

## **Vaccination Guide for Co-Administration of Seasonal Influenza Vaccine and COVID-19 Vaccines at Same Visit**

### **Before Administering Seasonal Influenza Vaccines (SIV) and COVID-19 Vaccine**

1. Healthcare personnel please check the following:
  - a. Identity of the client;
  - b. Whether the client is eligible to receive SIV under VSS 2023-24;
  - c. Client's history of receiving 2023-24 SIV;
  - d. Whether the client is due to have COVID-19 vaccine;
  - e. History of COVID-19 vaccination;
  - f. History of any adverse reaction after COVID-19 vaccination; and
  - g. History of COVID-19 infection.
2. Healthcare personnel should obtain client's consent to have SIV and COVID-19 vaccination at the same visit. For client who is mentally incapacitated persons or minors under 18 years old, the healthcare personnel should obtain a signed written Consent Form for COVID-19 vaccination. Blank Consent Form for COVID-19 vaccination can be found at [https://www.covidvaccine.gov.hk/pdf/Consent\\_Form\\_for\\_COVID19\\_Vaccination\\_ENG.pdf](https://www.covidvaccine.gov.hk/pdf/Consent_Form_for_COVID19_Vaccination_ENG.pdf)
3. Healthcare personnel should go through with the client on the contents of COVID-19 vaccine factsheet and 2023-24 SIV pamphlet, allow questions and answer enquiries, conduct health assessment, check for any contraindications and special precautions, assess the suitability to receive SIV and COVID-19 vaccines at the same visit, and handle enquiries. This ensures the client does not have any contraindication to SIV and COVID-19 vaccination and is fit to have SIV and COVID-19 vaccination at the same visit.

Healthcare personnel should allow adequate time for client to read through the COVID-19 vaccine factsheet and 2023-24 SIV pamphlet, and have ticked the consent box on the COVID-19 vaccine factsheet if the client has no contraindication to COVID-19 vaccine and consent to it.
4. Healthcare personnel inform the client on the adverse reactions of SIV and COVID-19 vaccination and advise client to observe for 15 minutes after vaccination.

### **Vaccine Administration**

5. Before administering the vaccines, vaccinator should check client's identity, obtain informed consent of SIV and COVID-19 vaccination, check client's history of COVID-19 vaccination and 2023-24 SIV, and check whether client has any COVID-19 infection previously.
6. Vaccinator should verify the following as shown on eHS(S) and after verification tick the check box on eHS(S) for record:

- a. The identity of the vaccine recipient has been verified;
  - b. The vaccine recipient has read and understood the information in the Vaccination Fact Sheet for COVID-19 vaccine as documented above, including contraindications (and possible adverse events) of COVID-19 vaccination and agree to receive the documented COVID-19 vaccine. The vaccine recipient have had the opportunity to ask questions and all of his/her questions were answered to his/her satisfaction. The vaccine recipient also fully understood his/her obligation and liability under this consent form and the Statement of Purpose of Collection of Personal Data;
  - c. Suitability for vaccination has been confirmed with reference to previous COVID19 vaccination record (if any);
  - d. The vaccine recipient consent to the administration of COVID-19 Vaccination under the COVID-19 Vaccination Programme; and the access and use by Department of Health and the relevant organizations collaborated with the Government (including the University of Hong Kong) of his/ her clinical data held by the Hospital Authority and the relevant private healthcare facilities and healthcare professionals, for the purpose of continuously monitoring the safety and clinical events associated with COVID-19 Vaccination by the Department of Health insofar as such access and use are necessary for the purpose; and
  - e. If the recipient is not legally capable of giving consent to the administration of the vaccine, either a person who is legally capable of giving the relevant consent on the recipient's behalf or decision of vaccination is made considering the vaccination is necessary and in the best interest of the vaccine recipient by registered medical practitioner.
7. Should the vaccine recipient consent for joining eHealth, the vaccinator should tick the check box for enrolment. Recipient's consent to enrol in eHealth is optional.
  8. Before administering the vaccines, vaccinator should perform hand hygiene and check the vaccines for any irregularity, e.g. damage, contamination, expiry date. Exposing the vaccines to disinfectant should be avoided.
  9. The SIV and COVID-19 vaccine should not be mixed in the same syringe. Use separate syringes for the 2 vaccines. Shake well before use.
  10. The vaccines should be administered immediately after opening.
  11. Vaccinator should perform 3 checks and 7 rights with another healthcare personnel. Checking of vaccines and rights of medication administration should be adopted, including:
    - a. 3 checks:
      - when taking out the vaccine from storage;
      - before preparing the vaccine; and
      - before administering the vaccine
    - b. 7 rights:
      - The right client;
      - The right vaccine or diluent;
      - The right time (e.g. correct age, correct interval, vaccine not expired);
      - The right dosage (Confirm appropriateness of dose by using current drug insert as reference);

- The right route, needle length and technique;
- The right site; and
- The right documentation (e.g. Document the name of recipient, vaccine provider, vaccine type/ name and date of vaccination on the vaccination card.)

- Vaccinator should instruct the client to pull up his/her sleeve and expose his/her deltoid region of one side of the upper arm. If necessary, healthcare personnel should assist the client in pulling up his/her sleeve and perform hand hygiene afterwards.
- Vaccinator should use a new alcohol swab to disinfect the site of injection (which is the centre of the deltoid region of one side of the upper arm), and allow the site to DRY completely before vaccination.
- Vaccinator should remove the packaging of the vaccine if necessary. Shake well before use.
- COVID-19 vaccine** should be administered to client before SIV.
  - For CoronaVac vaccine only:  
To minimize spillage of CoronaVac vaccine component to environment, the needle should remain inside the vial throughout the whole withdrawal procedure, including during expel of air bubbles from the syringe.
  - For COVID-19 vaccine:  
To avoid inadvertent intravascular administration, please aspirate before injection of COVID-19 vaccine by pulling back on the syringe plunger after needle insertion but before injection. If blood is noticed in the hub of the syringe, the needle should be withdrawn immediately. Please explain to the vaccine recipient before discarding the needle and syringe including vaccine contents into the sharp box. A new needle and syringe with vaccine will need to be prepared and used.
- After the disinfected site is dry, vaccinator should perform aspiration and ensure no blood is aspirated before injecting the appropriate dose of COVID-19 vaccine into the muscle of the client's upper deltoid in one side of his/her arm. Refer to Point 15b on the management if blood is noticed in the hub of the syringe.
- After injection, vaccinator should withdraw the needle and apply light pressure to the injection site with a piece of dry sterile non-woven ball/gauze to stop bleeding.
- Vaccinator should instruct client to gently apply pressure gently for 1 to 2 minutes over the site of injection or till bleeding stops.
- Do not recap the needle. The used syringe and uncapped needle should be discarded directly into sharps box.
- Vaccinator should then prepare SIV vaccination for the client.
- Vaccinator should instruct the client to pull up his/her sleeve of **another arm** and expose his/her deltoid region of the upper arm. If necessary, healthcare personnel should assist the client in pulling up his/her sleeve and perform hand hygiene afterwards.
- Vaccinator should use a new alcohol swab to disinfect the site of injection (which is the centre of the deltoid region of another upper arm), and allow the site to DRY completely before vaccination.
- Vaccinator should remove the packaging of SIV if necessary. Shake well before use.
- After the disinfected site is dry, vaccinator should inject the appropriate dose of SIV into the muscle of the client's another arm's upper deltoid.

25. After injection, vaccinator should withdraw the needle and apply light pressure to the injection site with a piece of dry sterile non-woven ball/gauze to stop bleeding.
26. Vaccinator should instruct client to gently apply pressure gently for 1 to 2 minutes over the site of injection or till bleeding stops.
27. Do not recap the needle. The used syringe and uncapped needle should be discarded directly into sharps box.
28. Vaccinator should advise client to observe 15 minutes in the clinic after vaccination.
29. After vaccination, vaccinator should perform hand hygiene and document the SIV and COVID-19 vaccination record in appropriate electronic system and records. Please mark sure the respective site of SIV and COVID-19 vaccination should be documented properly that facilitate the further management if adverse reaction occur after vaccination.
30. Vaccinator should then print out client's COVID-19 vaccination record, check the information on the printed COVID-19 vaccination record with client to ensure the information is correct, and give the printed COVID-19 vaccination record to the client.

#### **After Administering Seasonal Influenza Vaccines (SIV) and COVID-19 Vaccine**

31. Client should be instructed to stay at clinic for 15 minutes to observe for any adverse reaction. If adverse reaction happens during observation, healthcare personnel should manage according to the existing practice.
32. Client could leave the clinic if no adverse reaction after 15-minute observation.

#### **Management of Adverse Events Following Immunisation (AEFI)**

33. Adverse event following immunisation (AEFI) is defined as any untoward medical occurrence which follows immunisation and which does not necessarily have a causal relationship with the usage of the vaccine.
34. Vaccinator should follow relevant sections of the Doctors' Guide in monitoring and management of AEFIs:
  - a. AEFI related to SIV: [https://www.chp.gov.hk/files/pdf/vssdg\\_ch5\\_appendix\\_f.pdf](https://www.chp.gov.hk/files/pdf/vssdg_ch5_appendix_f.pdf)
  - b. AEFI related to CoronaVac: [https://www.chp.gov.hk/files/pdf/vssdoctorsguide\\_covid19\\_sinovac.pdf](https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_sinovac.pdf) (see Sections 6.9, 8.1 and 8.2)
  - c. AEFI related to BioNTech: [https://www.chp.gov.hk/files/pdf/vssdoctorsguide\\_covid19\\_bnt\\_pilot.pdf](https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf) (see Sections 6.9, 8.1 and 8.2)