Checklist for COVID-19 vaccination with Comirnaty® for children aged 5 to 11

Specifically before 1st injection

Administrative clarification
- Clarify how the person to be vaccinated is insured (compulsory health insurance/insurance card)
- Verify the identity of the person to be vaccinated

Clarification of the indication for vaccination
- Vaccination recommended for all children aged 5 to 11 whose parents/guardians wish them to be vaccinated. In particular for:
  1. Children who are already severely impaired because of a chronic illness, in order to if possible prevent any additional illness/infection.
  2. Close contacts (household members) of people who cannot get protection with the vaccination, for example because of immunodeficiency.
- Based on the EKIF/FOPH vaccination recommendation

Clarification of contraindications
- Known hypersensitivity to ingredients of the vaccine (particularly polyethylene glycol [PEG]/macrogol, tromethamine [trometamol, [TRIS]])
- For further specification of relative or absolute contraindications of an allergic or non-allergic nature, see the vaccination recommendation for mRNA vaccines chapter 2.3.1, chapter 10.5 and appendix 2.

Vaccination not recommended at this time
- Without a specific recommendation (chronic illness/contact with immunodeficient people), it is not recommended for recovered healthy children to be vaccinated against COVID for the time being (in principle there is no contraindication for vaccination after recovery in this age group).

Clarification of a reservation and special precautions
1. Generally known hypersensitivity reactions/allergies?
2. Immune suppression (congenital, acquired, immunosuppressive treatment including cancer under treatment) → generous indication for vaccination by a specialist and appropriate patient information

Before 2nd injection/3rd injection

Adverse vaccination reactions (AVRs) after first injection?
- Document using IT tool.
- Severe or unexpected adverse vaccination reactions must be reported to Swissmedic by the healthcare professional who identifies the AVR.
- If an anaphylactic reaction occurs after the first vaccine dose, the second dose is temporarily contraindicated and requires clarification and confirmation by a specialist in allergology and clinical immunology. See also the explanation in the vaccination recommendations chapter 10.5.1: www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen
- The appearance of a “COVID arm” is not a contraindication to a second vaccine dose.

AVR reporting to Swissmedic
- Via link to the “ELViS” reporting system in the IT tool

Clarification of indication for 2nd injection/COVID-19 medical history
2nd vaccine dose is recommended 4 weeks after 1st dose.
- For recovered children with a specific recommendation (chronic illness or contact with immunodeficient people), one single dose is recommended.
- Confirmed SARS-CoV-2 infection:
  a) Proof if before 1st vaccine dose: PCR/antigen test/anti-spike or anti-nucleocapsid IgG; self-tests are not valid
  b) Proof if after 1st vaccine dose: PCR/antigen test/anti-nucleocapsid IgG; self-tests are not valid
  → Vaccination with only one vaccine dose recommended if at least 4 weeks between 1st dose of vaccine and confirmed infection.
- Exception (1): anti-nucleocapsid IgG after 1st injection: no minimum interval necessary
- Exception (2): For severely immunodeficient children aged 5 to 11 years, the attending specialist should decide whether a further vaccine dose is indicated in the case of a confirmed infection and one vaccine dose after a serological test. (Cf. vaccination recommendation)

Clarification of indication for 3rd vaccine dose
- Severely immunodeficient children aged 5 to 11 receive 2 vaccine doses (or, in the case of a confirmed infection, 2 antigen exposures) for basic immunisation and a subsequent serology test. Depending on the serology test, a third dose of vaccine (off label) can be administered; cf. vaccination recommendations.
### Procedure for 1st injection/2nd injection/3rd injection

| Current health | • Clarify current general health and decide: Can the vaccination proceed today?  
• Acute febrile illness? Postpone vaccination until the symptoms have subsided. |
| Briefing of parents/guardians | • Do the parents/guardians and the child to be vaccinated have any questions?  
• Have the parents/guardians read the information material (e.g. FOPH fact sheet/information sheet)?  
• Mention possible AVRs, and particularly possible allergic reactions and signs of myocarditis and pericarditis, such as chest pain, shortness of breath or palpitation. |
| Parents/guardians | • Obtain oral consent to the vaccination from the parents/guardians on the basis of an informed decision and to the electronic recording of the vaccination in the data entry system.  
• Make written note of consent to vaccination in vaccination data sheet/IT tool. |
| Completing the vaccination data sheet/recording in IT tool | • Enter the relevant details of the person to be vaccinated in the IT tool. |
| Preparing the vaccine | • See manufacturer’s information sheet: [www.bbraun.ch/kit-covid19](http://www.bbraun.ch/kit-covid19) / [www.comirnatyeducation.ch](http://www.comirnatyeducation.ch)  
• Do not shake; only invert several times; do not move unnecessarily  
• If possible, the stopper should be pierced only once with the needle and the movement of the needle should be minimised. |
| Administering the vaccine | • See manufacturer’s information sheet: [www.bbraun.ch/kit-covid19](http://www.bbraun.ch/kit-covid19) / [www.comirnatyeducation.ch](http://www.comirnatyeducation.ch)  
• i.m. in deltoid muscle  
• Basic immunisation: 2 vaccine doses at an interval of 4 weeks recommended. For exceptions see: “clarification of indication for 2nd vaccine dose”  
• For anticoagulated patients: the vaccination is also injected intramuscularly, and subsequent firm compression is important ([www.bag.admin.ch/impfplan](http://www.bag.admin.ch/impfplan) (in German, French and Italian)). |

### After all vaccine doses

| Explain how to behave in the event of an AVR | • Explain that any serious or unexpected AVRs should be reported by the parents/guardians to a doctor/pharmacist/vaccination site.  
• If applicable, give them a contact number. |
| Explain how to behave generally after injection | • Continue to follow rules of social distancing and hygiene, with the exception of private meetings between fully vaccinated persons (waiver of mask and distance possible).  
• For severely immunodeficient children, a determination of the anti-spike IgG is recommended 4 weeks after the 2nd dose (see chapter 3.3, vaccination recommendation).  
• If symptoms consistent with COVID-19 occur, do a test (vaccination not 100% effective).  
• In fully vaccinated persons, contact and travel quarantine as well as certain other health-related measures at the border may be waived for a period of 12 months after the last dose if the current rules allow (according to cantonal directive and information on the FOPH website: [Travel (admin.ch)](http://Travel.admin.ch)).  
• No minimum interval to other vaccinations is necessary.  
• If a booster vaccination becomes necessary after basic immunisation, information will be provided. |
| Issuing a vaccination certificate | • Issue the client with a vaccination certificate from the IT tool or make an entry in the vaccination record.  
• If possible, stamp and signature of the person administering the vaccine.  
• Affix/enter LOT number in the vaccination certificate.  
• Inform on the vaccination certificate and issue on request: [COVID certificate (admin.ch)](http://COVIDertificate.admin.ch). |
| Arrange follow-up appointment (if needed) | • Note appointment at the same vaccination site in the IT tool.  
• Give appointment card if appropriate.  
• Give client information sheet with instructions on behaviour after the vaccination. |
| Observation time after injection | • Trained healthcare personnel and an emergency kit including adrenaline must be available in case an allergic reaction takes place.  
• In particular, monitor children who have already had problems directly after vaccination, e.g. circulatory problems.  
• All people who are vaccinated should remain on the premises for at least 15 minutes after the vaccination. If the 1st dose was well tolerated it is sufficient to monitor for 5 minutes after the second. |

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[www.foph-coronavirus.ch/vaccination](http://www.foph-coronavirus.ch/vaccination)