Interim recommendation
Site/route	Incorrect site (i.e., site other than the deltoid muscle or vastus lateralis muscle)	Do not repeat dose.
	Incorrect route (e.g., subcutaneous)	Do not repeat dose. Inform the recipient of the potential for local and systemic adverse events.
Age	Unauthorized age group (recipients younger than age 6 months)	Do not give another dose at this time.*
	Unauthorized age group (recipients ages 6 months–17 years)	If Moderna vaccine administered: As a booster dose, do not repeat the dose with Pfizer-BioNTech vaccine
		If Novavax vaccine administered:
		 As a booster dose, do not repeat the dose with Pfizer- BioNTech vaccine
		If Janssen vaccine administered As a primary dose, do not count the dose and begin or continue the age-appropriate mRNA COVID-19 vaccine primary series (Table 2) at least 28 days after the Janssen vaccine dose
		 As a booster dose, do not count the dose and repeat the dose with Pfizer-BioNTech vaccine at least 28 days after the Janssen vaccine dose





Туре	Administration error/deviation	Interim recommendation
Product and dosage	If the incorrect product/dosage is administered, resulting in a higher-than-authorized dose	Do not repeat dose.**
	If the incorrect product/dosage is administered, resulting in a lower-than-authorized dose	 Repeat dose immediately (no minimum interval) with the age- appropriate product/dosage.
		 Some experts suggest delaying the repeat dose for 8 weeks after the invalid dose based on the potential for increased reactogenicity and the rare risk of myocarditis from mRNA (i.e., Moderna or Pfizer-BioNTech) or Novavax COVID-19 vaccines, especially in males ages 12–39 years.^{5†}
	Higher-than-authorized dose volume administered of the correct product	Do not repeat dose.†
	Lower-than-authorized dose volume	Repeat dose immediately (no minimum interval). ⁵
	administered of the correct product (e.g., leaked out of the syringe, equipment failure, recipient pulled away)	However, if a half-volume dose of vaccine is administered to a patient recommended for the full volume, another half-volume dose can be administered on the same clinic day, and the 2 doses can count as 1 full dose.





Туре	Administration error/deviation	Interim recommendation
Storage and handling	Dose administered after improper storage and handling (i.e., temperature excursion)	 Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have data to support the stability of the vaccine, repeat the dose immediately (no minimum interval). §
	Dose administered past the expiration/beyond- use date	Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have data to support the stability of the vaccine, repeat the dose immediately (no minimum interval). §
Intervals*	An mRNA (i.e., Moderna or Pfizer-BioNTech) or Novavax primary series dose administered prior to the recommended interval*	 Repeat dose. Space repeat dose after the dose given in error by at least the recommended interval (<u>Table 2</u> and <u>Table 3</u>).⁵
	Booster dose administered prior to the minimum interval (i.e., for the first booster dose, prior to 2 months after Janssen primary series or 3 months after mRNA vaccine primary series)	Repeat dose if this is the first booster dose. Space repeat dose after the dose given in error by at least the minimum interval. ⁵ 2-month minimum interval after Janssen vaccine primary series 3-month minimum interval after mRNA vaccine primary series Do not repeat dose if this is the second booster dose.
	Any COVID-19 vaccine dose administered at any interval after the recommended interval	Do not repeat dose. There is no maximum interval. This deviation from CDC guidance does not require VAERS reporting.



https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-c



Туре	Administration error/deviation	Interim recommendation
Diluent (Pfizer-BioNTech COVID-19 Vaccine formulations only [purple	ONLY diluent administered (i.e., sterile 0.9% sodium chloride)	Administer the authorized dose immediately (no minimum interval).
cap and orange cap])	No diluent, resulting in higher than authorized dose	 Do not repeat dose.† Inform the recipient of the potential for local and systemic adverse events.
	Incorrect diluent type (e.g., sterile water, bacteriostatic 0.9% sodium chloride)	Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have information to support the stability of the vaccine, repeat the dose immediately (no minimum interval). §
	Vaccine is mixed with too little diluent	Do not repeat dose. Inform the recipient of the potential for local and systemic adverse events.†
	Vaccine is mixed with too much diluent	Repeat dose immediately (no minimum interval).
	Single-use vial of diluent is used to mix multiple vials of vaccine	Do not repeat dose. Inform patient of the potential for bacterial infection.
Diluent (Pfizer-BioNTech COVID-19 formulation that should not be mixed with diluent, i.e., gray cap)	Vaccine is mixed with any diluent (i.e., any type or volume of diluent)	Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have information to support the stability of the vaccine, repeat the dose immediately (no minimum interval).



https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-c



Туре	Administration error/deviation	Interim recommendation
Mixed primary series	Incorrect COVID-19 vaccine product inadvertently administered as part of a 2- or 3- dose primary series	 Do not repeat dose. Children ages 6 months-4 years who receive different mR products for the first 2 doses of an mRNA COVID-19 vaccir series should follow a 3-dose schedule. A third dose of eith mRNA vaccine should be administered 8 weeks after the second dose to complete the 3-dose primary series.
		Children ages 5–17 years who receive a mixed mRNA COV vaccine primary series can follow the Pfizer-BioNTech COV 19 Vaccine schedule and receive a booster dose.







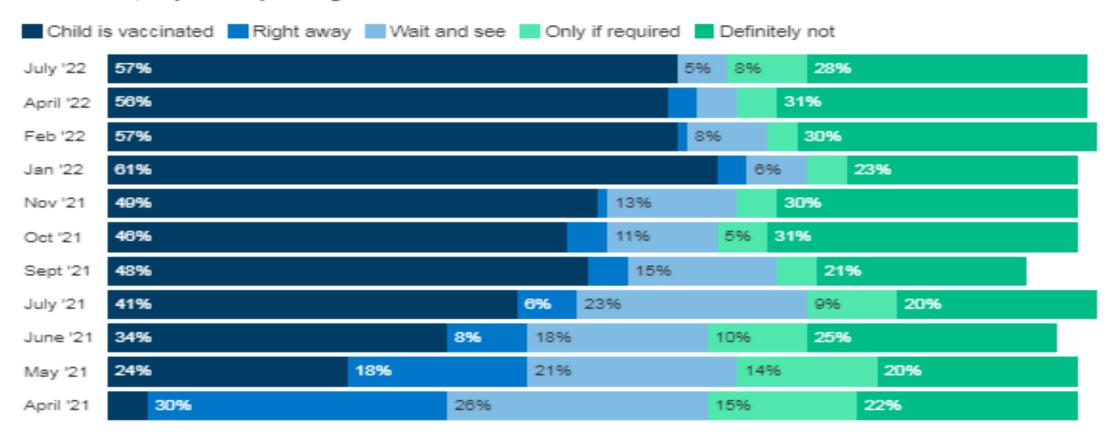






Vaccination Rates Among Children Ages 12-17 Have Plateaued Since The Start Of The Year

Thinking about your child between the ages of 12 and 17, have they received at least one dose of a COVID-19 vaccine, or not? If not, do you think you will get them vaccinated...?



NOTE: Among parents or guardians of children between the ages of 12 and 17. April 2021 question wording: "Once there is a COVID-19 vaccine authorized and available for your child's age group, do you think you will...?" See topline for full question wording. SOURCE: KFF COVID-19 Vaccine Monitor • PNG

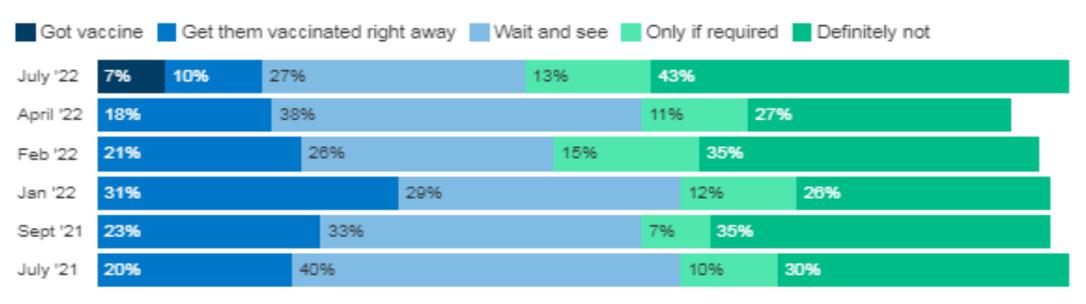
Vaccine Monitor





More Than Four In Ten Parents Of Children Under 5 Eligible For The Vaccine Say They Will "Definitely Not" Vaccinate Their Child For COVID-19

Thinking about your child between the ages of 6 months and 4 years, have they received at least one dose of a COVID-19 vaccine, or not? If not, do you think you will get them vaccinated...?



NOTE: Asked of parents or guardians of children between the ages of 6 months and 4 years. July 2021-April 2022 question was asked of parents or guardians of children under the age of five with question wording: "Once there is a COVID-19 vaccine authorized and available for your child's age group, do you think you will..." See topline for full question wording.

Vaccine Monitor

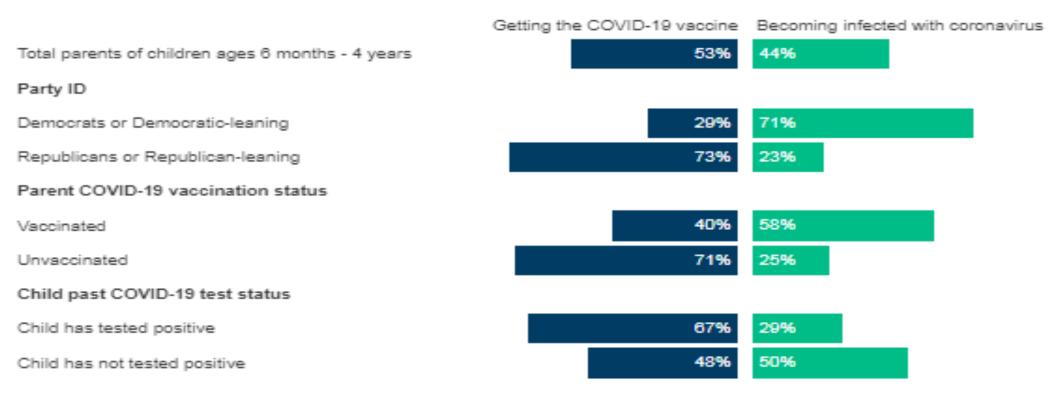
SOURCE: KFF COVID-19 Vaccine Monitor • PNG





More Than Half Of Parents Of Children Between 6 Months And 4 Years Old Say The COVID-19 Vaccine Poses A Bigger Risk To Their Child's Health Than A Coronavirus Infection

Thinking about your child between the ages of 6 months and 4 years old, which of the following do you think would be a **bigger risk** to your child's health..?



NOTE: Asked of parents or guardians of children between the ages of 6 months and 4 years. See topline for full question wording. SOURCE: KFF COVID-19 Vaccine Monitor (July 7-17, 2022) • PNG







AGAINST COVID-19

Majorities Of Parents Of Children Between 6 Months and 4 Years Concerned About Long-Term, Serious Side Effects Of COVID-19 Vaccine In Children

Percent of parents of unvaccinated children between the ages of 6 months and 4 years who say they are **very** or **somewhat concerned** about the each of the following:

	Total parents of unvaccinated children ages 6 months - 4 years	Vaccinated parents	Unvaccinated parents
Their child might experience serious side effects from the COVID-19 vaccine	81%	79%	83%
Not enough is known about the long-term effects of the COVID-19 vaccine in children	81%	74%	89%
The vaccine will not protect their child from getting sick from COVID-19	70%	71%	69%
Their child might be required to get the COVID-19 vaccine even if they don't want them to	59%	43%	78%
They might need to take time off work to bring their child to get vaccinated or to take care of them if they experience side effects	28%	28%	27%
They won't be able to get the vaccine for their child from a place they trust	27%	22%	34%
They might have to pay an out-of-pocket cost to get the COVID-19 vaccine for their child	23%	21%	26%
They will have difficulty traveling to a place to get their child vaccinated	20%	19%	20%

NOTE: Asked of parents or guardians of unvaccinated children between the ages of 6 months of 4 years. See topline for full question wording.

SOURCE: KFF COVID-19 Vaccine Monitor (July 7-17, 2022) • PNG





Most Parents Of Children Between The Ages Of 6 Months And 4 Years Have Not Talked To A Pediatrician About The COVID-19 Vaccine For Their Child

Have you talked to a pediatrician or other health care provider about the COVID-19 vaccine for your child between the ages of 6 months and 4 years old?

Yes No
Total parents of children ages 6 months - 4 years 30% 70%

Household income

Less than \$40K 28% 72%

\$40-\$89.9K 18% 82%

\$90K+ 47% 53%

NOTE: Asked of parents or guardians of children between the ages of 6 months and 4 years. See topline for full question wording. SOURCE: KFF COVID-19 Vaccine Monitor (July 7-17, 2022) • PNG

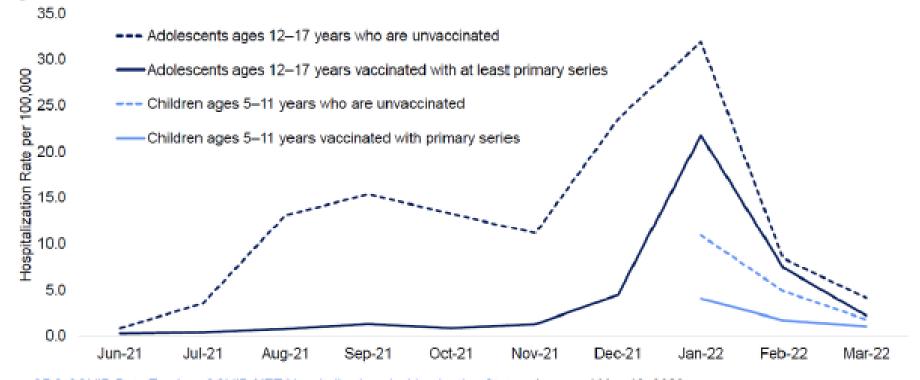






Rates of monthly COVID-19-associated hospitalizations by vaccination status among children and adolescents 5–17 years, COVID-NET

June 2021 - March 2022









Percent of children ages 6 months—4 years with COVID-19 associated hospitalization with underlying health conditions

■ At least 1 underlying medical conditions ■ No underlying medical conditions





COVID-NET, March 2020 - March 2022

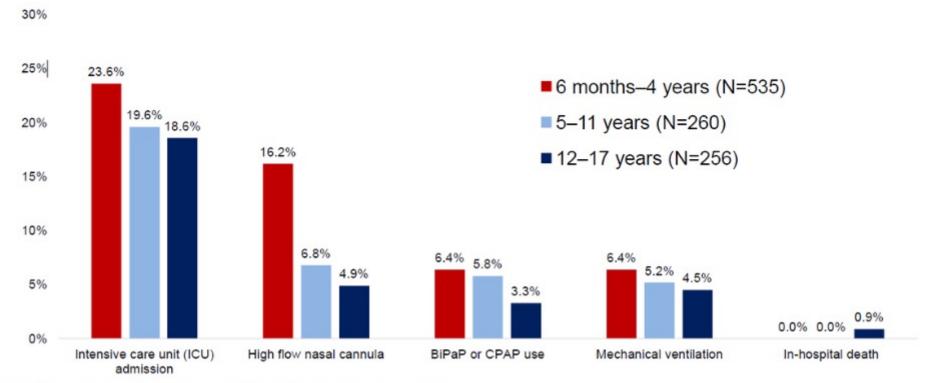


Source: 1. New Vaccine Surveillance Network. Preliminary data as of May 25, 2022, reflecting data from March 2020–April 2022 COVID-NET data. Accessed May 21, 2022, reflecting data from March 2020–March 2022





Severity of COVID-19-associated hospitalizations among children and adolescents 6 months-17 years, COVID-NET, December 19, 2021 – March 31, 2022 (Omicron period)



BiPAP: bilevel positive pressure, CPAP: continuous positive pressure

Source: COVID-NET data. Accessed May 21, 2022.



COVID-19 is a leading cause of death among children ages 0–19 years

March 1, 2020-April 30, 2022

Age group	Rank of COVID-19 among causes of death
<1 year	4
1-4 years	5
5–9 years	5
10–14 years	4
15–19 years	4

Based on death certificate data from the National Center for Health Statistics. COVID-19 based on cumulative total incidence of COVID-19 deaths from March 1, 2020-April 30, 2022.

Source: Flaxman S, Whittaker C, Semenova E et al. Covid-19 is a leading cause of death in children and young people ages 0-19 years in the United States, medRxiv 2022.05.23.22275458; doi: https://doi.org/10.1101/2022.05.23.22275458







KEEP CALM **AND** MAKEIT HAPPEN





Cases















Next Session: Tuesday, August 16th

For any questions, email us at pgower@peds.bsd.uchicago.edu





