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වෙබ් අඩවිය	) www.health.gov.lk
இணையத்தளம்	)
website	)



Bed word	)EPID/400/n-CoV/Vaccine
මගේ අංකය	)EPID/400/II-Co v/ vaccine
எனது இல	)
My No.	)
ඔබේ අංකය	)
உமது இல	)
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<b>දිනය</b> திகதி	20/01/2022
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## සෞඛ්‍ය අමාත්‍යංශය சுகாதார அமைச்சு Ministry of Health

## DDG/NHSL

Provincial Directors of Health Services,
Regional Directors of Health Services,
Directors/ Teaching, Provincial General, General, Base hospitals,

## Second dose vaccination campaign for age group 16-19 years: COMIRNATY - Covid 19 mRNA Vaccine (Nucleoside modified -Pfizer BNT)

Second dose of COMIRNATY Covid 19 mRNA (Nucleoside modified-Pfizer BNT) vaccine implementation will commence and continue from 21/01/2022 for children aged 16 to 19 years for those who have received 1<sup>st</sup> dose during the 1<sup>st</sup> dose campaign started on 21/10/2021 and completed 3 months from the date of the 1<sup>st</sup> dose.

The Ministry of Health has taken the decision to vaccinate children who have completed 16 years, until up to 20 years for the 2<sup>nd</sup> dose against COVID-19 on completion of 3 months from the 1<sup>st</sup> dose.

The vaccine which will available for the 2<sup>nd</sup> dose to vaccinate them is COMIRNATY, Covid 19 mRNA Vaccine (Nucleoside modified-Pfizer BNT).

## > School children: all children who were in year 11,12,13,14 in schools by 21/10/2021

- Vaccination, for students from 16 years of age including all students who were in the 11<sup>th</sup> year in the school, planned to sit for the G.C.E. Ordinary Level in 2021 (postponed the examination to 2022) to students in the 14<sup>th</sup> year in school, planned to sit for the G.C.E Advanced Level for the 2<sup>nd</sup> attempt in 2021 (postponed the examination to 2022), and received the 1<sup>st</sup> dose during the 1<sup>st</sup> dose campaign and elapsed 3 months from the 1<sup>st</sup> dose are eligible to receive the 2<sup>nd</sup> dose throughout the country.
- Echool authorities will assist to get down all students still in the school enrolment registers, considered as who were studying in 11<sup>th</sup> to 14<sup>th</sup> year in schools during the 1<sup>st</sup> dose campaign and elapsed 3 months from the 1<sup>st</sup> dose.
- Out of school children: Children who were completed 16 years of age (to the start date of the 1<sup>st</sup> dose vaccination campaign), until up to 20 years of age and received the 1<sup>st</sup> dose vaccination from the school or outside the school are eligible to receive the 2<sup>nd</sup> dose on completion of 3 months from the 1<sup>st</sup> dose. Date of birth 21<sup>st</sup> October 2005 to 22<sup>nd</sup> October 2001.

- All MOOH are advised to carry out the <u>school-based and out of school vaccination</u> programme for the 2<sup>nd</sup> dose of Covid-19 vaccination in parallel.
- ➤ In addition to MOH office and school based vaccination delivery strategy, <u>Directors of all hospitals from the level of Base hospital and above are advised to conduct vaccination clinics</u>, <u>emphasis on weekends</u>.
- ➤ All MOOH are advised to make available Covid-19 vaccination to Children during the central clinic on Saturdays for the 2<sup>nd</sup> dose completion.
- During the 2<sup>nd</sup> dose campaign if any eligible missed children come for the 1<sup>st</sup> dose vaccination, advise to vaccinate and give an appointment for the 2<sup>nd</sup> dose in 3 months.
- ➤ Hospitals which considered at the level of Base hospitals and above are advised to vaccinate for referrals from schools and community clinics for those who require specialists' attention during the vaccination.
- ➤ It is advised to vaccinate eligible age categories irrespective of the place of residence, school attending and place of the 1<sup>st</sup> dose of vaccination.
- Advise strictly to adhere to all the precautions and vaccination principles as practiced during other school-based vaccination clinics (as with HPV vaccination and dTd vaccination).
  - o Eligibility screening needs to be done by a Medical Officer
  - Emergency tray with all essential medicines is advised to be ready at all times and advised to check at every morning according to the guidelines given by the Epidemiology Unit.
  - o Transport arrangements needs to be planned and ready to be used in any emergency AEFI situation after the initial management.
  - Adhere to all infection prevention precautions to ensure protection from Covid-19 during vaccination sessions.
- ➤ All hospital Directors and MOOH are advised to ensure opening a vaccine vial in the presence of 6 persons at MOH offices and in hospitals in all possible instances to minimise the vaccine wastage.
  - o otherwise need to join them to the nearest vaccination centre with proper communication with relevant staff at those stations, to ensure vaccination facilities are available to receive.
- > It is essential to minimize the vaccine wastage at all costs.
- ➤ It is advised to request minimum required vaccine stocks with the plan to get down additional stocks as with the requirement to minimize the wastage.
- ➤ It is advised to request vaccines through the Regional Epidemiologists as practiced for previous vaccination campaigns.
- ➤ The vaccines taken out from the Ultra-Low Temperature (ULT) freezer (from -70°C) will not be able to re-freeze in ULT freezer.
- > Vaccines supplied to the RMSD, MOH offices and hospitals should be stored only in the 20-80C in the Ice Lined Refrigerator (ILR), adhering to the national vaccine storage guidelines issued by the Epidemiology Unit.

- Even though ULT freezer (-70°C) facilities available in anywhere in any districts, Comirnaty-Pfizer vaccine issued after the Epidemiology Unit cold stores should not be stored at ULT freezer as it is transported in 2°-8°C.
- Advised strictly to follow the COMIRNATY, Covid 19 mRNA (Nucleoside modified -Pfizer BNT) vaccination guidelines issued on 05/07/2021 by the Epidemiology Unit, Ministry of Health find in www.epid.gov.lk for vaccine storage, vial preparation, administration, prepare, follow up and surveillance of Adverse Events Following Immunization(AEFI). (Only deviation is administration of a single dose for this age group as with the decision for the date)
- ➤ Consent for vaccination form for 16-18 year age group has to be provided by a parent or guardian and attached herewith (Annexure 1)
- ➤ Consent form for 18–19 year age group will be the same consent form used for adult vaccination. It needs to be completed and signed before the vaccination. (Annexure 5 of the main guidelines COMIRNATY-Covid 19 mRNA Vaccine, Nucleoside modified -Pfizer BNT, issued on 05/07/2021, available on <a href="https://www.epid.gov.lk">www.epid.gov.lk</a>)
  - Advise to get the parent/guardian signature where possible on the same consent form even for 18-19 year age group.
  - o In school vaccination session, the authentication needs to get from the school authorities.
  - o In MOH office and hospital vaccination for missed children, authentication needs to be taken from the Medical Officer on duty in the vaccination clinic
- Each vial of COMIRNATY, Covid 19 mRNA (Nucleoside modified -Pfizer BNT) has 6 doses of 0.3 ml per dose to vaccinate (follow the guidelines issued on 05/07/2021 by the Epidemiology Unit, Ministry of Health).
- Need to maintain regular communications with the Consultant Epidemiologists at the Epidemiology Unit, Provincial and District Consultant Community Physicians and Regional Epidemiologists in respective districts on the vaccination process to receive required vaccine supply and technical guidance to ensure minimum wastage, storage and achieving maximum coverage of eligible children for their protection from Covid-19.
- ➤ MOOH and hospital directors/ responsible focal persons in the hospital are responsible for the vaccine stock management to minimize the wastage:
  - All COMIRNATY, Covid 19 mRNA (Nucleoside modified -Pfizer BNT) vaccine stocks receiving to the MOH office or hospital need to be stored in the <u>ILR/refrigerator</u>, marked clearly and stored separately according to received date, as separate supplied stocks will be expired in 30 days after taking out from the ULT.
  - o Need to closely monitor until complete the vaccination from initial supply of vaccines, on "1st-received-1st-use" basis to ensure all received vaccines will be used within 28 days from the receipt date (at MOH and at hospitals).
  - Should not keep vaccines until 28 days without utilized and in 14 days of the receipt need to identify whether there are any excess vaccine doses remaining. In such situations, required to communicate with the Regional Epidemiologist in the district

- and with Consultant Epidemiologists at the Epidemiology Unit immediately for required redistributions without delay.
- o If any remaining unopened vials are returned after the clinic session, need to store it separately in a "<u>return unopen vaccine vial container</u>", <u>separately labelled and stored in the ILR and need to first use returned unopened vials first on the next vaccination day.</u>
- > Regional Epidemiologists are advised to closely monitor,
  - COMIRNATY, Covid 19 mRNA (Nucleoside modified -Pfizer BNT) vaccine stocks at the RMSD and should not exceed >30 days on receiving vaccines supplied at one lot.
  - On receiving vaccines at different dates, the date received needs to be clearly labelled, stocks on separate dates need to be separately stored and should not request additional vaccine stocks until district vaccines stocks distributed to MOH offices and hospitals are used within 30 days of receipt to the RMSD from the Epidemiology Unit.
  - Option of re-distribution of vaccines within institutions needs to be considered at all instances before re-order vaccines from the main stores of the Epidemiology Unit.
- ➤ MOOH and hospital directors/ responsible focal persons in the hospital are responsible for vaccination clinic organization:
  - Prevent unnecessary gathering in and outside the school clinics and clinic premises.
  - o Seating arrangements needs to be planned to prevent overcrowding.
  - o More than one registration desks should be arranged for registration procedure to prevent standing time and queues.
  - Need to deploy adequate trained and competent staff for vaccination (vaccine vial preparation and vaccination): refer to the poster attached for relevant steps of vaccine vial preparation (Annexure 2) and videos available at the google drive (<a href="https://drive.google.com/drive/folders/1kvudLAUbxNKv3Gmt5mnjkckibrJFXM5h">https://drive.google.com/drive/folders/1kvudLAUbxNKv3Gmt5mnjkckibrJFXM5h</a> ?usp=sharing) shared through emails.
  - o Identify vaccination data entry teams to deploy at the school vaccination centre, MOH office and hospitals to enter vaccination data in to the vaccine tracker.
- ➤ The individual vaccination data should be entered in to the web based "Vaccine tracker" system.
  - Vaccination data for the vaccine tracker for above 18 year persons can be entered using their National Identity card.
  - Other children National Identity Card (NIC) number to be entered to the vaccine tracker;
    - If the child is 16 years of age and above and having a NIC
    - Those who are not having a NIC advised to enter the parent/guardian NIC, enter the mother/father/guardian NIC number followed by a hyphen "-" and then "C" to indicate the "child" and then order of the child in the family.eg-If the child is the second child of the mother,

UID is: 778260893V-C2 or 197782600893-C2

At the end of each day, total number vaccinated needs to be provided to the Epidemiology Unit, copying to Regional Epidemiologist in respective districts.

If you need any further clarification, please contact the Chief Epidemiologist of the Epidemiology Unit. Additional resource materials can find on the website <a href="www.epid.gov.lk">www.epid.gov.lk</a>.

Thank you,

Dr. Asela Gunawardena Director General of Health Services Dr. ASELA GUNAWARDENA

Director General of Health Services Ministry of Health

"Suwasiripaya"

385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10.

Cc:

- i. Hon. Minister of Health
- ii. Secretary, Ministry of Health
- iii. Additional Secretary (Public Health Services)
- iv. Deputy Director General (PHS) -1
- v. Deputy Director General (MS)
- vi. Chief Epidemiologist
- vii. Director/MCH/FHB
- viii. Provincial and district CCPs
- ix. Regional Epidemiologists
- x. MOO/MCH