Doctors' Guide

for the Coronavirus Disease 2019 (COVID-19) Vaccination Programme at Non-clinic Setting and the School Outreach

(as at **28 November 2025**)

Section 10 of this Doctors' Guide is on COVID-19 Vaccination Programme - at Non-Clinic Setting. Organisers of outreach vaccination can be organisations, community groups, companies, schools, etc).

The VSS School Outreach Programme (matching by Education Bureau) is integrated into the COVID-19 Vaccination Programme at Non-Clinic Setting starting from 23 August 2022.

mRNA vaccines can only be provided by doctors enrolled in Private Clinic COVID-19 Vaccination Station (PCVS)

(https://www.chp.gov.hk/files/pdf/list_pcvs_covid_eng.pdf). Please note that PCVS doctors cannot provide mRNA vaccines to persons below 12 years old, except the designated PCVSs.

Section 10

10 VSS non-clinic setting

Please note that this section should be read together with other sections of the Doctors' Guide for the Coronavirus Disease 2019 (COVID-19) Vaccination Programme at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic COVID-19 Vaccination Station (PCVS) - mRNA vaccines (https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf).

10.1 Administrative procedures required of the doctor

- 10.1.1 The VSS doctor should have enrolled into the COVID-19 Vaccination Programme at Non-Clinic Setting by returning the prescribed form and providing a designated practice for submitting COVID-19 reimbursement claims for outreach vaccination activities.
- 10.1.2 VSS doctors and vaccination teams should liaise with the activity organiser for the

arrangement of the outreach vaccination activity, including but not limited to date, time, choice of venue, venue set up, workflow, infection control measures, crowd control, clinical waste handling, facilities and other preparation work.

- 10.1.3 VSS doctors may provide the "Guideline for outreach organisers"

 (https://www.chp.gov.hk/files/pdf/covid19vss_guidelinesforschooloutreach_chi.pd

 f_) and

 (https://www.chp.gov.hk/files/pdf/covid19vss_guidelinesforschooloutreach_eng.p

 df) to the activity organisers (e.g. organisations, companies, schools, etc) to facilitate preparation.
- 10.1.4 Once the plan of vaccination activity is confirmed with the activity organiser, the doctor should submit the completed Notification for COVID-19 Outreaching Vaccination at Non-clinic Setting (Annex A) to the PMVD by email (covid19_vss@dh.gov.hk) at least 14 days prior to the vaccination activity. Please state clearly the type of vaccine to be used in the activity on the Notification Form.
- 10.1.5 Staff of CHP may randomly select activities to conduct onsite inspection of the services provided.
- 10.1.6 CHP would notify Environmental Protection Department (EPD) the time and venue of the vaccination activity at non-clinic setting using the Notification for COVID-19 Outreaching Vaccination at Non-clinic Setting. EPD may conduct surprise inspections on outreach activity for compliance to the Waste Disposal (Clinical Waste) (General) Regulation in regards to clinical waste management.
- 10.1.7 Resources and websites:
 - (a) Agreement https://www.chp.gov.hk/files/pdf/agreement_vss_covid19_nonclinic.pdf
 - (b) Doctors' Guide: https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf
 - (c) Guideline for outreach organisers (e.g. organisations, companies, schools, etc):
 (https://www.chp.gov.hk/files/pdf/covid19vss_guidelinesforschooloutreach_chi.pd_f) and
 (https://www.chp.gov.hk/files/pdf/covid19vss_guidelinesforschooloutreach_eng.p

df).

- (d) User Manual of eHealth System (Subsidies) [eHS(S)] for COVID-19 Vaccination https://www.ehealth.gov.hk/en/covidvaccine/ehs.html
- (e) Login the eHS(S) to record the COVID-19 vaccination: https://apps.hcv.gov.hk/HCSP/login.aspx?lang=en
- (f) COVID-19 vaccination programme: https://www.chp.gov.hk/tc/features/106934.html

10.2 Reimbursement level

10.2.1 Please see relevant Agreement terms and conditions

10.3 Choice of vaccination venue

- 10.3.1 The VSS doctor and outreach team should confirm the feasibility and practicability on the chosen venue for conducting outreach vaccination, e.g. no restrictions on the venue's Terms of Use to conduct outreach vaccination.
- 10.3.2 The vaccination venue should be safe, well lit, well-ventilated and clean. Adequate and separate areas should be arranged as appropriate for:
 - (a) Registration;
 - (b) Information provision and waiting;
 - (c) Preparation of vaccine and administration of vaccination;
 - (d) Observation after vaccination; and
 - (e) Sick bay for emergency treatment.
- 10.3.3 The observation area should have enough area for vaccine recipients to be observed for 15-30 minutes after vaccination. Recipients should be observed for at least 15 minutes after vaccination. Those with a history of immediate allergic reaction of any severity to a vaccine or an injection, and those with a history of anaphylaxis due to any cause should be observed for 30 minutes.
- 10.3.4 Adequate space should be available for sick bay to provide emergency treatment or resuscitation if necessary.
- 10.3.5 The VSS doctor/ outreach team should confirm with organiser for internet access and other IT facilitations prior to vaccination activity. Necessary IT equipment, e.g.

laptops, printers and smart ID readers should be arranged to allow vaccination record creation and printing of paper vaccination records to vaccine recipients right after vaccination on-site.

10.3.6 Ambient temperature of the vaccination venues should be kept appropriate for vaccine handling.

10.4 Professional staffing, medical equipment and consumables

- 10.4.1 The VSS doctor is responsible for overall supervision and should ensure adequate and appropriate staffing for the VSS outreach team to deliver the required outreach vaccination, including but not limited to the following:
 - (a) Provide vaccine information, fact sheet of COVID-19 vaccination, obtain informed consent and handle on-site enquiries
 - (b) Cold chain management of vaccine and vaccine preparation (as appropriate)
 - (c) Checking of identity and eligibility of recipients and 3 checks 7 rights before vaccination
 - (d) Conduct vaccination
 - (e) Create electronic vaccination record under Electronic Health System (Subsidies) (eHS(S)) and printing of vaccination record
 - (f) Monitor vaccine recipients after vaccination at observation area. Recipients should be observed for 15-30 minutes after vaccination
 - (g) Provide basic life support/management during emergency conditions
 - (h) Where needed, handle enquiries/ complaints following vaccination
- 10.4.2 During the outreach activity, regardless of the number of vaccination booth set up, at least one doctor in-charge and one registered nurse with emergency training such as basic life support should be present throughout the vaccination activity
- 10.4.3 For the safety of vaccine recipients, vaccination should be administered by the VSS doctor/ trained personnel under the VSS doctor's supervision.
- 10.4.4 VSS Doctors and healthcare professionals of the clinic /PCVS are required to complete the online training for COVID-19 Vaccination Programme offered by the Hong Kong Academy of Medicine (HKAM). Please find details in the website https://elearn.hkam.org.hk/en.

- 10.4.5 The VSS doctor/ outreach team shall bring along the necessary medical equipment and consumables required for outreach vaccination, including but not limited to the following:
 - (a) 70-80% alcohol-based hand rub for hand hygiene;
 - (b) alcohol pads/ swabs for skin disinfection before vaccination;
 - (c) dry clean gauze/ non-woven balls for post vaccination compression to injection site;
 - (d) 1mL syringes/ low dead volume syringes for vaccination
 - (e) empty sharps box(es) (for each vaccination booth);
 - (f) forms (e.g. clinical incident form, consent forms) as necessary; and
 - (g) other accessories and stationery as indicated
- 10.4.6 The doctor should arrange qualified personnel, who are trained in emergency management of severe immediate reactions, with qualification such as Basic Life Support, to standby for emergency management and give timely intervention as indicated.
 - Emergency kit (with age-appropriate parts) should also be prepared by the VSS doctor/ outreach team and brought to the vaccination venue, with the following items:
 - (a) Registered adrenaline ampoule (1:1000) (at least three) with 1mL syringes (at least three, for intramuscular injection) and 25-32mm length needles (at least three) for adrenaline injection; or registered adrenaline auto-injector (at least three)
 - (b) Age-appropriate bag valve masks with viral filter
 - (c) Blood pressure monitor with age-appropriate cuffs
 - (d) Alcohol pads/swabs
 - (e) Sterile gauze
 - (f) Micropore/Band Aid
 - (g) Emergency treatment protocol

Please also see details in section 6.9 of the <u>Doctors' Guide for COVID-19</u>

<u>Vaccination Programme at Clinics under the Vaccination Subsidy Scheme (VSS)</u>

<u>and Private Clinic COVID-19 Vaccination Station (PCVS) - mRNA vaccines</u> at https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf and section 10.8.10.

10.4.7 Personal protective equipment should be used as indicated. Staff should ensure the

availability of PPE. Please refer to Personal Protective Equipment Section of ICB Infection Control Guidelines for PPE indications and usage (https://www.chp.gov.hk/en/resources/346/365.html)

10.5 Preparation of vaccines before conducting outreach vaccination activity

10.5.1 Vaccine ordering

- (a) The VSS doctor should confirm with the organiser the number of vaccine recipients for the event and order vaccines and other essential supplies through the web-based ordering system, to be delivered to registered practice address at least 5 working days before the outreach activity where needed.
- (b) Vaccines should be received and stored as under Section 4 of the <u>Doctors' Guide</u> for COVID-19 Vaccination Programme at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic COVID-19 Vaccination Station (PCVS) <u>mRNA vaccines:</u> https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf upon arrival to the clinic before outreach vaccination activity

10.5.2 Vaccines handling and transport

- (a) Transport only the required quantity for the event
- (b) A standard procedure for vaccine transport should be in place.
- (c) For vaccine handling requirement in outreach activity, please follow Section 10.6

10.6 Vaccine storage and handling under non-clinic settings

10.6.1 Cold box packing

- (a) A standard procedure for cold box packing should be in place.
- (b) Use appropriate insulated cold box of adequate size, with tight fitting lid, ice packs and insulating materials to hold the vaccines to ensure the cold chain is maintained between +2°C to +8°C during transport and temporary storage at the venue.
- (c) Pre-cool cold box to desirable temperature before packing vaccine. The principles of packing a cold box should be followed as shown in Annex B.
- (d) Vaccines should only be removed from the Purpose-built vaccine refrigerators (PBVR) just before packing. Record the time and vaccine temperature when they

- are removed from the refrigerator.
- (e) Unless otherwise instructed by the manufacturer, it is a good practice to use conditioned ice packs to prevent freezing of vaccines.
 - (i) Frozen ice packs may be conditioned by exposing them to room temperature, soaking in several inches of cool or lukewarm water, or putting them under running water
 - (ii) An ice pack is properly conditioned if movement of water is heard when it is shaken.
 - (iii) The preparation time depends on the room and/or water temperature.
- (f) The whole setup, i.e. cold boxes with ice packs and insulating materials, should be validated for insulation time and temperature stability in cold chain before it is used for transporting vaccines (to and from venue) and storing them temporarily at the venue.
- (g) The sample of the cold box packing is attached for easy reference. For details and demonstration, please refer to the video **How to Pack a Cold Box** on CHP website. (Available in Cantonese only at https://www.chp.gov.hk/tc/features/102010.html)



10.6.2 Precautions on handling vaccines and cold chain equipment

(a) Vaccines

Keep vaccines according to the storage condition stated in the package insert. For more information, please refer to relevant sections in the package insert published (https://www.chp.gov.hk/en/features/106959.html)

(b) Cold box(es)

- (i) Keep the cold boxes properly closed and avoid frequent opening.
- (ii) Keep the cold boxes away from direct sunlight.
- (c) Ice packs
 - (i) Do not put ice packs in direct contact with the vaccines, temperature data logger or maximum-minimum thermometer.
 - (ii) Keep sufficient stock of frozen ice packs to meet the needs of vaccine transport.
- (d) Insulating materials, e.g. bubble wrap or Styrofoam

Place adequate insulating materials between conditioned ice packs and vaccines to prevent freezing.

(e) Temperature data logger/ maximum-minimum thermometer Place the sensor/ probe at the center of the cold box.

10.6.3 Temperature monitoring under non-clinic settings

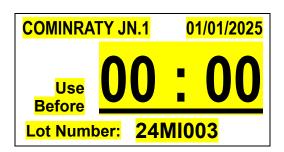
- (a) Use a temperature data logger/ maximum-minimum thermometer to monitor the vaccine temperature continuously during vaccine transport (to and from the venue) and temporary storage at the venue.
- (b) Record the time and vaccine temperature:-
 - (i) When vaccines are removed from the vaccine-storing refrigerator,
 - (ii) At the start of a vaccination activity,
 - (iii) At the end of the vaccination activity, and
 - (iv) Before returning the unused/surplus vaccines to the vaccine-storing refrigerator.
- (c) In case temperature excursion occurs, please refer to Section 10.7.1 for more information.

10.6.4 Labelling of vaccines

For Comirnaty JN.1 vaccine, syringe should be properly labelled for traceability and compliance with "use within" requirement of the vaccine. The information to be labelled include but not limited to the following:

- (a) Name of vaccine
- (b) Use before date and time after first puncture
- (c) Lot number
- (d) Recommend to use markings on syringe label (e.g. highlight/different color) to clearly distinguish different types of vaccine

Used vial should also be labelled with above information. Please refer to section 6.5.11 of Doctors' guide for the COVID-19 Vaccination Programme at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic COVID-19 Vaccination Station (PCVS) - mRNA vaccines for the example of the vial and syringe labels.



Please note that labelling of syringes is NOT required for vaccines **prepared as single dose immediately before vaccination** inside the vaccination booth /room, but used vial should be labelled with above information.

Please ensure the correct number of doses are withdrawn from each vial by proper documentation or measure.

For Spikevax JN.1 vaccine, please ensure compliance with "use within" requirement of the vaccine. Labelling on the syringe and/or tray with use-before date & time should be done unless the syringe is obtained from packaging box immediately before vaccination

10.6.5 Unused vaccine

The unused vaccine which has not been administered during the outreach activity and has been kept within +2°C to +8°C with continuous temperature monitoring may be returned to the clinic and stored under refrigerator for vaccine storage as soon as possible for future use.

10.7 Management of unserviceable vaccine

- 10.7.1 In case of temperature excursion, clinic /PCVS staff should consult the pharmacist of PMVD at 5394 3508 in normal working hours or email to pharm_cmt@dh.gov.hk and the vaccines involved should not be administered until notice from the PMVD that advice from vaccine manufacturer confirms the stability and effectiveness of the involved vaccines. The vaccines involved should be quarantined inside +2°C to +8°C cold chain and marked "DO NOT USE". For more information, please refer to Section 4.4 of the Doctors' Guide https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf for Cold chain management.
- 10.7.2 Unserviceable vaccine should not be administered. Subsequent handling should follow Section 4.5 of Doctors' Guide for mRNA vaccines

 (https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf)

10.8 Vaccination procedure under VSS in non-clinic setting

- 10.8.1 Before and on vaccination day

 Please see **Section 6** of the <u>Doctors' Guide for COVID-19 Vaccination Programme</u>

 at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic

 COVID-19 Vaccination Station (PCVS) mRNA vaccines:

 https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf.
- 10.8.2 After vaccination day
 Please see **Section 6** of the <u>Doctors' Guide for COVID-19 Vaccination Programme</u>
 at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic
 COVID-19 Vaccination Station (PCVS) mRNA vaccines:
 https://www.chp.gov.hk/files/pdf/vssdoctorsguide covid19 bnt pilot.pdf.
- 10.8.3 All the principles listed in **Section 6** and the Annexes on FAQs and supplementary FAQs of the <u>Doctors' Guide for COVID-19 Vaccination Programme at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic COVID-19 Vaccination Station (PCVS) mRNA vaccines:

 https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19 bnt pilot.pdf should be observed in vaccine information provision, checking of identity of recipients,</u>

previous vaccination history and eligibility, screening for contraindications, assessing suitability to receive vaccinations, vaccination provision, documentation, observation and emergency management.

10.8.4 For schedule and arrangement of vaccination for recovered persons and for different age groups, please find details in the following:

Infographics: https://www.chp.gov.hk/files/pdf/poster_recommend_dose.pdf
Website information: https://www.chp.gov.hk/en/features/106952.html

Fact sheet for Recovered Persons:

https://www.chp.gov.hk/files/pdf/factsheet_priorcovid19infection_eng.pdf

Children FAQ:

https://www.chp.gov.hk/files/pdf/faq_children_adolescents_eng.pdf

Immuncompromised person FAQ:

https://www.chp.gov.hk/files/pdf/faqs_on_immunocompromised_persons.pdf

10.8.5 Co-administration or interval between COVID-19 vaccines and other vaccines:

COVID-19 vaccines can be co-administered with, or at any time before or after, any other vaccines# including live attenuated vaccines under informed consent. If clients/ parents of children wish to space out COVID-19 vaccine with live attenuated vaccines (e.g. Measles, Mumps, Rubella & Varicella (MMRV), Live Attenuated Influenza Vaccine (LAIV)), an interval of 14 days is sufficient.

#Remark: If individuals at high risk of exposure of Mpox (also known as monkeypox) need to arrange for pre-exposure Mpox vaccination, it is recommended an interval of at least 4 weeks before or after mRNA COVID-19 vaccine (e.g. BioNTech, Moderna)

The above recommendation is also updated in FAQ#8

(https://www.chp.gov.hk/en/features/106953.html) and Notes for PCVS administering mRNA vaccines for children

(https://www.chp.gov.hk/files/pdf/faq_children_adolescents_eng.pdf) accordingly.

- 10.8.6 If different types of vaccines are provided together in one outreach activity, please ensure that involved staff are well trained to handle various vaccines at the same time properly. Particular attention should be paid to clear segregation of vaccination teams, client waiting areas and booths administering different types or brands of vaccines, proper vaccine and vaccination record handling, and collection of appropriate consent from parent/ guardians (if applicable) on respective vaccines and co-administration.
- 10.8.7 Get prepared for more administrative staff and time for data entry of the particulars into the eHS(S), in particularly, children may have different types of identity documents which are more complicated to handle. More information can be found here (https://www.chp.gov.hk/en/features/45883.html#FAQ3). It is suggested to liaise with the organisers for a name list of the participants coming for vaccination before the activity starts to facilitate record keeping of the vaccinations given.
 - 10.8.8 A guideline for co-administration for reference: https://www.chp.gov.hk/files/pdf/vssdg_ch5_appendix_h.pdf.

For seasonal influenza vaccination (SIV), e-consent (for use of vaccination subsidy) would be for adults of age 18 years or above, but paper consent forms would be used for persons below 18 years old or mentally incapacitated persons. The paper consent forms for SIV are available at (https://www.chp.gov.hk/en/features/45851.html). Details of SIV programmes are available at (https://www.chp.gov.hk/en/features/17980.html)

Health assessment should be done before administration of seasonal influenza vaccine and/ or pneumococcal vaccine. Health Assessment Form (https://www.chp.gov.hk/files/pdf/assessmentform.pdf) completed by recipients should be collected and checked to screen for any contraindications or precautions to the vaccines to be administered.

Extra charge is <u>not allowed</u> for <u>offering co-administration of SIV and COVID-19</u> vaccine to the eligible Hong Kong residents at the same outreach activity.

10.8.9 For co-administration, please use the notification form at Annex A "Notification for COVID-19 Outreaching Vaccination at Non-clinic Setting (Also Applicable to Co-

10.8.10 For vaccination arrangement for children and adolescents, details are in respective sections of the Doctors' Guide for mRNA vaccines and Notes for PCVS administering mRNA vaccines for children.

Please find the following highlights

- (a) Please refer to the latest COVID-19 vaccination recommendation for individuals with previous COVID-19 infection by the JSC via https://www.chp.gov.hk/en/static/24008.html.
- (b) For vaccination schedules for different age groups of COVID-19 vaccination, please refer to the following webpages:
 https://www.chp.gov.hk/en/features/106951.html
 https://www.chp.gov.hk/en/features/106952.html
- (c) Please also visit the website for the latest information (https://www.chp.gov.hk/en/features/106934.html).
- (d) Parental accompany:
 - (i) Children aged below 12 years must be accompanied by an adult (e.g. parent, grandparent, adult relative, helper or schoolteacher if the child receives vaccination via group arrangements by schools).
 - (ii) Children aged below 3 must be accompanied by their parents or guardians (e.g. grandparent, adult relative, helper)
 - (iii) For minors below 18 years old, parental / guardian accompany is required for those adolescents or children with immunocompromised conditions going for vaccination.
- (e) Please note that PCVS doctors cannot provide mRNA vaccines to persons below 12 years old, except the designated PCVSs. Please refer to Section 6.5 of the COVID-19 mRNA vaccines Doctors' Guide for details on vaccine preparation.
- (f) For all clients below 18 or mentally incapacitated, paper consent (**Annex VI**) should be completed and signed by parent/guardian before attending the outreach activity. The recipient should bring the signed consent on the day of vaccination, otherwise, clinic staff should provide a blank consent form for parent/guardian to sign before vaccination.
- (g) For children aged 3 to 11 years, an accompanying adult (e.g. adult relative, domestic helper or school teacher if the child receives

vaccination via group arrangements by schools) is required to be present physically at the venue on the day of vaccination. If the identity document of the children (e.g. birth certificate) does not bear a photo, please remember to bring their latest student's handbook bearing their photograph for verification. Should the identity document of the child does not bear a photo and the child does not have student's handbook or other identity document with photo, discretion will be exercised to verify the identity of the child by other means in light of the circumstances. For children below 3 years old, the parent / guardian should bring the original copy of the identity document (e.g. birth certificate) of the child, the signed consent form and accompany the child for vaccination. If the vaccination is arranged by the school / centre in group, the accompanying teacher or staff should bring the aforementioned required documents and be responsible in clearly indicating the identity of each child.

ENG:

https://www.chp.gov.hk/files/pdf/consent_form_for_covid19_vaccination_e ng.pdf

CHI:

https://www.chp.gov.hk/files/pdf/consent_form_for_covid19_vaccination_c hi.pdf

- (h) Vaccinators should check if the signed consent form has been filled in completely and correctly: including identity document type (when the client has no HKID, then other identity document type should be used), and contact no. of parent/ guardian. Please check the validity period of the identity document, if applicable.
- (i) Please check that the <u>right</u> person will be vaccinated before giving the vaccination. For example, if the identity document has no photo, e.g. birth certificate, crosscheck the client's identity with documents with photos (e.g. student handbook/student card).
- (j) Please be reminded to check if the client has any non-local recovery or vaccination history, as usual.
- (k) In order to ensure the unique identifier to be used in different COVID-19 vaccination systems, please remind the recipient/ parent/ guardian to use the same identity document for vaccination.
- (l) Similar to the vaccination arrangement for adults, a smart card reader should

also be used to capture the personal identifiers for HKID holders._For information on the input of documents for children below 11 years old in eHS(S), please refer to the Quick Guide: https://www.ehealth.gov.hk/en/covidvaccine/doc/quick-guide-for-using-manual-input-of-other-document.pdf (Slides 16 to 26).

- (m) Input 6 additional types of identity documents for children under age 11 in eHS(S):
- HK Birth Certificate
- o HKSAR Re-entry Permit
- HKSAR Document of Identity
- o Permit to Remain in HKSAR (ID 235B)
- Non-HK Travel Document (e.g, Foreign passports)
- o Certificate issued by the Births Registry for adopted children

Samples of the above identity documents, please refer to:

https://www.chp.gov.hk/files/pdf/vssdg_ch5_appendix_a.pdf_ (Appendix A1, A3 to A7)

- (n) For children aged 6 months to 11 years with non-HK Travel Document (e.g., Foreign passports), they are eligible to receive COVID-19 vaccine if there is an Endorsement or relevant Landing Slip (if applicable) showing of A5 of any one (i) to (vii) in the Appendix (https://www.chp.gov.hk/files/pdf/vssdg_ch5_appendix_a.pdf); with Visa/Reference No. and within the validity period. Please check before vaccination. Please be reminded to input the Visa/Reference No. in eHS(S) when handling children with non-HK Travel Document.
- (o) For non-Hong Kong resident, please refer to the following eligibility criteria to receive COVID-19 vaccination, please refer to Section 2.2 of Doctors' Guide for mRNA vaccines.
 More details on the eligibility criteria for non-Hong Kong resident receiving COVID-19 vaccination at Hong Kong can be found at the following link: https://www.chp.gov.hk/en/features/106934.html

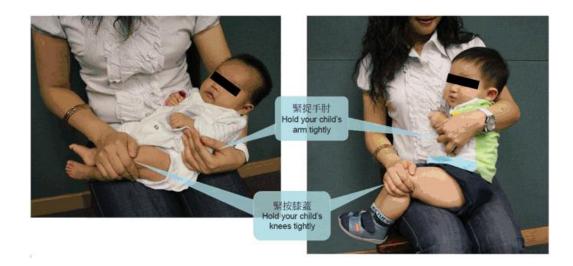
Please refer to the eHS(S) Guide for a list of accepted document types and manual input instructions:

https://www.ehealth.gov.hk/en/covidvaccine/doc/quick-guide-for-using-

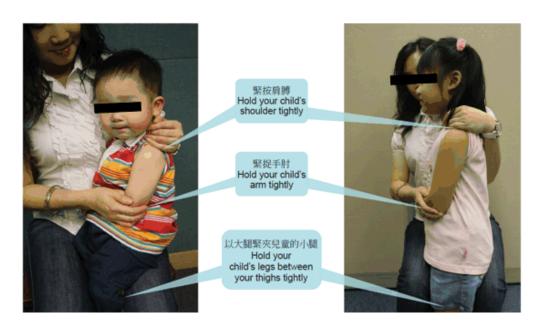
manual-input-of-other-document.pdf.

- (p) FAQs for vaccination for adolescents are available at https://www.chp.gov.hk/files/pdf/faq_children_adolescents_chi.pdf
 https://www.chp.gov.hk/files/pdf/faq_children_adolescents_eng.pdf.
- (q) Recipient preparation and injection site preparation
 - (1) Invite the client to sit down;
 - (2) Invite the accompanying adult to secure the young child on his/her lap;
 - (3) Commonly recommended injection sites for IMI:
 - anterolateral aspect of thigh (for children <18 months)
 - deltoid muscle of upper arm (for children ≥ 18 months)
 - Regarding mid-anterolateral thigh injection for <u>mRNA vaccines</u>, please refer to Annex XI of the mRNA vaccines Doctors' Guide (https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf). Please note that PCVS doctors cannot provide mRNA vaccines to persons below 12 years old, except the designated PCVSs.

Positioning and Injection site for children - thigh



Positioning and Injection site for children - upper arm



- (4) Ask the client to state his/her name and if find necessary, check document with photo e.g. school booklet, to confirm identity
- (5) Inform the client, and the accompanying adult if available, of the type of vaccine to be given;
- (6) Ensure the injection site (deltoid muscle or anterolateral thigh) is exposed properly; and

- (7) Take out the vaccine from the storage.
- (r) Immediate vaccine preparation
 - (1) Perform hand hygiene;
 - (2) The injection site is swabbed with an alcohol pad (from the centre of deltoid muscle outwards in a circular motion, without going the same area) and allowed to dry completely before vaccine injection; and
 - (3) Prepare the vaccine and inspect the vaccine vial for any manufacturing defect. Shake vaccines before use according to the drug insert, if necessary.

(s) Vaccine injection

- (1) Recheck the vaccine before administering;
- (2) Please check that the correct person to be vaccinated before giving the vaccination. For example, crosscheck the client's identity with documents with photos (e.g. student handbook/student card).
- (3) The injection staff should keep the client/ parent informed of the vaccine to be administered;
- (4) 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.
- (5) Administer the vaccine by right route and injection site with aseptic technique;
- (6) Withdraw the needle gently and quickly cover the injection site with a new dry clean gauze/non-woven ball after completion of injection;
- (7) Instruct the client to gently apply pressure for 1-2 minutes over the injection site or till bleeding stops;
- (8) Do not recap the needle. The used syringe and uncapped needle should be discarded directly into sharps box; and
- (9) Perform hand hygiene before documentation.
- (t) Emergency management
 - (1) Vaccination may cause untoward reactions. Some recipients may even

- develop allergic reactions to the vaccine(s). Failure to give timely intervention may result in serious consequences.
- (2) The doctor should arrange qualified personnel, who are trained in emergency management of severe immediate reactions and equipped to do so, with qualifications such as Basic Life Support, to standby for emergency management and give timely intervention as indicated. The doctor/ his qualified personnel should keep training up-to-date and under regular review.
- (3) Emergency kit equipment (with age-appropriate parts) should include, but is not limited to:
 - (i) Child and infant size Bag Valve Mask;
 - (ii) BP monitor with child or infant size cuff. Please also ensure the child size could connect to the monitor if the cuff does not come with the monitor and is bought individually.
 - (iii) Registered **adrenaline** ampoule (1:1000) (at least three) with sufficient number of **1mL syringes** (at least three, for intramuscular injection) and **25-32mm length needles** (at least three) for adrenaline injection/ registered adrenaline auto-injector (at least three); and
 - (iv) Please see details in **Section 10.4.6.**
- (4) Ensure there is sufficient stock of all the emergency equipment, and that the equipment and drugs have not reached expiry.
- (5) Keep written protocol and training material for reference. Healthcare workers should be familiar with the dosage of adrenaline administration in anaphylaxis.
- (6) Dosage of Adrenaline (at least three vials) required will depend on body weight (BW). The following Reference Framework is taken from Chapter 5 Monitoring and Management of Adverse Events Following Immunisation, Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings.

Quick reference for dosage of adrenaline (The recommended dose for adrenaline is 0.01mg/kg body weight)

	Age group	Range of weight (kg)*	Range of weight (lb)	Adrenaline dose 1mg/ml injectable (1:1000 dilution) IM
Infants and Children	1-6 months	4-8.5 kg	9-19 lb	0.05 ml (or mg)
	7-36 months	9-14.5 kg	20-32 lb	0.1 ml (or mg)
	37-59 months	15-17.5 kg	33-39 lb	0.15 ml (or mg)
	5-7 years	18-25.5 kg	40-56 lb	0.2-0.25 ml (or mg)
	8-10 years	26-34.5 kg	57-76 lb	0.25-0.3 ml (or mg)†
Teens	11-12 years	35-45 kg	77-99 lb	0.35-0.4 ml (or mg)
	≥ 13 years	46+ kg	100+ lb	0.5 ml (or mg);

Note: If body weight is known, then dosing by weight is preferred. If weight is not known or not readily available, dosing by age is appropriate.

(Adapted from

https://www.healthbureau.gov.hk/pho/rfs/english/pdf_viewer.html?file=download87&title=string107&titletext=string84&htmltext=string84&resources=05_Module_on_Immunisation_Children_chapter5)

- (7) For Dosage of Jext: According to the drug insert, Jext (300microgram) for persons over 30kg and Jext (150microgram) for persons with BW 15-30 kg.
- (u) Should anaphylaxis happen after vaccination:
 - (1) Call ambulance;
 - (2) Inform the doctor immediately, and seek advice and approval on adrenaline administration, if appropriate;
 - (3) Use bag valve mask to assist ventilation (give oxygen if available); and
 - (4) Monitor all the vital signs, including blood pressure and pulse every 5 minutes and stay with patient until ambulance arrives; and
 - (5) If no improvement within 5 minutes seek advice from doctor (on-site or via phone) for approval on repeat dose(s) of adrenaline injection if appropriate.
- (v) Should there be cases with anaphylaxis or severe adverse reaction after vaccination or during observation before leaving the clinic requiring on-site

^{*}Rounded weight at the 50th percentile for each age range

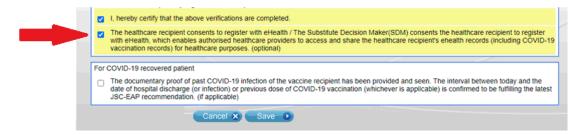
[†]Maximum dose for children

[†]Maxim20or teens

transferral to hospital for further care (either by ambulance or referral letter), responsible healthcare personnel should report these cases to the Central Medical Team of the Department of Health, after immediate management, by phone (Tel: 3975 4859); followed by submitting the Report on Cases Referred to Hospitals to Central Medical Team by email (email addresses listed in the form) with password protection of the file, or fax (Fax: 2544 3908) within the same day of occurrence of the incident. For details, please refer to relevant sections of the <u>Doctors' Guides for mRNA vaccine</u>.

10.8.11 **Documentation**

- (a) User Manual of eHealth System (Subsidies) [eHS(S)] for COVID-19 Vaccination: https://www.ehealth.gov.hk/en/covidvaccine/ehs.html
- (b) For documentation of COVID-19 recovery status and overseas COVID-19 vaccination history, please see relevant sections of the <u>Doctors' Guides for mRNA vaccine</u>.
- (c) To facilitate the vaccine recipients to check their COVID 19 vaccination records, they are encouraged to join the eHealth (醫健通). With effect from 1 June 2022, the eHS(S) screen for COVID-19 vaccination input, will pre-set a "tick" in the box of join eHealth (醫健通). VSS doctors and clinic staff must ask for consent from recipients and should remove the "tick" if recipient does not give consent. Joining eHealth (醫健通) is optional for recipients. The screen cap is attached for your easy reference.



- (d) The VSS doctor/ outreach team should ensure security and privacy of the eHS(S) in outreach settings, including but not limited to the following:
 - (i) Service providers should ensure that the access rights to information are

- granted on a need-to-know basis;
- (ii) Every user is responsible to safeguard the confidentiality of the data;
- (iii) User should logout of the eHS(S) immediately after use;
- (iv) User must ensure their accounts and passwords are properly protected;
- (v) Service providers should suspend data entry account in a timely manner when the data entry account user is no longer in service; and
- (vi) The use of group accounts should be avoided.
- 10.8.12 All clinical incidents and referral to hospitals should be reported as listed in relevant sections of the Doctors' Guides mRNA vaccines.

10.9 Infection Control Practice

- 10.9.1 Clean and disinfect all areas including, but not limited to, the working area inside vaccination areas, with 1 in 99 diluted household bleach (mixing 1 part of household bleach containing 5.25% sodium hypochlorite with 99 parts of water), especially high-touch areas, before every session or whenever visibly soiled. Leave for 15-30 minutes, and then rinse with water and keep dry. For metallic surface, disinfect with 70% alcohol.
- 10.9.2 For detailed Infection Control recommendations and sharps handling, please refer to Section 5 of the <u>Doctors' Guide for COVID-19 Vaccination Programme at Clinics under the Vaccination Subsidy Scheme</u>

 (https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf)

10.10 Clinical Waste Handling

If the clinical waste generated cannot be collected immediately after the vaccination activities, the vaccination venue should have a suitable temporary storage area for the clinical waste (Please refer to Guideline on Proper Handling and Temporary Storage of Clinical Waste Generated from Outreach Vaccination Activities provided by the EPD

(https://www.chp.gov.hk/files/pdf/vssdg ch5 appendix g.pdf)

10.10.1 Regulation of clinical waste handling is under the purview of EPD. All clinical

waste generated should be properly handled and disposed (including proper package, storage and disposal) in accordance with the Waste Disposal (Clinical Waste) (General) Regulation. For details, please refer to the **EPD's Code of Practice (CoP) for the Management of Clinical Waste (Small Clinical Waste Producers)** http://www.epd.gov.hk/epd/clinicalwaste/file/doc06_en.pdf.

- 10.10.2 Make appropriate arrangement ahead of time for disposal of clinical waste generated in the outreach vaccination activities.
- 10.10.3 Three different ways in clinical waste disposal are as follows:
 - (a) Pre-arrange licensed collector to collect clinical waste on the same day after the vaccination activity; or
 - (b) Self-deliver the clinical waste to Tsing Yi Chemical Waste Treatment Centre by healthcare professional on the same day after the activity. (Before the activity, trip tickets have to be obtained from EPD for self-delivery); or
 - (c) Temporarily store the sharps box(es) in independent, locked and labelled cabinet at the venue until collection by licensed collector.
- 10.10.4 For details, please refer to the Guideline for Temporary Storage of Clinical Waste Generated in Outreach Vaccination Activities provided by EPD (https://www.chp.gov.hk/files/pdf/vssdg ch5 appendix g.pdf), or contact EPD at 3178 9356 for any enquiries.

10.11 Post vaccination follow-up

- 10.11.1 Please refer to sections 6.8 and 6.9 for post-vaccination observation and emergency management.
- 10.11.2 The VSS doctor should liaise with the event organiser to arrange additional doses and rescheduling of persons excluded on the day of outreach activity.
- 10.11.3 The VSS doctor should provide means of contact for the vaccine recipients on post-vaccination follow up after the outreach activity where appropriate.

10.12 Extra Points to note for outreach vaccination activities at schools

10.12.1 Outreach vaccination at schools usually have more participants, who are mainly children and some of the children are accompanied by teachers instead of parents and guardians. In addition to the earlier sections of this Guide in arranging outreach, please pay attention to the following extra points for school outreach vaccination:

10.12.2 The estimated manpower suggested for school outreach are as follows:

Each team: At least 1 on-site doctor + 1 First Aid registered nurse + Adequate administrative staff; and

Each booth: (1 inoculator + 1 data entry staff) + (a set of computer with printer) Number of booths needed:

Activity size (consented participants per activity)	Number of Booths needed
500 students or more	At least 6 booths
300-500	At least 4 booths
200-300	At least 3 booths
100-200	At least 2 booths

10.12.3 The equipment and consumables required are similar to other non-clinic settings, please refer to Section 10.4. Attention should be paid to use age-appropriate size equipment and recommended dosage for emergency drugs.

10.12.4 Preparation:

a. Keep up-to-date with the latest recommendations of the eligibility and schedules for vaccination. Please refer to the Infographics on vaccination arrangements for children and adolescents (general public and person with prior COVID-19 infection):

https://www.chp.gov.hk/files/pdf/poster_recommend_dose.pdf

Please refer to the FAQs on immunocompromised person for the vaccination

schedule of immunocompromised children and adolescents:

https://www.chp.gov.hk/files/pdf/faqs on immunocompromised persons.pd f

- b. Children are more likely to have other vaccinations recently. COVID-19 vaccines can be co-administered with, or at any time before or after, any other vaccines including live attenuated vaccines under informed consent. If clients / parents of children wish to space out COVID-19 vaccine with live attenuated vaccines (e.g. Measles, Mumps, Rubella & Varicella (MMRV) Vaccine; Live Attenuated Influenza Vaccine (LAIV)), an interval of 14 days is sufficient. #Remark: If individuals at high risk of exposure of Mpox (also known as monkeypox) need to arrange for pre-exposure Mpox vaccination, it is recommended an interval of at least 4 weeks before or after mRNA COVID-19 vaccine (e.g. BioNTech, Moderna)
- c. If different types of vaccines are provided together in one outreach activity, please ensure that involved staff are well trained to handle various vaccines at the same time properly. Particular attention should be paid to clear segregation of clients and booths administering different types of vaccines, proper vaccine and vaccination record handling, and collection of appropriate consent from parent/ guardians on respective vaccines and co-administration.
- d. Get prepared for more administrative staff and time for manual data entry of the particulars into the eHS(S), as unlike most adults have Hong Kong Identity Card, children may have different types of identity documents which are more complicated to handle.
- e. Liaise with the schools and request them to provide a name list of the participants coming for vaccination before the activity starts to facilitate record keeping of the vaccinations given.
- f. Communicate well with the school to arrange stagger timeslots for vaccine recipients to avoid overcrowding. It usually takes around 4-5 minutes for each vaccination.
- g. Place order for the vaccines and syringes/needles through the web-based ordering system at least 5 working days before the outreach activity.
- h. Remember to bring sufficient number of card readers, printers and computers for data entry. Check with the schools in advance for the electricity sockets and wifi access.

10.12.5 <u>Creation of Data Entry Accounts and Handling of Vaccination:</u>

- a. The vaccination team are required to enter the personal particulars of the participants into the eHS(S) on the spot and print vaccination records for them immediately after vaccination.
- b. Get sufficient number of data entry accounts ready for the use by the vaccination team in advance.
- c. Create additional data entry account following a few quick steps. You may refer to Section 5.1.5 of the User Manual of eHealth System (Subsidies) for COVID-19 Vaccination Programme:

(https://www.ehealth.gov.hk/en/covidvaccine/doc/user-manual-of-using-ehs-on-covid-19-programme.pdf) for details.

10.12.6 Obtaining informed consent:

For minors:

- a. All persons below 18 years old or mentally incapacitated persons, including students and non-students, are required to complete a written consent form.
- b. Distribute the consent forms to parents/guardians and collect the consent forms from parents/guardians in advance, as they may not accompany the children on the day of vaccination.
- c. The Chinese and English consent forms can be downloaded from (https://www.chp.gov.hk/files/pdf/consent_form_for_covid19_vaccination_chi.pdf) and
 - (https://www.chp.gov.hk/files/pdf/consent_form_for_covid19_vaccination_eng.pdf
) respectively.
- d. Remind parents to read the vaccine information through the links in the consent forms before signing.
- e. Provide answers to the enquiries related to the vaccination for the school or parents as appropriate.
- f. Work closely with school to check and ensure the forms are duly completed and signed.
- g. If any queries are noted in the information provided in the consent form, please clarify with parents or guardians in advance.

For adults:

- h. Adult vaccine recipients are not required to provide written consent. Informed consent should be obtained on the spot.
- i. Before vaccination, provide them with the fact sheet of the mRNA vaccines for information, which can be downloaded from:
 https://www.chp.gov.hk/files/pdf/factsheet_covidvaccine_mrna_eng.pdf; or get hard copy of the Fact Sheet through vaccine ordering website when order vaccines.
- j. Confirm their consent and check that they have ticked in the checkbox in the last page of the factsheet.

10.12.7 Before vaccination:

- a. Check carefully the vaccine recipients' identity, including HKID card/ birth certificate and student's handbook or card with photo, against the signed parental consent form before vaccination.
- b. For young children who have not yet enrolled into schools or forget to bring the student's handbook or card, vaccinators have to rely on other methods of verification, e.g. via the accompanying parent's/guardian's confirmation, asking the child to state his/her name together with date of birth, checking other identity documents bearing their photograph like passports, etc.
- c. Use HKID card (if available) with a card reader for data entry. This can ensure accuracy and it is more efficient.
- d. Check the consent form, in particular for any contraindications.
- e. Check the eHealth System (Subsidies) to verify the vaccine recipient's eligibility, vaccination records and recovery status (if any) BEFORE vaccination to prevent duplicated dose.
- f. Clarify with the parents/guardians if there are any discrepancies or queries in the information provided in the consent forms and eHealth System.
- g. For more details about handling recovered persons, please refer to (Annex XIII) on FAQs on COVID-19 Recovered Persons for Medical Staff using eHS(S).

10.12.8 Vaccine administration:

- a. Follow the "3 checks and 7 rights" procedures.
- b. If there is distraction e.g. a crying child, after settling the distraction, please repeat all the necessary steps again to ensure "3 checks and 7 rights" are performed properly.
- c. Commonly recommended intramuscular injection sites: mid-anterolateral thigh for adolescents aged 12 to 17 years and deltoid muscle of the upper arm for those aged 18 years or older.

10.12.9 After vaccination:

- a. Vaccinators should print out and issue the vaccination record to the vaccine recipients <u>only after vaccination</u>. Please fill in the <u>box after Part 4(C)</u> in the consent form.
- b. If vaccination is not given and the parent/guardian cannot be informed on the spot, please fill in and issue a "Notification to Parents COVID-19 Vaccination Has Not Been Given" (Annex D) and ask the school to distribute it to the relevant parent/guardian to follow up.

10.12.10 Claims submission:

a. To claim the Health Talk and/or One-on-one Consultation Allowance under the COVID-19 Vaccination Programme at Non-clinic Setting under the Vaccination Subsidy Scheme (VSS), please fill in the application form (Annex C).

List of References:

- "Doctors' Guide for the Coronavirus Disease 2019 (COVID-19) Vaccination
 Programme at Clinics under the Vaccination Subsidy Scheme (VSS) and Private Clinic
 COVID-19 Vaccination Station (PCVS) mRNA vaccines":
 https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_bnt_pilot.pdf
- 2. User Manual of eHealth System (Subsidies) for COVID-19 Vaccination Programme: https://www.ehealth.gov.hk/en/covidvaccine/doc/user-manual-of-using-ehs-on-covid-19-programme.pdf
- Infographics on vaccination arrangements for children and adolescents (general public and person with prior COVID-19 infection): https://www.chp.gov.hk/files/pdf/poster_recommend_dose.pdf
- Fact Sheet on COVID-19 Vaccines : https://www.chp.gov.hk/files/pdf/factsheet_covidvaccine_mrna_eng.pdf
- 5. FAQs on COVID-19 vaccination for Children and Adolescents

Chinese Version: https://www.chp.gov.hk/files/pdf/faq_children_adolescents_chi.pdf

English Version: https://www.chp.gov.hk/files/pdf/faq_children_adolescents_eng.pdf

- 6. FAQs on Immunocompromised person https://www.chp.gov.hk/files/pdf/faqs_on_immunocompromised_persons.pdf
- 7. Consent forms

ENG: https://www.chp.gov.hk/files/pdf/consent_form_for_covid19_vaccination_e ng.pdf

CHI:https://www.chp.gov.hk/files/pdf/consent_form_for_covid19_vaccination_chi.pdf

List of Annexes

Annex A	Notification for COVID-19 Outreaching Vaccination at Non-clinic Setting
	(Also Applicable to Co-administration of COVID-19 vaccine with SIV / PV)
Annex B	The principles of packing a cold box
Annex C	Application Form of Health Talk and/or One-on-one Consultation
	Allowance
Annex D	Notification to Parents – COVID-19 Vaccination Has Not Been Given

Annex A.

Please download the Notification on Vaccination Activity at Non-Clinic Setting Form (Also Applicable to Co-administration of COVID-19 vaccine with SIV / PV) at:

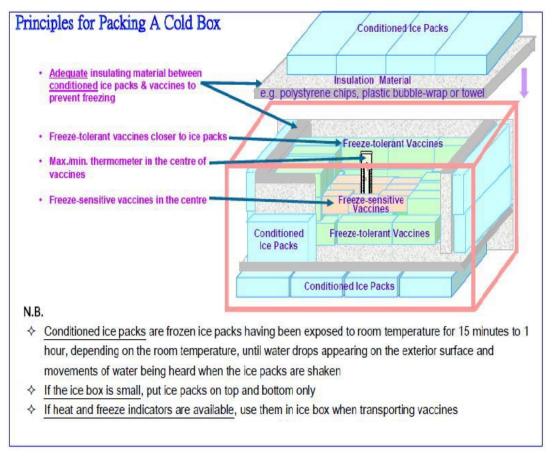
 $\underline{https://www.chp.gov.hk/files/pdf/notification_covidoutreach.pdf}$

Annex B

The principles of packing a cold box should be followed as shown in Figure 4

Figure 4-Principles for Packing Cold Box. (Photo source: Public Health Nursing Division, 2008.)

(Source: Nursing procedure Guidelines on Immunisation: Quality Assurance Committee, Public Health Nursing Division, Department of Health, HK (December 2014 revised))



Annex C

	ramme Management and Vacci	nation Division	(To be completed by the Department of Health)	
*	VD) se submit the completed applica	tion form to	The application is Approved Not Approved	
	D by <u>post</u> .		Name of approving officer:	
	: COVID-19 Vaccination Team		Signature:	
	ress: Rm 430, 4/F, Centre for H CArgyle Street, Kowloon	ealth Protection,	Date:	
-	-		-19 Vaccination Programme	
		_	Vaccination Booking System (VBS)	
οι τ		ustering mKNA va- Vaccination Subsid	ccine and Inactivated vaccine	
		VID-19 Vaccination		
		Outreach Vaccinatio		
******			************	
Name of O	ganizer :		Venue Code :	
Address of	Outreach Venue :			
Part I: (To	be completed by the enrolled de			
Service Da	Service Provided (P	uta "√" as appropria	ite) Number of Hours	
	Health Talk	One-on-one Consu	ltation (round down to the nearest half hour)	
Total numb	er of hours		Hours	
Outstanding	one-off outreach vaccination a	llowance amount (HK\$	6)	
(HK\$800 p	er hour and HK\$400 for each	subsequent half-hour)	" \$	
			rrect, complete and true. I also declare that yet been reimbursed for the same outreach	
Name of E	rolled Doctor:	Signature of En	rolled Doctor:	
		Official Cl	top of Medical	
	e Provider ID:		Organization:	
Name of Medical	Organization:		Date:	
Part II: (Te	be completed by the organizer	<u>)</u>		
I declare th	at all information given in this a	application form is corr	ect, complete and true.	
Name:			Signature:	
Position:		Official Chop of Or	Official Chop of Organization:	
Contact No. :		_	Date:	
DH CO	III. 10 Daimhumamant of Haalth Talk	One on One Consultation	(02/25)	

Annex D

	Date
Dear Parents/ Guardians of	(Name of Student/ Class),
Under	virus Disease 2019 (COVID-19) Vaccination Programme the Vaccination Subsidy Scheme (VSS) School Outreach on to Parents – COVID-19 Vaccination Has Not Been Given
The school has arranged a to students at your child's school	vaccination team from our medical organisation to provide COVID-19 vaccine
today.	
 □ was absent from school □ had physical discomfort (pleated refused vaccination □ was not due for the next dose □ others (please specify:	arrange for your child to be vaccinated at an appropriate vaccination venue as
 For appointment arrangen https://www.chp.gov.hk/e For frequently asked ques 	nents, please refer to the following website: n/features/106952.html tions on COVID-19 vaccination for Children and Adolescents, please refer to: iles/pdf/faq_children_adolescents_eng.pdf
	Name of Medical Organisation :
	Telephone Number :
*Vaccination team plea	se tick the appropriate □

日期:
(學生姓名/班別)的家長/監護人:
2019 冠狀病毒病疫苗接種計劃 - 疫苗資助學校外展 家長通知書 - 未有接種 2019 冠狀病毒病疫苗
學校已安排我們醫療機構的疫苗接種隊於今天到 貴子女就讀的學校為學生接種 2019 冠狀: 毒病疫苗。
經評估後,接種隊 <u>沒有</u> 為 貴子女 <u>接種</u> 2019冠狀病毒病疫苗,原因*是 貴子女: □ 缺課
□ 身體不適〔請註明:〕 □
□ 拒絕接種 □ 尚未到期接種下一劑
□ 其他(請註明:)
在適當時,請 貴家長盡快自行安排 貴子女到合適的疫苗接種場所接種。 - 有關預約的安排,請參閱以下網站: https://www.chp.gov.hk/tc/features/106952.html - 有關兒童和青少年接種新冠疫苗的常見問題,請參閱: https://www.chp.gov.hk/files/pdf/faq_children_adolescents_chi.pdf
醫療機構名稱:
電話:
日期:

*接種隊請在合適的□內加上「✓」號