

Spectrum Health COVID-19 Vaccine Adverse Events

Provider Tip Sheet

As COVID-19 vaccination efforts increase across West Michigan, patients may present to your office with complaints of adverse events from the vaccine. The most commonly reported adverse events are expected, normal immune responses from the vaccine. (Centers for Disease Control and Prevention resource: [What to Expect after Getting a COVID-19 Vaccine.](#))

These vaccines were released under an [Emergency Use Authorization \(EUA\)](#), necessitating additional requirements, including ongoing safety monitoring of the vaccines. Specifically, the United States government is utilizing multiple existing vaccine safety monitoring systems to monitor COVID-19 vaccines in the post-authorization/approval period.

Vaccine adverse events are being monitored and reviewed through a MyChart survey and ERS submissions.

One example of monitoring is the Vaccine Adverse Event Reporting System (VAERS). Not all side effects need to be submitted, however certain events do **require** VAERS reporting. For additional information, please see the following:

- [Pfizer COVID-19 Vaccine EUA Fact Sheet for Health Care Providers](#)
- [Moderna COVID-19 Vaccine EUA Fact Sheet for Health Care Providers](#)
- [Janssen Biotech \(Johnson&Johnson\) COVID-19 Vaccine EUA Fact Sheet for Health Care Providers](#)
- Vaccine Administration Errors, including [Shoulder Injury as a Result of Vaccine Administration](#) (SIRVA)

Spectrum Health Allergists and Primary Care Leadership recommends the following actions:

Refer patient to an allergist for assessment if:

One or more of the following symptoms are reported **within** four hours of administration:

- Difficulty breathing
- Swelling of face or throat
- Severe rash on body

Spectrum Health allergists have prioritized seeing patients to clear them for their second COVID-19 dose if they experienced symptoms outlined above. Urgent follow-up for clearance is not required for a severe reaction with a one-dose vaccine. However, consider allergy referral to evaluate future candidacy if additional doses are required in the future.

Refer patient to their PCP for assessment for:

- Any event that would necessitate a VAERS submission (see left)
- One or more of the following symptoms reported **beyond** four hours of administration:
 - Difficulty breathing
 - Swelling of face or throat
 - Severe rash on body

Please refer to the [FAQs](#) for additional guidance.

If the patient presents to you with a COVID-19 vaccine reaction, and you believe the reaction is related to the vaccine, please use the following ICD-10 code to help with future reporting and consistency:

T50.B95A-Adverse effect of other viral vaccines, initial encounter

If you need to report a serious adverse event and do not believe it was previously reported, please:

1. Complete the [MYCHART COVID VACCINE ADVERSE REACTION](#) flowsheet (within an Epic encounter) or report the event through the [Event Reporting System](#)
2. Reach out to the following contact if you have questions or concerns:
 - b. Spectrum Health
 - i. Quality, Safety and Experience Main Number at 616.391.1493
 - ii. Spectrum Health contact: Mary Zimmerman, BSN, RN at mary.zimmerman@spectrumhealth.org