

#### North Central London COVID-19 Vaccine Pharmacy Group

# Clinical information for vaccine consenters: Pfizer, AstraZeneca, Moderna vaccines

DISCAIMER: Information within this document may be updated before the PGD or Protocol you are working under. In the event of a discrepancy, always adhere to your PGD/Protocol.

This document is regularly updated; please download the most recent version:

https://ncl-mon.nhs.uk/wpcontent/uploads/0 COVID vaccine Information for vaccinators.pdf



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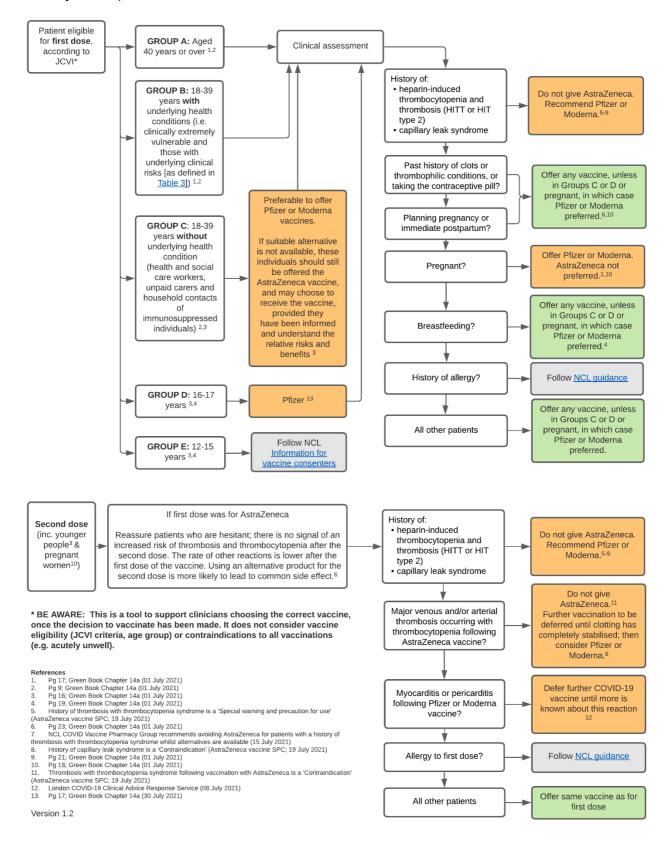
- Summary of product characteristics:
  - o AstraZeneca vaccine
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- Specialist Pharmacy Service: Answers to Questions specific to vaccines
  - o General information
  - Vaccine specific information
    - Pfizer/BioNTech
    - AstraZeneca
    - Moderna
- Immunisation against infectious disease: Chapter 14a COVID-19 (The Greenbook)
- COVID-19 vaccination programme: Information for healthcare practitioners

Information for vaccinators: Pfizer, AstraZeneca and Moderna vaccines

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### 1 Assessing for primary-schedule vaccine appropriateness

This is tool should only be used once the decision to offer a vaccine has been made. It supports clinicians in confirming whether a given vaccine is appropriate for a given individual. It does not consider vaccine eligibility (JCVI criteria) or contraindications to vaccination (e.g. acutely unwell).



Information for vaccinators: Pfizer, AstraZeneca and Moderna vaccines

# 2 Administration & dosing

2.1	Dosing schedule (timing and brands)	https://www.sps.nhs.uk/articles/dosing-information-for-covid-19-vaccines/  Includes:  Dosing schedule (recommended interval between 1st and 2nd dose)  Longer interval than recommended  Shorter interval than recommended  Different brand for second dose
2.2	Overseas vaccinations	See 'Individuals who received COVID vaccination overseas' (pg 14) and Appendix 1 <a href="https://www.gov.uk/government/publications/covid-19-vaccination-programme-guidance-for-healthcare-practitioners">https://www.gov.uk/government/publications/covid-19-vaccination-programme-guidance-for-healthcare-practitioners</a> Patients should be asked to contact their GP surgery so that their overseas vaccinations can be recorded on their healthcare record.
2.3	Vaccine administration error	See 'Inadvertent vaccine administration errors' https://www.gov.uk/government/publications/covid-19-vaccination-programme-guidance-for-healthcare-practitioners  This provides advice for inadvertent administration of:  • The whole multi-dose vial  • Over-diluted vaccine  • Incomplete dose of vaccine  • Vaccine which was subject to storage or preparation error

# 2.4 Vaccine eligibility: adults (from 17 ¾ years)

Eligibility criteria a:

- Primary schedule:
  - First dose: All.
  - Second dose: All
  - Third dose: Only those who had severe immunosuppression in proximity to their first or second COVID-19 doses in the primary schedule (Box)
- Booster
  - o those living in residential care homes for older adults
  - o all adults aged 50 years or over
  - o frontline health and social care workers
  - all those aged 16 to 49 years with underlying health conditions that put them at higher risk of severe COVID-19 (Table 3) °
  - o adult carers (Table 3°) and those experiencing homelessness
  - o adult household contacts of immunosuppressed individuals (Table 3°)

<sup>&</sup>lt;sup>a</sup> Advice for individuals aged 18-29 "includes those turning 18 years of age in the next three months" Green Book Chapter 14 <a href="https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a">https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a</a>

<sup>&</sup>lt;sup>b</sup> Box, Green Book Chapter 14 https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a

<sup>&</sup>lt;sup>c</sup> Table 3, Green Book Chapter 14 https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a

# 2.5 Vaccine eligibility: 16 to 17 ¾ years

#### Eligibility criteria:

- Primary schedule:
  - o First dose: All
  - Second dose:
    - employed/studying/training for health and social care work <sup>a</sup>
    - underlying health conditions that put them at higher risk of severe COVID-19<sup>b</sup>
    - share living accommodation on most days with individuals of any age who are immunosuppressed <sup>c</sup>
  - Third dose: Only those who had severe immunosuppression in proximity to their first or second COVID-19 doses in the primary schedule (Box)<sup>d</sup>
- Booster:
  - o frontline health and social care workers
  - o underlying health conditions that put them at higher risk of severe COVID-19 (Table 3) b
  - o adult carers (Table 3<sup>b,e</sup>) and those experiencing homelessness <sup>e</sup>
  - o adult household contacts of immunosuppressed individuals (Table 3<sup>b,e</sup>)

<sup>&</sup>lt;sup>a</sup> Green Book Chapter 14 https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a

<sup>&</sup>lt;sup>b</sup> Table 3, Green Book Chapter 14 https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a

<sup>&</sup>lt;sup>c</sup> Table 3 & 4, Green Book Chapter 14 <a href="https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a">https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a</a>

<sup>&</sup>lt;sup>d</sup> Box, Green Book Chapter 14 <a href="https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a">https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a</a>

e RVOC confirmed on 09/11/2021 that if the 16 to 17 ¾ year olds were vaccinated as part of a priority group in Phase 1 of the COVID-19 vaccination programme, then they will be eligible for a booster. 'Adult carers' 'adults experiencing homelessness' and 'adult household contacts of immunosuppressed individuals' are all JCVI Priority Group 6 (Phase 1) which includes "adults aged 16 to 65 years" and therefore are eligible.

2.6	Vaccine eligibility: 12 to <16 years	<ul> <li>Primary schedule         <ul> <li>First dose: All</li> <li>Second dose:                 <ul> <li>underlying health conditions that put them at higher risk of severe COVID-19 (Table 4)<sup>a</sup></li> <li>share living accommodation on most days with individuals of any age who are immunosuppressed (Box) <sup>b</sup></li> <li>Third dose: Only those who had severe immunosuppression in proximity to their first or second COVID-19 doses in the primary schedule <sup>c</sup></li> <li>Booster: Nil</li> <li><sup>a</sup> Table 4, Green Book Chapter 14 <a href="https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a">https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a</a></li></ul></li></ul></li></ul>
2.7	Vaccine eligibility: <12 years	* First dose: Nil  Second dose: Nil  Booster: Nil

# 3 History of allergy or anaphylaxis

3.1	History of allergy (inc. anaphylaxis) before first dose	Follow North Central London flow diagram – Page 1 https://www.ncl-mon.nhs.uk/wp-content/uploads/Guidelines/0 Managing Allergy COVID-19 vaccine.pdf  Further information (including excipients and approach to prior history of allergy [latex, food, thiomersal, medicines]):  • Pfizer: https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-pfizer-biontech/ • AstraZeneca: https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-astrazeneca/  • Moderna: https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-moderna/
3.2	Allergy to first dose of COVID-19 vaccine	Follow North Central London flow diagram – Page 2 <a href="https://www.ncl-mon.nhs.uk/wp-content/uploads/Guidelines/0_Managing_Allergy_COVID-19_vaccine.pdf">https://www.ncl-mon.nhs.uk/wp-content/uploads/Guidelines/0_Managing_Allergy_COVID-19_vaccine.pdf</a>

## 4 Cautions and contraindications

4.1	General information	https://www.sps.nhs.uk/home/covid-19-vaccines/general-information-and-guidance/answers-to-questions/#cautions-and-contraindications  Separate pages for:  • Anticoagulation and bleeding disorders  • Blood clots with COVID-19 vaccination (also see Green Book Chapter 14a 'Thrombosis and thrombocytopenia occurring after COVID-19 vaccination')  • Acute severe febrile illness  • History of COVID-19  • Extremes of body weight  • Concurrent immunosuppressive medicines  • Extremes of bodyweight  • Porphyria
4.2	Capillary Leak Syndrome	Do not use AstraZeneca vaccine in patients who have previously experienced episodes of capillary leak syndrome <sup>a</sup> (offer an alternative <sup>1</sup> ). <sup>a</sup> <a href="https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting">https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting</a> (28 October 2021)
4.3	Glucose-6-phosphate dehydrogenase (G6PD) deficiency	G6PD deficiency is not a contraindication to routine immunisation <sup>a</sup> **  a https://www.gov.uk/government/publications/contraindications-and-special-considerations-the-green-book-chapter-6

4.4	Lymphoedema	The vaccine is advisable for patients with lymphoedema a:  One arm affected by lymphoedema: Both doses of COVID-19 vaccine should be given in the unaffected, opposite arm.  Lymph nodes removed from the axilla (armpit) of one arm: Both doses of COVID-19 vaccine should be given in the opposite arm.  Both arms are affected by lymphoedema, but not the legs: Both doses of COVID-19 vaccine should be given into one of the thighs.  Both arms and one leg is affected by lymphoedema: Both doses of COVID-19 vaccine should be given into the unaffected thigh.  Both arms and both legs are affected by lymphoedema: Both doses of COVID-19 vaccine should be given into the limb least affected by lymphoedema  Lymph node swelling is a known side effect of all the COVID-19 vaccines. It should resolve promptly after thevaccination.   https://www.lymphoedema.org/wp-content/uploads/2021/05/Consensus_Document_on_COVID_Vaccination_amended_25May2021.pdf} (25 May 2021)
4.5	Drug interactions	See Interactions
4.6	Recent or imminent elective surgery	https://www.sps.nhs.uk/articles/use-of-covid-19-vaccine-in-people-with-recent-or-imminent-elective-surgery/
4.7	Religious beliefs (Jewish and Muslim communities)	Pfizer: <a href="https://www.sps.nhs.uk/articles/advising-individuals-with-religious-or-other-dietary-practices-and-beliefs-on-their-suitability-for-the-covid-19-vaccine-pfizer-biontech/">https://www.sps.nhs.uk/articles/advising-individuals-with-religious-or-other-dietary-practices-and-beliefs-on-their-suitability-for-the-covid-19-vaccine-astrazeneca/</a> Moderna: <a href="https://www.sps.nhs.uk/articles/advising-individuals-with-religious-or-other-dietary-practices-and-beliefs-on-their-suitability-for-the-covid-19-vaccine-moderna/">https://www.sps.nhs.uk/articles/advising-individuals-with-religious-or-other-dietary-practices-and-beliefs-on-their-suitability-for-the-covid-19-vaccine-moderna/</a>

## 5 Adverse effects

5.1	Common and important adverse effects	See PHE patient information leaflet 'What to expect after your COVID-19 vaccination' <a href="https://www.gov.uk/government/publications/COVID-19-vaccination-what-to-expect-after-vaccination">https://www.gov.uk/government/publications/COVID-19-vaccination-what-to-expect-after-vaccination</a>
5.2	Bell's Palsy	The number of reports of facial paralysis received so far is similar to the expected natural rate and does not currently suggest an increased risk following the vaccines. a  a https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting (28 October 2021)
5.3	Guillain-Barré Syndrome	Refer to Green Book for vaccine specific information (search GBS) <a href="https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a">https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a</a>
5.4	Risk of blood clots with lowered platelets (AstraZeneca vaccine)	See 'Risk of blood clots with COVID-19 vaccination' https://www.sps.nhs.uk/articles/covid-19-vaccination-and-blood-clotting/  To understand an individual's risk/benefit of vaccination with AstraZeneca vaccines, offer PHE patient information leaflet 'COVID-19 vaccination and blood clotting' https://www.gov.uk/government/publications/covid-19-vaccination-and-blood-clotting  For signs and symptoms of clots with lowered platelets, offer PHE patient information leaflet 'What to expect after your COVID-19 vaccination' https://www.gov.uk/government/publications/COVID-19-vaccination-what-to-expect-after-vaccination  For people worried about receiving a second dose of AstaZeneca vaccine, offer PHE patient information leaflet 'COVID-19 vaccination: worried about having your second dose of AstraZeneca?' https://www.gov.uk/government/publications/covid-19-vaccination-worried-about-having-your-second-dose-of-astrazeneca

# 5.5 Myocarditis and pericarditis (Pfizer and Moderna vaccines)

Myocarditis and pericarditis, inflammation of the heart. These reports are extremely rare, and the events are typically mild with individuals usually recovering within a short time with standard treatment and rest. <sup>a</sup> The reporting rate for myocarditis and pericarditis events is highest in the 18-49-year age group for all of the COVID-19 vaccines; there is currently no indication of an increased risk of these events in the under 18 years age group. <sup>a</sup>

Patients who experiences new onset of symptoms should seek medical attention.<sup>b</sup>

As the mechanism of action and risk of recurrence of myocarditis and pericarditis are being investigated, the current advice is that an individual's second or subsequent doses should be deferred until further information becomes available; an alternate vaccine may not reduce any risk of recurrence and will increase the likelihood of local and systemic reactions.

<sup>&</sup>lt;sup>a</sup> https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting (28 October 2021)

b https://www.gov.uk/government/publications/COVID-19-vaccination-what-to-expect-after-vaccination

Green Book Chapter 14 https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a

## **6 Excipients**

6.1	List of excipients	See 'Excipients'     Pfizer: <a href="https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-pfizer-biontech/">https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-astrazeneca/</a> Moderna: <a href="https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-moderna/">https://www.sps.nhs.uk/articles/advising-individuals-with-allergies-on-their-suitability-for-covid-19-vaccine-moderna/</a>
6.2	Alcohol content	<ul> <li>Pfizer: No alcohol</li> <li>Moderna: No alcohol</li> <li>AstraZeneca: There is a very small amount of alcohol in the vaccine (0.002 g per dose).<sup>2</sup> This is not enough to cause any noticeable effects and is less than the amount of alcohol found in bread, vinegar and fruit juice.<sup>a</sup>. The British Islamic Medical Association recommends the AstraZeneca vaccine<sup>b</sup></li> <li>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5421578/bhttps://britishima.org/covid19-vaccine-az/</li> </ul>
6.3	Vegan friendly or vegetarian?	The approved COVID-19 vaccines do not contain any animal, meat or egg products <sup>3</sup> VeganFriendly believe COVID-19 vaccines are vegan. PeTA recommends that vegan and animal rights campaigners take up the vaccines.

# 7 Pregnancy and breastfeeding

7.1	Pregnancy	https://www.sps.nhs.uk/articles/using-covid-19-vaccines-in-women-of-child-bearing-potential/  Useful resources when consenting:  PHE patient information leaflet: Women of childbearing age, currently pregnant or breastfeeding  RCOG Q&A: https://www.rcog.org.uk/en/guidelines-research-services/coronavirus-covid-19-pregnancy-and-womens-health/covid-19-vaccines-and-pregnancy/covid-19-vaccines-pregnancy-and-breastfeeding/  RCOG Decision aid: https://www.rcog.org.uk/globalassets/documents/guidelines/2021-02-24-combined-info-sheet-and-decision-aid.pdf  Recording vaccination during pregnancy:  Where woman is known to be pregnant when vaccinated (1st or 2nd dose):  Consenter should record pregnancy status on Pinnacle/NIVS, and Invite woman to register with the Yellow Card Vaccine Monitor  Where woman did not know she was pregnant when vaccinated, or became pregnant shortly after vaccination:  HCP who the pregnant women presents to should complete Inadvertent vaccination in pregnancy notification  Legal mechanism for administration:  PSD, PGD and NP
7.2	Breastfeeding	https://www.sps.nhs.uk/articles/using-covid-19-vaccines-in-breastfeeding-women/  Useful resources when consenting:  • PHE patient information leaflet: Women of childbearing age, currently pregnant or breastfeeding
7.3	Implications for fertility & IVF programmes	https://www.sps.nhs.uk/articles/using-covid-19-vaccines-in-women-of-child-bearing-potential/

## 8 Interactions

8.1	Vaccine interactions	https://www.sps.nhs.uk/articles/interactions-information-for-covid-19-vaccines/
8.2	Patient taking immunosuppressants	<ul> <li>https://www.sps.nhs.uk/articles/using-covid-19-vaccines-in-patient-taking-immunosuppressive-medicines/</li> <li>Scheduled to begin immunosuppressive therapy</li> <li>Treated with         <ul> <li>Chemotherapy</li> <li>Corticosteroids</li> <li>Rituximab (oncology)</li> <li>Rituximab (rheumatology)</li> <li>Multiple sclerosis</li> </ul> </li> </ul>

#### 8.3 Alcohol

Some news and social media have reported you should abstain from alcohol to boost your immune response to the vaccine. This is selective reporting from a statement from DrinkAware (a UK alcohol education charity).<sup>a</sup> Their detailed recommendations:

- Get vaccinated if you are offered a COVID-19 vaccine, regardless of whether you ever drink any alcohol or not.
- Heavy drinkers have a higher risk of becoming seriously ill with COVID-19 therefore please keep your appointment for vaccination if you are offered one
- There is no direct evidence that heavy or social drinking will affect your body's response to the COVID-19 vaccine
- It is possible, but not proven, that drinking alcohol, especially regular heavy drinking, can reduce your body's response to some vaccines. Therefore it is prudent for you not to drink any alcohol for a few days before, and for at least two weeks after, you've been vaccinated.

#### Summary:

- Receiving your COVID-19 vaccine without delay is important (regardless of whether you drink or not)
- You may like to reduce your alcohol consumption as this is generally good for your health and there is limited evidence that it might improve your body's response to the vaccine.

<sup>&</sup>lt;sup>a</sup> https://www.drinkaware.co.uk/news/drinkaware-issues-precautionary-advice-about-alcohol-and-the-covid-19-vaccine (18 January 2021)

## 9 Other questions

9.1	Implications for blood donation	Please wait 7 full days from your vaccine before donating on the 8th day. If you had side effects from the vaccine such as headache, temperature, aches and chills please wait 28 days from your recovery. <sup>a</sup>
		<sup>a</sup> https://www.blood.co.uk/news-and-campaigns/news-and-statements/coronavirus-covid-19-updates/

### 10 Management of patients recruited into trials

#### 10.1 COV002 (Oxford) trial

Participant need to unblind to understand their options<sup>4</sup>:

- https://apps.ovg.ox.ac.uk/login/
- Login is their participant number. Password is their DOB as an 8 digit number (DDMMYYYY)

Control arm (MenACWY vaccine)	<ul> <li>Receive national rollout vaccine as normal (2 doses of vaccine)</li> <li>A 2 week gap is recommended between the last dose of control vaccine and the national rollout vaccine</li> </ul>
One dose of ChAdOx1 vaccine (either low or standard dose)	<ul> <li>Receive one dose of national rollout vaccine</li> <li>A 3 week gap is recommended between the last dose of ChAdOx1 vaccine and the national rollout vaccine</li> </ul>
Two doses of ChAdOx1 vaccine (either low:low or low:standard)	No need to have the national rollout vaccine

Participants who were advised to not receive a booster dose of the trial vaccine should contact the site to discuss options before having a COVID-19 vaccine as part of the national rollout.

#### 10.2 COVAC1 (Imperial) trial

All participants should receive national rollout vaccine as normal (2 doses of vaccine). A 4 week gap is recommended between the last dose of COVAC vaccine and the national rollout vaccine.

#### 10.3 NOVOVAX trial

Participants are asked to contact the trials team to be unblinded before they make an appointment for a vaccine.

#### 10.4 ENSEMBLE2 trial (Janssen; Johnson & Johnson; Ad26.COV2.S)

Participants need to unblind to understand their options therefore are asked to contact their trials team. Evidence of unbinding is needed before national rollout vaccine should be given.

Control arm (placebo)	i. Enrol onto the ENSEMBLE2 open label crossover study (subject to trial protocol amendment), or ii. Receive national rollout vaccine as normal (2 doses of AZ/Pfizer/Moderna vaccine)
Ad26.COV2.S vaccine arm (1 or 2 doses)	<ul> <li>i. No national rollout vaccine (EMA has licensed the vaccine based on a single-dose regimen), or</li> <li>ii. Receive one dose of national rollout vaccine (anyone receiving a trial vaccine, is eligible for a single dose of national rollout vaccine, but the safety/efficacy of combining different regimens is not known). An 4 week gap is recommended between the last dose of Ad26.COV2.S vaccine and the national rollout vaccine.</li> </ul>

#### 10.5 Cov-Compare trial (Valneva; VLA2001)

Participants in the <u>over 30s cohort</u> need to unblind to understand their options, therefore are asked to contact their trials team. Evidence of unbinding is needed before national rollout vaccine should be given. Participants in the <u>under 30s cohort</u> do not require unblinding, as they will all have received the Valneva vaccine.

Valneva vaccine (VLA2001)	<ul> <li>Receive national rollout vaccine as normal</li> <li>A 2 week gap is recommended between the last dose of control vaccine and the national rollout vaccine</li> </ul>
One dose of AstraZeneca vaccine (AZD1222)	<ul> <li>Receive one dose of national rollout vaccine</li> <li>A 3 week gap is recommended between the last dose of AZD1222 vaccine and the national rollout vaccine</li> </ul>
Two doses of AstraZeneca vaccine (AZD1222)	No need to have the national rollout vaccine

#### 10.6 COM-COV2

Participants will be contacted by their trials team to discuss options. An additional dose is not clinically indicated, however may be useful for travel passports. Those wishing to receive this additional dose will be provided with a letter to give to their vaccination centre.

#### 10.7 Novavax study

Participants will be contacted by their trials team to discuss options. Those patients who require an additional dose will likely be booked into local vaccination hub (in Chel West).<sup>5</sup>

## 11 Vaccine brands available nationally and internationally

The table below lists vaccine manufacturers and associated vaccine names. It is intended to support pharmacy staff in identifying which vaccine a given patient has already been received.

When the vaccine is identified, follow Public Health England's advice relating to foreign vaccine administration (Appendix 1). <a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/1009174/COVID-19">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/1009174/COVID-19</a> vaccination programme guidance for healthcare workers 6 August 2021 v3.10.pdf

Manufacturer	Vaccines names
Sinovac Life Sciences Co., Ltd	Vero Cell <sup>7</sup> [be aware that another vaccine may also be called Vero Cell, see below]
(Beijing <sup>6</sup> )	CoronaVac <sup>8</sup>
	<ul> <li>Adsorbed COVID-19 (inactivated) Vaccine manufactured by Sinovac/Butantan Institute<sup>9</sup></li> </ul>
CureVac AG	CVnCoV <sup>7</sup>
	• CV07050101 <sup>10</sup>
Novavax CZ AS	• NVX-CoV2373 <sup>7</sup>
Russia's Gamaleya National Centre	Sputnik V <sup>7</sup>
of Epidemiology and Microbiology	Gam-COVID-Vac <sup>7</sup>
	• rAd26-S <sup>11</sup>
	• rAd5-S <sup>11</sup>
	Gam-COVID-Vac <sup>11</sup>
Pfizer-BioNTech	Comirnaty <sup>12</sup>
	Tozinameran <sup>13</sup>
	• BNT162b2 <sup>14</sup>
Janssen (also Johnson & Johnson <sup>15</sup> )	COVID-19 Vaccine Janssen <sup>12</sup>
	• Ad26.COV2.S <sup>16</sup>
	• JNJ-78436735 <sup>16</sup>
	• VAC31518 <sup>17</sup>
	Ad26COVS1 <sup>18</sup>

Moderna (also Takeda <sup>19</sup> )	COVID-19 Vaccine Moderna <sup>12</sup>	
	Spikevax <sup>1</sup>	
	• mRNA-1273 <sup>20</sup>	
	• TAK-919 <sup>19</sup>	
AstraZeneca (Institute of India	Vaxzevria <sup>12</sup>	
Covishield <sup>21</sup> )	COVID-19 Vaccine AstraZeneca <sup>12</sup>	
	ChAdOx1-S <sup>14</sup>	
	• AZD1222 <sup>22</sup>	
Sinopharm (China National	Inactivated COVID-19 vaccine BIBP <sup>23</sup>	
Pharmaceutical Group <sup>23</sup> ) –	BBIBP-CorV <sup>23,24</sup>	
Beijing <sup>6,24</sup>	PHE have advised that both Sinopharm vaccines should be manged in the same way.	
Sinopharm (China National	<ul> <li>Vero Cells<sup>25</sup> [be aware that another vaccine may also be called Vero Cell, see above and</li> </ul>	
Pharmaceutical Group) - Wuhan <sup>6,25</sup>		
	PHE have advised that both Sinopharm vaccines should be manged in the same way.	
CanSino Biologics	<ul> <li>Recombinant Novel Coronavirus Vaccine (Adenovirus Type 5 Vector)<sup>26</sup></li> </ul>	
	• Ad5-nCoV <sup>26</sup>	
	Convidecia <sup>27</sup>	
	PakVac <sup>28</sup>	
Bharat Biotech	Covaxin <sup>29</sup>	
	• BBV152 <sup>30</sup>	

The list of manufacturers was taken from the EMA website and the Public Health England 'COVID-19 vaccination programme Information for healthcare practitioners' document

The above list is not extensive and other vaccine are available in other countries, see below link for further information: <a href="https://covid19.trackvaccines.org/vaccines/">https://covid19.trackvaccines.org/vaccines/</a>

## **12 Document management**

This document is subject to constant review. If you identify any information that needs to be updated please contact <a href="mailto:admin.ncl-mon@nhs.uk">admin.ncl-mon@nhs.uk</a>.

## **13 Version history**

Date	Version	Amendments
10 Aug 2021	1.0	New document (merges three separate documents into one)
29 Oct 2021	1.1	Major revision of vaccine eligible section (2.4, Error! Reference source not found., 2.5, 2.6 and 2.7). R
		eference checks and minor edits throughout.

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