



## COVID-19 Vaccines Approved for Use in Canada: mRNA vaccines

COVID-19 Formulations	Moderna (Spikevax™)	Moderna (Spikevax™)	Moderna (Spikevax™)	Moderna (Spikevax™) Bivalent	Pfizer (Comirnaty™)	Pfizer (Comirnaty™)	Pfizer (Comirnaty™) Bivalent	Pfizer (Comirnaty™)	Pfizer (Comirnaty™) Bivalent
Vaccine Type	mRNA	mRNA	mRNA	mRNA bivalent	mRNA	mRNA	mRNA bivalent	mRNA	mRNA bivalent
Cap and Label Colour									
	Blue cap & Purple label	Red cap & Light blue label	Red cap & Light blue label	Blue cap and Green label (+Bivalent)	Maroon cap and label	Orange cap and label	Orange cap and label (+Bivalent)	Grey cap and label	Grey cap and label (+Bivalent)
Formats available	Multidose 10 doses/vial	Multidose 20 doses/vial	Multidose 10 doses/vial	Multidose 5 doses/vial	Multidose 10 doses/vial	Multidose 10 doses/vial	Multidose 10 doses/vial	Multidose 6 doses/vial	Multidose 6 doses/vial
Authorized Age Group	6 months to less than 5 years	6 to less than 12 years	12 years and older	18 years and older	6 months to less than 5 years	5 to less than 12 years	5 to less than 12 years	12 years and older	12 years and older
Dose and Injection Volume	0.25ml 25 mcg	0.25ml 50 mcg	0.5ml 100 mcg	0.5ml 50 mcg	0.2ml 3 mcg	0.2ml 10 mcg	0.2ml 10 mcg	0.3ml 30 mcg	0.3ml 30 mcg
Dilution	None	None	None	None	2.2ml/vial	1.3ml/vial	1.3ml/vial	None	None
Routine schedule (primary series)	2 Doses given 8 weeks apart	2 Doses given 8 weeks apart	2 Doses given 8 weeks apart	Not for use in primary series	3 doses, 8 weeks between each dose.	2 Doses given 8 weeks apart	Not for use in primary series	2 Doses given 8 weeks apart	Not for use in primary series.
Booster Dose	N/A	N/A	50 mcg * (6 months after primary series) **	6 months after primary series**	N/A	6 months after primary series**	6 months after primary series**	6 months after primary series**	6 months after primary series **
Date Authorized (primary dose)	July 14/22	Mar 17/22	Aug 27/21	N/A	Sept 9/22	Nov 19/21	N/A	March 16/22	N/A
Date Authorized (booster dose)	N/A	N/A	Nov 12/21	Sept 1/22	N/A	Aug 19/22	Dec 9/22	March 16/22	Oct 7/22
Tariff Code	8261	8293	8252	8266	8263	8292	8221	8251	8267
Product Monograph	For links to the Covid-19 vaccine product monographs and resources refer to: <a href="https://www.gov.mb.ca/health/healthcareprofessionals/information">Province of Manitoba   Information for Health Care Professionals (gov.mb.ca)</a>								

\*People who are immunocompromised, living in a PCH/EPH, 70 years and older or who received 2 non-Health Canada approved vaccines are recommended to have a first booster dose of 100mcg.

\*\*Recommended interval for optimum immune response is 6 months after primary series. The minimum authorized interval is 3 months.

COVID-19 Vaccines Approved for Use in Canada: non-mRNA vaccines		
COVID-19 Formulations	Novavax (Nuvaxovid™)	Janssen (Jcovden™)
Vaccine Type	Protein Subunit	Viral Vector
Cap Colour	 Blue Cap	 Blue Cap
Formats Available	Multidose 10 doses/vial	Multidose 5 doses/vial
Authorized Age Group	12 years and older	18 years and older
Dose and Injection Volume	0.5ml 5 mcg	0.5ml 5 × 10 <sup>10</sup> virus particles/0.5 mL
Dilution	None	None
Routine schedule (primary series)	2 Doses given 8 weeks apart	1 dose
Booster Dose	<b>18 years and older:</b> 0.5 ml (5 mcg) 6 months after primary series (see ** note in table above)	0.5 mL
Date Authorized (primary dose)	Feb 17/22	Mar 5/21
Date Authorized (booster dose)	Nov. 17/22	May 12/22
Tariff Code	8291	8255

Influenza and Pneumococcal Vaccines Approved for Use in Canada: 2022-2023					
Formulations	Fluzone® Quadrivalent	FluLaval® Tetra	Alfurria® Tetra	Fluzone® High Dose	Pneumovax®23 (Pneu-P-23)
Vaccine Type	IIV4-SD	IIV4-SD	IIV4-SD	IIV4-HD	Pneumococcal polysaccharide 23-valent
Formats Available	0.5 mL single dose prefilled syringe <i>or</i> 5.0 mL multidose vial (10 doses/vial)	5.0 mL multidose vial (10 doses/vial)	0.5 mL single dose prefilled syringe <i>or</i> 5.0 mL multidose vial (10 doses/vial)	0.7 ml Single dose prefilled syringe	0.5 ml single dose prefilled syringe <i>or</i> 0.5 ml single dose vial
Authorized Age Group	6 months and older	6 months and older	<u>5 years and older</u>	65 years and older	65 years and older
Injection Volume	0.5ml	0.5ml	0.5ml	0.7ml	0.5ml
Dose Schedule	<b>*1 or 2 doses:</b> children 6 months to less than 9 years  <b>1 dose:</b> ≥ 9 years	<b>*1 or 2 doses:</b> children 6 months to less than 9 years  <b>1 dose:</b> ≥ 9 years	<b>**1 or 2 doses:</b> children <u>5 years</u> to less than 9 years  <b>1 dose:</b> ≥ 9 years	1 dose	1 dose
Product Monograph	<a href="#">Fluzone PM</a>	<a href="#">FluLaval PM</a>	<a href="#">Afluria PM</a>	<a href="#">High Dose PM</a>	<a href="#">Pnuemo PM</a>
Tariff Code	8791	8791	8791	8775	8961

\* Children 6 months to less than 9 years of age who have NOT previously been vaccinated against influenza should receive a second dose of 0.5 mL after an interval of at least 4 weeks.

\*\*Children 5 years to less than 9 years of age who have NOT previously been vaccinated against influenza should receive a second dose of 0.5 mL after an interval of at least 4 weeks.