# Checklist for vaccination with mRNA vaccines for people aged over 12

## 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 persons from 5 years of age including pregnant women from the 2nd trimester of pregnancy
- Based on the current federal vaccination commission (CFV)/FOPH vaccination recommendation for mRNA vaccines
  
  (see separate document for the checklist for children aged 5 to 11).
  

## 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 allergic or non-allergic nature, see section 2.3.1, section 10.5 and appendix 2 of the [vaccination recommendation](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen).

## Vaccination currently not recommended
- Small children under age 5

## Clarification of special precautions
1. Generally known hypersensitivity reactions/allergies?
   - → broad indication for vaccination following thorough assessment of benefits and risks by a specialist and appropriate patient information
2. Immune suppression (congenital, acquired, immunosuppressive treatment including cancer under treatment)
   - → broad indication for vaccination following thorough assessment of benefits and risks by a specialist and appropriate patient information
3. For pregnant women in the 1st trimester: Vaccination is in principle possible and can be carried out at the woman's request.
4. People under 30 are preferentially recommended to be vaccinated with Comirnaty® (for explanations, see section 10.4 of the [vaccination recommendation](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen)).

## Before 2nd injection / 3rd injection / booster

### Adverse vaccine reactions (AVRs) after first injection?
- Document using IT-Tool
- Severe or unexpected adverse vaccine 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 2nd dose of the same mRNA vaccine is contraindicated for the time being and requires clarification and confirmation by a specialist in allergology and clinical immunology. Please refer also to the explanations in section 10.5.1 of the [vaccination recommendation](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen).
- The appearance of a “COVID arm” is not a contraindication to a second vaccine dose.
- In case of myocarditis/pericarditis after the 1st vaccination dose, the 2nd dose should only be administered after consultation with a specialist after an individual assessment of the risks and benefits.

### 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 recommended 4 weeks after 1st vaccine dose.
- **Confirmed SARS-CoV-2 infection:**
  a) **Proof before 1st vaccine dose:** PCR/antigen test/anti-spike or anti-nucleocapsid IgG; self-tests are not valid.
  b) **Proof 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.

### Clarification of indication for 3rd vaccine dose
- As part of the basic immunisation for people with severe immunodeficiency (see section 3.3. of the [vaccination recommendation](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen)).

### Clarification of indication for booster
- **From 4 months** after complete basic immunisation (i.e. 2 vaccine doses spaced 28 days apart or one vaccine dose in combination with a confirmed SARS-CoV-2 infection at least 4 weeks apart). If a confirmed SARS-CoV-2 infection occurs within **4 months** after completion of the basic immunisation, a booster vaccination is recommended **4 months** after this infection. **CAUTION:** A confirmed infection up to 4 months after basic immunisation is considered equivalent to a booster; no booster is therefore necessary (for possible exceptions see [Recommendation for booster vaccination](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen - Covid-19 Impfung), also on [www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen).
- Everyone aged 16 years or above (including pregnant women from the 2nd trimester and women who are breastfeeding)
- Seriously immune deficient people aged 16 and over who have had three doses of mRNA vaccine for initial immunisation are recommended to have a booster vaccination off label from 4 months after the last dose (see [Recommendation for booster vaccination](http://www.bag.admin.ch/covid-19-dokumente-gesundheitsfachpersonen)).
• Note: A booster vaccination earlier than 6 months after completion of initial immunisation takes place outside Swissmedic authorisation (off label).¹
• People vaccinated with a dose of COVID-19 Vaccine Janssen® are recommended to have a booster with a dose of an mRNA vaccine (off label) after 4 months. (The proviso is that vaccination with an mRNA vaccine is not contraindicated and is not rejected for other reasons.)

**Procedure for 1st injection / 2nd injection / 3rd injection / booster**

**Current health**
- Clarify current general health and decide: Can the vaccination proceed today?
- Acute febrile illness (fever)? Postpone vaccination until the symptoms have subsided.

**Client briefing**
- Does the person to be vaccinated have any questions?
- Has he/she read the information material (e.g. FOPH fact sheet/information sheet)?
- Mention possible AVR, particularly possible allergic reactions and signs of myocarditis and pericarditis, such as chest pain, shortness of breath or palpitations.

**Client consent**
- Obtain oral consent to the vaccination from the person to be vaccinated on the basis of an informed consent 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.
- Capacity to consent: For adolescents aged 12 years and over who consult without a legal representative, the capacity to consent must be assessed on an individual basis.
- If the person is incapable of giving consent, the consent must be obtained by his/her legal representative.

**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**
- Possible procedures for the withdrawal of 6 doses of Comirnaty®
- Do not shake; only invert several times; do not move unnecessarily.
- If possible, the stopper should only be pierced once with the needle and the movement of the needle should be minimised.
- Booster vaccination: Spikevax® recommended at a reduced dose of 50 µg.

**Administering the vaccine**
- i.m. in deltoid muscle
- Basic immunisation: Both vaccination doses with the same vaccine, spaced 28 days apart recommended. For exception see: «Clarification of indication for 2nd vaccine dose»
- Booster vaccination: where possible with the same vaccine as used for basic immunisation if available.
- Caution: people under 30 should preferably receive the Comirnaty® vaccine. This also applies to people who have already received Spikevax®. However, vaccination with Spikevax® is not contraindicated.
- 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**
- Tell the client to report any serious or unexpected AVR to a doctor/pharmacist/vaccination site.
- If applicable, give the client 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) as well as events with a certificate (according to the organizer’s instructions).
- For severely immunodeficient persons, a determination of the anti-spike IgG is recommended 4 weeks after the 3rd dose (see section 3.3 of the 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 border sanitary measures may be waived for a period of 12 months after the last dose if the current rules allow this (according to cantonal directive and information on the FOPH website: [Travel (admin.ch)](http://Travel.admin.ch)).
- No minimum interval to other vaccines is necessary.

**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://COVID.certificate.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.
- Monitor particularly those who had experienced problems directly after the injection, e.g. circulatory problems.
- All people who are vaccinated should remain on the premises for at least 15 minutes after the first vaccination. If the first dose is well tolerated it is sufficient to monitor for 5 minutes after the second dose.

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¹ If the professional responsible bases their choice of vaccine on the FOPH vaccination recommendations, they can prove that they have observed the recognised rules of medical and pharmaceutical science and have thus complied with the due diligence rules under the Therapeutic Products Act. If the professional responsible also complies with the duties of care arising from the treatment contract (including the duty to inform, explain and document), they cannot usually be held liable.