

To: CAHAN San Diego Participants

Date: March 1, 2021

From: Public Health Services

Health Advisory Update #26: Coronavirus Disease 2019 (COVID-19) Vaccine and Monoclonal Antibody Update

Key Messages

- COVID vaccine dose allocation may not reflect the amount requested by provider, as vaccine supply continues to be limited.
- The California Department of Public Health (CDPH) released <u>updated vaccine allocation guidance</u> with additional clarifications on eligibility for Phase 1A and defined eligibility for Phase 1B.
- Beginning February 27, all individuals in Phase 1B are eligible for vaccines, including workers in Education and Childcare, Emergency Services, and Food and Agriculture Sectors.
- Providers should monitor the Centers for Disease Control and Prevention (CDC) <u>Clinical Considerations</u> webpage for frequently updated guidance on COVID-19 vaccination.
- As per the <u>Food and Drug Administration</u>, undiluted frozen vials of the Pfizer vaccine can be safely transported and stored at in conventional pharmaceutical freezers -25°C to -15°C for up to two weeks.
- CDPH's vaccine provider enrollment site has been changed to myCAvax on February 27.
- Monoclonal antibody treatment is available at the <u>Monoclonal Antibody Regional Center (MARC)</u> for persons symptomatic with COVID-19 and at high risk for progression to severe disease.

Situation

• Vaccine Priorities Updates

- Vaccine supply continues to be limited and approved dose allocation may not reflect the amount requested by provider. All requests are reviewed, and vaccine is distributed with a focus on health equity and in line with recommendations set forth by the Public Health Officer, in consultation with the <u>County COVID-19</u> <u>Vaccine Clinical Advisory Group</u>. The County of San Diego (County) thanks all providers for their continued support in immunizing San Diegans with COVID-19 vaccines. The County intends to fulfill requests for vaccines as soon as supply is available from the State.
- California Department of Public Health (CDPH) has <u>clarified vaccine allocation guidance</u> to <u>include the</u> following workers in Phase 1A:
 - Workers in the Health Care and Public Health Sector who may come into direct contact with the COVID-19 virus through research, development, manufacture, or testing.
 - Workers who are manufacturing vaccine, therapeutics, devices, supplies or personal protective equipment supporting the COVID-19 response.
 - Family member caregivers of regional center consumers are eligible as healthcare providers for Phase 1A. Other family members within the same household not providing direct care do not qualify for Phase 1A [See CAHAN #25 for additional details on caregivers and handouts here in English and Spanish].

- o The following have been clarified as **not** included in Phase 1A:
 - Workers that manage health plans, billing, and health information (as opposed to administrative workers in clinical or other settings).
 - Workers supporting operations of outdoor recreational facilities that facilitate physically distanced personal health and wellness through outdoor exercise.
- All state and local clarifications for Phase 1A can be found here.
- Phase 1B fully opened on February 27 to also include essential workers at risk of exposure at work in the following sectors:
 - Workers at risk in any role in the <u>Emergency Services Sector</u> (e.g., law enforcement, fire and rescue services, emergency managers, security staff, animal control officers, workers in judicial or administrative facilities involved in the administration of justice).
 - Appointments exclusive to uniformed law enforcement officers will be organized by Scripps Health.
 - Persons at risk of exposure through their work in <u>childcare and education</u> settings include:
 - Staff members in Pre-kindergarten, elementary, middle, and high schools. This includes public, parochial, charter, and private schools.
 - The San Diego County Office of Education and the California Schools Voluntary Employees Benefits
 Association (VEBA) will exclusively schedule appointments for transitional kindergarten (TK)
 through 12th grade teachers and staff only through vebavaccinates.com.
 - Prioritization is by schools open and planning to open, then those closed, starting with those in the fourth quartile of the <u>California Healthy Places Index (HPI)</u>.
 - Childcare and institutions of higher education staff should go the County vaccination sites or superstations.
 - Formal and informal childcare workers, including day care providers.
 - Staff in colleges, universities, junior colleges, community colleges, and other postsecondary education facilities.
 - Staff in educational support services and administration.
 - Staff in technical and trade schools.
 - Any other workers involved in child and/or student care, including school bus drivers and monitors, crosswalk guards, etc.
 - Workers at risk in any role in the Food and Agriculture Sector (e.g., workers supporting groceries, pharmacies, convenience stores, restaurant carry-out and quick serve food operations, and other retail that sells food or beverage products, and food and beverage manufacturer employees).
 - For farm workers in fields and rural locations, CAL FIRE and Operation Collaboration will lead efforts to schedule remote vaccination events.
 - Those not covered by specific vaccination plans for their occupation should contact their primary care doctor or schedule an appointment at <u>vaccinationsuperstationsd.com</u>.
 - The County has developed materials to clarify acceptable documentation needed for those in <u>Emergency</u>
 Services, Childcare and Education, and Food and Agriculture.
 - CDPH <u>clarified vaccine allocation guidance</u> to **include** veterinary services employees in Phase 1B as part of food and agriculture.
- <u>CDPH announced</u> that beginning **March 15**, providers may use their clinical judgement to vaccinate individuals age 16-64 who are deemed to be at the very highest risk for morbidity and mortality from COVID-19 as a direct result of one or more of the severe health conditions included in this provider bulletin.

• Vaccination Guidance

- o Centers for Disease Control and Prevention (CDC) posted additional <u>Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States.</u>
- The Food and Drug Administration updated the <u>EUA Fact Sheet for Healthcare Providers</u> regarding storage of the Pfizer Vaccine. Undiluted frozen vials of the vaccine can be transported and stored at in conventional

pharmaceutical freezers -25°C to -15°C (-13°F to 5°F) for a period of up to two weeks as an alternative to the preferred storage in ultra-low temperature freezers between -80°C to -60°C (-112°F to -76°F).

- Asymptomatic, fully vaccinated (i.e., ≥2 weeks following receipt of the second dose in a 2-dose series, or ≥2 weeks following receipt of one dose of a single-dose vaccine) persons within 3 months following receipt of the last dose in the series will no longer require quarantine after an exposure to someone with COVID-19 except for patients or residents in inpatient or healthcare settings.
- Note that vaccinated inpatients and residents in healthcare settings should continue to quarantine following an exposure to someone with suspected or confirmed COVID-19.
- The local <u>Quarantine Order</u> has been updated to reflect this vaccine-related guidance, as well as the recent <u>CDC recommendation</u> **not** to quarantine those who have recovered from laboratory-confirmed SARS-CoV-2 infection if it is within the first 90 days of symptom onset or within the first 90 days of their first positive SARS-CoV-2 test result if they were asymptomatic during initial infection and have remained asymptomatic since the new exposure.
- Updates to CDC guidance on contraindications and precautions to mRNA COVID-19 vaccination:
 - Medically diagnosed allergy to polyethylene glycol (PEG), polysorbate, or another mRNA vaccine component, is a <u>contraindication to COVID-19 vaccination</u>.
 - Immediate allergic reactions to a vaccine or injectable therapy that contain multiple components including PEG, polysorbate, or another component of mRNA COVID-19 vaccines, but it is not known which component elicited the reaction, is a precaution.
 - Immediate allergic reaction to any other vaccine or injectable therapy not related to a component of mRNA COVID-19 vaccines or polysorbate is a precaution.
 - Delayed, local injection-site reactions after the first mRNA vaccine dose are neither a contraindication nor a precaution to receiving the second dose of mRNA COVID-19 vaccines.
- Additional information and updated recommendations for preventing, reporting, and managing mRNA COVID-19 vaccine administration errors and for timing of testing for tuberculosis infection are also provided in the <u>CDC update</u>.

Post Vaccination Symptoms versus Potential COVID-19 Infection

- As with other vaccines, COVID-19 vaccines can cause local reactions, hypersensitivity reactions, and systemic signs and symptoms (fever, fatigue, headache, chills, myalgia, and arthralgia).
 - Most systemic post-vaccination signs and symptoms are mild to moderate in severity, occur within the first three days of vaccination—most the day after vaccination, and resolve within 1-2 days of onset.
 - Symptoms are greater following the second dose, especially among younger persons compared to those
 >55 years of age. This means that the immune system is responding to the vaccine.
 - For details on reactogenicity, see Pfizer and Moderna COVID-19 vaccine trial data.
- o Local reactions should not require workup for COVID-19.
- Symptoms **not** associated with vaccination response include cough, shortness of breath, rhinorrhea, sore throat, or loss of taste or smell. These symptoms are indicative of COVID-19 or other infections.
- To aid in distinguishing systemic post-vaccination signs and symptoms among healthcare workers from those due to COVID-19 or other infections, CDC has posted <u>Post Vaccine Considerations for Healthcare Personnel</u>.
- For non-healthcare workers, CDC does not have post-vaccination guidance for those experiencing systemic signs and symptoms that overlap with COVID-19 infection. Providers are encouraged to use clinical judgment and consider these suggestions if the person has developed symptoms within 3 days of COVID-19 vaccination (day of vaccination is day 1) and not had an exposure to a person with suspected or confirmed COVID-19 in the preceding 14 days:
 - Vaccine recipients should self-isolate while they are experiencing these symptoms, plus 24 hours.
 - If the symptoms started 1-2 days after the first or second vaccine dose, **and** symptoms resolved within 72 hours of that dose **and** there are no other symptoms or signs of COVID-19 disease (e.g., loss of taste/smell; sore throat, cough, others), then this individual may end isolation 24 hours after the systemic side effects have abated.

■ If the symptoms did not start 1-2 days after the vaccine was administered **or** all symptoms did not resolve within 72 hours after starting, then do **not** attribute these symptoms to vaccine side effects. Continue isolation and evaluate the symptoms as if the individual may have COVID-19.

• COVID-19 Vaccine Provider Enrollment

- o CDPH's COVID-19 vaccine provider enrollment site has been upgraded to myCAvax beginning February 27th.
- o CalVax and COVIDreadi will no longer be in use.
- o Instructions for enrollment to provide COVID-19 vaccination is available here and FAQs about this name change are here.

• Monoclonal Antibody Regional Center

- O Monoclonal antibodies have been shown in clinical trials to reduce COVID-19-related hospitalization and emergency room visits. Bamlanivimab, a monoclonal antibody therapy from Eli Lilly, has been authorized for emergency use by FDA to treat mild to moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk for progressing to severe COVID-19 and/or hospitalization.
- Medically eligible, symptomatic COVID-19 positive patients whose COVID-19 symptoms have developed within the last 10 days can receive monoclonal antibody treatment at the Monoclonal Antibody Regional Center (MARC).
- Treatment will be provided at no cost to the patient, regardless of health insurance or immigration status.
 The MARC is available to those who live or work in San Diego County. The MARC is open 7 days a week from 8:00am to 8:00pm and is located at the Palomar Medical Center Downtown at 555 East Valley Parkway, Escondido, CA 92025. Appointments are required.
- o To refer patients, complete the <u>referral form</u> (using Chrome, Firefox, or Safari) and either call (619) 685-2500 or fax the completed form to (760) 739-2851 to schedule a patient's appointment.
- o Persons 65 years and older may call (619) 685-2500 with questions or to schedule an appointment directly.
- Please provide your patient with an <u>FDA mAb EUA Fact Sheet for Patients</u>, <u>Parents and Caregivers</u> (<u>Spanish</u>)
 as well as a completed copy of the referral form (if available) to bring to his or her appointment.
- Additional patient and provider resources are available on the <u>MARC webpage</u>, or email <u>COVIDtreatment@sdcounty.ca.gov</u> with questions.

Actions Requested

- 1. Providers administering vaccines should:
 - o Continue to vaccinate patients in Phase 1A and those <u>65 years and older</u> in addition to the essential sectors newly eligible in Phase 1B.
 - o Be aware of Phase 1A additional clarifications on eligibility for Phase 1A and 1B.
- 2. All providers should stay up to date on CDC's <u>Interim Clinical Considerations for Use of mRNA COVID-19</u> Vaccines Currently Authorized in the United States (last updated 02/10/2021).
- 3. Use <u>myCAvax</u> for vaccine provider enrollment/management.
- 4. Refer <u>medically eligible</u> patients who are symptomatic with COVID-19 and at high risk for progression to severe COVID-19 to the <u>Monoclonal Antibody Regional Center</u> for treatment.
- 5. Providers should:
 - Report vaccine-related adverse events to the Vaccine Adverse Event Reporting System (VAERS)
 - o Strongly encourage vaccine recipients to enroll in <u>V-safe</u> for active monitoring.

CAHAN San Diego

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