

Vaccine Clinic Resource for Immunizers				
Title:	COVID-19 Vaccine Pfizer COMIRNATY™ Quick Reference Guide			
Formulations	Monovalent- Infant, Pediatric and Adult Bivalent- Pediatric and Adult			
Effective Date:	October 7, 2022 (Bivalent formulation), October 21, 2022 (Infant formulation),			
	December 1, 2022 (12+ monovalent formulation) December 9 (Pediatric bivalent)			
Approver:	Final			

Disclaimer: this Quick Reference is not intended to replace other product specific vaccine references. The document is intended as a quick reference for frequently referred to information. Please refer to the product monograph and other Pfizer COMIRNATYTM specific resources for all current and complete information.

COVID-19 Vaccine Resources:

Product Monographs: Province of Manitoba | Resources for Health Care Providers- product monographs (gov.mb.ca)

Storage and Handling: storage-handling-chart.pdf (gov.mb.ca)

Eligibility Criteria

For the most up to date information on primary series and booster dose eligibility criteria refer to Province of Manitoba | Eligibility Criteria (gov.mb.ca).

Manitoba COVID-19 mRNA Immunization Schedule:

Province of Manitoba | COVID-19 mRNA Immunization Schedule (gov.mb.ca)

Canadian Immunization Guide:

For additional guidance on special populations: <u>COVID-19 vaccine</u>: <u>Canadian Immunization Guide- Vaccination of Specific Populations - Canada.ca</u>
For information on allergies/contraindications/precautions: <u>COVID-19 vaccine</u>: <u>Canadian Immunization Guide - Contraindications and Precautions - Canada.ca</u>

Fact Sheets:

For information on vaccine risk and intended benefits, refer to the Province of Manitoba | Resources for the Public COVID-19 | Fact Sheets (gov.mb.ca)

Summary of document tables:

- Table 1: Recommendations on COVID-19 Immunization for the Primary Series
- Table 2: Recommendations on COVID-19 Immunization Booster doses
- Table 3: Additional Primary Series Dose Recommendations: Immunocompromised (moderately to severely)
- Table 4: Additional Dose Recommendations: non-Health Canada Approved COVID-19 Vaccines



Monovalent Pfizer COMIRNATY™ Infant formulation: 6 months to less than 5 years of age **Storage and Handling Product Recommendations** Approved Presentation Administration Intervals Regimen: 3 dose series Recommended Maroon cap and label Thaw time: Route: Intramuscular Primary Interval: 2° to 8°C (Refrigerator): Series 8 weeks between Vial volume: 0.4 ml up to 2 hours/carton. **Dose:** 0.2ml (3 mcg) doses (multidose vial) 15° to 25° C (Room Pediatric Intramuscular needle length selection Ages 6 months to under 5 years NACI recommends children 6 months to less than 5 years should temperature): **Authorized Interval: Requires dilution** 30 min start and finish the primary series with the same product. If mixed Between dose 1 and 2: (0.9% Sodium Chloride SITE NEEDLE AGE products are used, the Pfizer interval schedule should be used (3 21 days Injection, USP 2.2 mL Discard time: doses for immunocompetent, 4 doses for immunocompromised). **LENGTH** required for dilution) Undiluted: Infants (6 to Anterolateral 1" Minimum Interval: 12 hours at room An additional dose is required for those moderately to severely 12 months) thigh Between dose 1 and 2: After dilution, one vial immunocompromised (See Table 3) temperature. Young 5/8" to 1" Deltoid 19 days contains 10 doses of 0.2 ml. children (12 Diluted: **Children living in First Nation communities:** months to 3 Anterolateral At least 1" Between dose 2 and 3: **Inspect vials:** After Refrigerate or store at room Moderna 25mcg is the preferred vaccine due to being a 2-dose years) thigh dilution, the vaccine will be temperature for maximum 12 52 days series instead of a 3-dose series. However, Pfizer 3mcg can also Children 3+ 5/8" to 1" a white to off-white hours. Deltoid be used for this age group. suspension. Inspect vials to confirm there are no Once drawn up, administer particulates and no immediately and no later Note: Concurrent administration of COVID-19 and than 12 hours after dilution. discolouration is observed. non-COVID-19 vaccines (including live and non-live vaccines) is authorized for all age cohorts. Not approved for this age group Not applicable **Booster** Low dead-volume syringes Dose and/or needles should be Do not refreeze once thawed used to extract 10 doses from a single vial.

Product is latex and preservative free

Potential allergens: Polyethylene glycol (PEG), Tromethamine (trometamol or Tris)

Individuals who have a known allergy to Tromethamine (trometamol or Tris), should **not** be immunized with COVID-19 vaccines containing Tromethamine (trometamol or Tris).

Individuals who report an allergy to contrast material (CT dye), including gadolinium, can be immunized with vaccines containing Tromethamine (trometamol or Tris). They should be observed for 30 minutes post immunization.

NOTE: If more than the expected number of doses are drawn from a vaccine vial (greater than 6 or greater than 10 doses) depending on formulation, vaccine may be administered, provided the full dose can be drawn from one vial (do not pool vaccine from multiple vials).



Monovalent Pfizer COMIRNATY™ Pediatric formulation: 5 years to less than 12 years of age

Product Recommendations		Approved	Presentation	Storage and Handling	Administration		
		Intervals					
Primary	Regimen: 2 dose series	Recommended	Orange cap and label	Thaw time:	Route: Intramuscular		
Series		Interval:		2° to 8°C (Refrigerator):			
	Dose : 0.2mL (10 mcg)	8 weeks	Vial volume: 1.3 ml	up to 4 hours/carton.			
			(multidose vial)	<u>15° to 25° C (Room</u>			
	Pfizer is the recommended mRNA vaccine for the primary series	Authorized Interval:		temperature):	AGE	SITE	NEEDLE
	for individuals 5 to less than 30 years.	21 days	Requires dilution (0.9%	30 min			LENGTH
			Sodium Chloride Injection,		5 years and	Deltoid	1"
	An additional dose is required for those moderately to severely	Minimum Interval:	USP 1.3 mL required for	Discard time:	older		
	immunocompromised (See Table 3)	19 days	dilution)	<u>Undiluted:</u>			
				12 hours at room			
			After dilution, one vial	temperature.	Optional needle length:		
Booster	Regimen: 1 dose	Recommended	contains 10 doses of 0.2 ml.		5/8" to 1 ½"		
Dose		Interval:		<u>Diluted:</u>			
	Dose : 0.2mL (10 mcg)	6 months	Inspect vials: After	Refrigerate or store at room			
			dilution, the vaccine will be	temperature for maximum 12	weight, age and muscle mass.		
	The <u>pediatric Pfizer bivalent</u> formulation is recommended for the	Minimum Interval:	a white to off-white	hrs.			
	booster dose in this age group and should be used as the default	6 months	suspension. Inspect vials to		Optional site:		
	booster option unless the monovalent is specifically requested.		confirm there are no	Once drawn up, administer	Anterolateral this	gh can be used if	deltoid site is no
			particulates and no	immediately and no later	an available site (ie: multiple inject	tions).
	Entire cohort eligible, but recommended for those at high risk of		discolouration is observed.	than 12 hours after dilution.			
	severe outcomes from COVID-19 infection.						
			Low dead-volume syringes				
	Recommendations on COVID-19 Immunization Booster Doses: for		and/or needles should be	Do not refreeze once thawed			
	further information about booster dose recommendations and		used to extract 10 doses				
	administration. (See Table 2)		from a single vial.				

Product is latex and preservative free

Potential allergens: Polyethylene glycol (PEG), Tromethamine (trometamol or Tris)

Individuals who have a known allergy to Tromethamine (trometamol or Tris), should **not** be immunized with COVID-19 vaccines containing Tromethamine (trometamol or Tris).

Individuals who report an allergy to contrast material (CT dye), including gadolinium, can be immunized with vaccines containing Tromethamine (trometamol or Tris). They should be observed for 30 minutes post immunization.

NOTE: If more than the expected number of doses are drawn from a vaccine vial (greater than 6 or greater than 10 doses) depending on formulation, vaccine may be administered, provided the full dose can be drawn from one vial (do not pool vaccine from multiple vials).



Product	Recommendations	Approved Intervals	Presentation	Storage and Handling	Administratio	n		
Primary	Regimen: 2 dose series	eries Recommended Grey cap and label Thaw		Thaw time:	Route: Intramus	Route: Intramuscular		
Series		Interval:		2° to 8°C (Refrigerator):				
	Dose : 0.3ml (30 mcg)	8 weeks	Vial volume: 2.25 ml	up to 4 hours/carton.				
			(6 doses of 0.3ml in a	<u>15° to 25° C (Room</u>	AGE	SITE	NEEDLE	
	Pfizer is the recommended mRNA vaccine for the	primary series Authorized Interval:	multidose vial)	temperature):			LENGTH	
	for individuals 5 to less than 30 years	21 days		30 min	5 years and	Deltoid	1"	
			Does NOT require dilution		older			
	An additional dose is required for those moderate	ly to severely Minimum Interval:						
	immunocompromised (See Table 3)	19 days	Inspect vials to confirm	Discard time:				
			there are no particulates	12 hours at room	Optional needle length:			
		and no discolouration is	temperature after first	5/8" to 1 ½"				
Booster	Regimen: 1 or 2 doses*	Recommended	observed.	puncture.	Clinical judgement should be used when			
Dose		Interval: 6 months			needle length for IM injections. Consider clier			
	Dose : 0.3ml (30 mcg)				weight, age and	muscle mass.		
	*5 1.: 60/45 40 1 : ::	Minimum Interval:	Low dead-volume syringes	Do not refreeze once thawed				
	*Recommendations on COVID-19 Immunization		and/or needles should be		Optional site:			
	for further information about booster dose recom		used to extract 6 doses from			gh can be used if o		
	including eligibility for an additional dose. (See Ta	ble 2)	a single vial.		available site (ie:	multiple injection	ns).	

Product is latex and preservative free

Potential allergens: Polyethylene glycol (PEG), Tromethamine (trometamol or Tris)

Individuals who have a known allergy to Tromethamine (trometamol or Tris), should **not** be immunized with COVID-19 vaccines containing Tromethamine (trometamol or Tris).

Individuals who report an allergy to contrast material (CT dye), including gadolinium, can be immunized with vaccines containing Tromethamine (trometamol or Tris). They should be observed for 30 minutes post immunization.

NOTE: If more than the expected number of doses are drawn from a vaccine vial (greater than 6 or greater than 10 doses) depending on formulation, vaccine may be administered, provided the full dose can be drawn from one vial (do not pool vaccine from multiple vials).



		Approved Presentation Storage and Handling Intervals		Administration			
Primary Series	Not for use as primary series	Not applicable	Orange cap and label Label states "Original and Omicron BA.4/5."	Thaw time: 2º to 8ºC (Refrigerator): up to 4 hours/carton.	Route: Intramuscular		
Booster Dose	Regimen: 1 dose Dose: 0.2ml (10 mcg)	Recommended Interval: 6 months Minimum Interval: 6 months	Vial volume: 1.3 ml (multidose vial) Requires dilution (0.9%	15° to 25° C (Room temperature): 30 min Discard time: Undiluted:	AGE 5 years and older	SITE Deltoid	NEEDLE LENGTH 1"
	Entire cohort eligible, but <u>recommended</u> for those at high risk of severe outcomes from COVID-19 infection.		Sodium Chloride Injection, USP 1.3 mL required for dilution) After dilution, one vial contains 10 doses of 0.2 ml.	12 hours at room temperature. Diluted: Refrigerate or store at room temperature for maximum 12 hrs.	- Jangers Jangers and		
Recommendations on COVID-19 Immunization Booster Doses: for further information about booster dose recommendations and administration. (See Table 2)			Inspect vials: After dilution, the vaccine will be a white to off-white suspension. Inspect vials to confirm there are no particulates and no discolouration is observed.	Once drawn up, administer immediately and no later than 12 hours after dilution. Do not refreeze once thawed	needle length for weight, age and root optional site: Anterolateral this an available site (muscle mass. gh can be used if	[:] deltoid site is no
			Low dead-volume syringes and/or needles should be used to extract 10 doses from a single vial.				

Product is latex and preservative free

Potential allergens: Polyethylene glycol (PEG), Tromethamine (trometamol or Tris)

Individuals who have a known allergy to Tromethamine (trometamol or Tris), should **not** be immunized with COVID-19 vaccines containing Tromethamine (trometamol or Tris).

Individuals who report an allergy to contrast material (CT dye), including gadolinium, can be immunized with vaccines containing Tromethamine (trometamol or Tris). They should be observed for 30 minutes post immunization.

NOTE: If more than the expected number of doses are drawn from a vaccine vial (greater than 6 or greater than 10 doses) depending on formulation, vaccine may be administered, provided the full dose can be drawn from one vial (do not pool vaccine from multiple vials).



Bivalen	Product Recommendations Product Recommendations		ge and older					
Product			Approved Intervals	Presentation	Storage and Handling	Administratio	n	
Primary Series	Not for u	se as primary series	Not applicable	Grey cap and Label Label states "Original and Omicron BA.4/5."	Thaw time: 2° to 8°C (Refrigerator): up to 6 hours/carton.	Route: Intramuse	cular	
Booster Dose	Regimen:	1 or 2 doses*	Recommended Interval: 6 months	Vial volume: 2.25 ml (6 doses in	15° to 25° C (Room temperature): 30 min	AGE	SITE	NEEDLE LENGTH
Dose	Dose : 0.3	Dose : 0.3ml (30mcg)	Minimum Interval: 6months	a multidose vial) Does NOT require dilution	Discard time: 12 hours at room temperature after	5 years and older	Deltoid	1"
	* Recommendations on COVID-19 Immunization Booster Doses: for further information about booster dose recommendations including eligibility for an additional dose (See Table 2)		Low dead-volume syringes and/or needles should be used to extract 6 doses from a single vial.	first puncture. Thawed vials and filled syringes can be handled in room light conditions	, ,			
				Inspect vials to confirm there are no particulates and no discolouration is observed.	Do not refreeze once thawed		gh can be used if multiple injectior	deltoid site is not an ns)

Product is latex and preservative free

Potential allergens: Polyethylene glycol (PEG), Tromethamine (trometamol or Tris)

Individuals who have a known allergy to Tromethamine (trometamol or Tris), should **not** be immunized with COVID-19 vaccines containing Tromethamine (trometamol or Tris).

Individuals who report an allergy to contrast material (CT dye), including gadolinium, can be immunized with vaccines containing Tromethamine (trometamol or Tris). They should be observed for 30 minutes post immunization.

<u>NOTE</u>: If more than the expected number of doses are drawn from a vaccine vial (greater than 6 or greater than 10 doses) depending on formulation, vaccine may be administered, provided the full dose can be drawn from one vial (do not pool vaccine from multiple vials).



For the most up to date information on primary series and booster dose eligibility criteria refer to Province of Manitoba | Eligibility Criteria (gov.mb.ca)

TABLE 1: Recommendations on COVID-19 Immunization for the Primary Series:

- Everyone 6 months of age and older are eligible to receive a primary series.
- The date the first vaccine is administered is considered "day 0" when counting minimum intervals. Interruption of a vaccine series resulting in a greater than recommended interval between doses does not require restarting the series.
- Children who will turn from 4 to 5 years of age between doses in the vaccination series should receive their age-appropriate dose at the time of the vaccination and the interval between doses is determined by the child's age at the start of the vaccination series.
- Individuals age 5 to less than 30 years are recommended to receive Pfizer for their primary series to minimize the rare potential risk of myocarditis/pericarditis. (Note: this risk is unknown in the 5-11-year age group, but has been documented in the 12-30-year age group).
- Preferably, a person who received a first dose of an mRNA vaccine (Moderna or Pfizer) should be offered the same mRNA vaccine for their second dose.
 - o If the same mRNA vaccine is not available or unknown, another mRNA vaccine can be considered interchangeable and should be offered.
 - o If a different mRNA vaccine is given as a second dose with appropriate spacing, both doses are considered valid and the series complete.
- While the **recommended** interval for the primary series, of 8 weeks is preferred, if a person presents for an immunization and would otherwise not return within that recommended interval, the immunizer may proceed with administering the subsequent dose if the **authorized minimum** interval has passed, provided the first dose product received was an mRNA vaccine (Moderna or Pfizer).
 - o The minimum interval of 19 days is not recommended; however, would be considered a valid dose in PHIMS.
- Individuals who are moderately to severely immunocompromised are recommended to receive an additional dose in the primary series (see Table 3). This requires a prescription if given outside of a physician or pharmacists office and must be given at least 28 days after the second dose.
- Bivalent products have been authorized for use as a booster dose and are not to be used for a primary series.

TABLE 2: Recommendations on COVID-19 Immunization Booster doses:

- Everyone 5 years of age and older, who has completed their primary series should be offered a fall 2022 booster dose.
- A bivalent Omicron-containing mRNA COVID-19 vaccine is the preferred booster product (there is no evidence that one bivalent vaccine is more effective than the other). The monovalent products can be administered as a booster dose to individuals who request it.
- The recommended interval for booster doses is 6 months between the most recent dose (primary series, previous booster dose) and a recommended booster as vaccine effectiveness increases with a longer duration between doses.
- It is recommended for individuals to wait 6 months since their last COVID-19 infection. At minimum, they need to be fully recovered and completed their isolation period before receiving a booster dose.
- The following individuals are eligible to receive a spring booster dose in 2023: Individuals 65 years and older; Residents of Long-Term Care (LTC), Assisted Living (ASL) or supportive housing facilities; Adults 18 years and older who are moderately to severely immunocompromised; and Indigenous individuals 45 years and older regardless of place of residence.
- For individuals not covered in the spring 2023 booster dose criteria listed above, health care providers may offer a bivalent vaccine to individuals who are at high risk of severe infection and have previously received a monovalent booster during the fall 2022 campaign. This requires a prescription if given outside a physician's office and must be given a minimum of 6 months after the last dose.
- It is expected that there will be a fall booster program in 2023. It is important to take into consideration that receiving a spring 2023 booster could affect the timing of eligibility for a fall 2023 booster dose as a 6-month interval between doses is anticipated.



TABLE 3: Additional Primary Series Dose Recommendations: Moderately to Severely							
Immunocompromised ¹							
Cohort	Product	Dose	Recommended interval				
6 months to less than 5 years	Moderna (25mcg) preferred** Blue cap	3 dose series	At least 28 days between all doses in a 3 or 4 dose series. Considered part of the primary series.				
	Pfizer (3mcg) Maroon cap	4 dose series					
5 to less than 12 years	Pfizer (10mcg) Orange cap	3 dose series	At least 28 days after their second dose. Considered part of the primary series.				
12 years and older	Pfizer (30mcg) Grey cap	3 dose series	At least 28 days after their second dose. Considered part of the primary series.				

^{**}A 3-dose series of Moderna/Spikevax TM (25mcg) vaccine should be preferentially offered to this age group for the extended series due to the shorter 3 dose regimen, instead of 4 doses of Pfizer/Comirnaty TM (3mcg).

Moderna (100mcg) may be offered (based on clinical judgement) as a primary series to individuals age 12 and older and as a booster dose to individuals at increased risk of severe illness.

NOTE: For eligible individuals 18 years and older unwilling or unable to receive an mRNA vaccine, Novavax/Nuvaxovid can be used for the additional dose.

¹For the purposes of COVID-19 vaccine recommendations, the following individuals are considered moderately to severely immunocompromised due to a medical condition and/or treatment:

- are receiving active chemotherapy (or immunotherapy) for cancer;
- have received a solid organ transplant and are currently receiving chemotherapy or other immunosuppressive therapy;
- were born with moderate or severe dysfunction of their immune system;
- are living with untreated or advanced HIV-AIDS; or
- are taking certain medications that severely affect the immune system.

The following people should talk to their doctor to see whether they are considered to be immunocompromised:

- receiving hemodialysis or peritoneal dialysis;
- are on the list to receive a solid organ transplant; or
- have a ventricular assist device (VAD).

TABLE 4: Additional Dose Recommendations for Individuals who received 1 or 2 non-Health Canada Approved COVID-19 Vaccines							
Cohort	Product	Dose	Recommended Interval				
6 months to less than 5 years	Moderna (25mcg) preferred	Blue cap Administer one additional dose	At least 28 days after their last dose to complete their primary series.				
	Pfizer (3mcg) Maroon cap	Administer 2 additional doses	pa., servee				
5 to less than 12 years	Pfizer (10mcg) Orange cap	Administer one additional dose	At least 28 days after their last dose to complete their primary series.				
12 years and older	Pfizer (30mcg) Grey cap	Administer one additional dose	At least 28 days after their last dose to complete their primary series.				

Manitoba Health accepted primary series combinations:

- Two mRNA vaccines (Pfizer or Moderna)
- Two AstraZeneca vaccines
- AstraZeneca and one dose of an mRNA vaccine (Pfizer or Moderna)
- One dose of Janssen
- Three non-Health Canada Approved vaccines
- One or two non-Health Canada Approved Vaccines and one dose of an mRNA Vaccine (Pfizer or Moderna)
- For moderately to severely immunocompromised
 - Three doses (any combination of AstraZeneca, Pfizer and/or Moderna)
- Children 6m to less than 5 years
 - o 3 doses of a non-Health Canada approved vaccine.