

Ministry of Health

Office of Chief Medical Officer of Health, Public Health 393 University Avenue, 21st Floor

416 212-3831

Toronto ON M5G 2M2

Tel.:

Ministère de la Santé

Bureau du médecin hygiéniste en chef, santé publique 393 avenue University, 21e étage

Toronto ON M5G 2M2

Tél.: 416 212-3831

416 325-8412 Téléc.: 416 325-8412 Fax:

Nurses (RN/RPN) - Province Wide - COVID-19 mRNA Vaccination Order

Brief Description of the Procedure:

This order is made under section 5(1)(b) of the *Nursing Act*, 1991.

A Registered Nurse (RN) or Registered Practical Nurse (RPN) may initiate a COVID-19 mRNA Vaccination of vaccine recipients for active immunization to prevent COVID-19 disease caused by SARS-CoV-2 virus (the "Procedure") on the terms and conditions set out in this order.

Authorization:

The RN/RPN may initiate the Procedure:

- (a) In respect of only those persons described by the provincial criteria for screening and prioritization for vaccination as identified by the Ontario Ministry of Health.
- (b) In accordance with all procedures and processes of the applicable public hospital, long-term care home or public health unit on whose behalf the RN/RPN is conducting the Procedure.
- (c) If the RN/RPN is knowledgeable regarding the manner for obtaining consent for the Procedure, completes any reporting, data collection and documentation requirements (including those set out below), and is knowledgeable about the management of anaphylaxis events in respect of the Procedure, including being familiar with where an emergency and anaphylaxis kit is kept.
- (d) If the RN/RPN has reviewed this document and has self-assessed to have the appropriate knowledge, skill and judgement to conduct the Procedure, including having completed any required education.
- (e) In accordance with the **Medications Table** attached.

Documentation:

Documentation of the implementation of the order and the fact that consent for vaccination was obtained must be recorded in the provincial documentation and registration system.

Documentation must include the name of the order, date of implementation and name and electronic signature including credentials of the implementer.

Ordering Physician:

Name:

Title: Chief Medical Officer of Health

Illelains

Date: December 29, 2020

Medications Table

		Indications	Absolute	Special Considerations
	Range			<u> </u>
COVID-19 mRNA Vaccine BNT 162b2 concentrate for solution for injection	Range COVID-19 mRNA Vaccine BNT 162b2 is administered intramuscularly in the deltoid muscle after dilution. It is administered as a series of two doses (0.3 mL each) 21 days apart The thawed vaccine must be diluted with 1.8 mL of sodium chloride solution 9 mg/mL (0.9%) solution using a 21 gauge or narrower needle using aseptic technique. The diluted product must be used within 6 hours of being reconstituted.	The following applies for both the first and second dose administrations. Vaccine Recipients presenting to be vaccinated and meeting the criteria of the targeted vaccination group must: • pass the COVID-19 Screening Criteria • be 18 years of age and older AND • provide Informed consent AND • indicate no contraindicati ons based on the list of known contraindicati ons during the consent process for vaccination	Contraindications Do not administer the vaccine if: Particulates or discoloration are present upon visual inspection of the vial. Do not administer the vaccine if the Vaccine Recipient has any of the following: anaphylactic reaction to previous vaccinations and/or a history of anaphylaxis to medications or food administration of another vaccine in the last 14 days known hypersensitivity to the active substance or to any of the following excipients: ALC-0315 = (4-hydroxybutyl) azanediyl)bis (hexane-6,1-diyl)bis(2-hexyldecanoate) ALC-0159 = 2-[(polyethylene glycol)]-2000]-N, N-ditetradecyulaceta mide 1,2 Distearoyl-sn glycerol-3-phosphocholine polyethylene glycol cholesterol potassium chloride potassium	Individuals not meeting the eligibility criteria will be directed to discuss and seek immunization with their primary care provider who is most familiar with their medical history. Individuals with the following conditions, or receiving the following therapies, should be directed to consult with their primary care provider who is most familiar with their medical history prior to vaccination: • autoimmune disease, immunocompromised or receiving immunosuppressant therapy. • receiving anticoagulant therapy or has a known bleeding disorder that would contraindicate an intramuscular injection • pregnant or breastfeeding.

Drug	Name & Dosage Range	Indications	Absolute Contraindications	Special Considerations
			phosphate - sodium chloride - disodium hydrogen phosphate dehydrate - sucrose - potassium - sodium • temperature of greater than or equal to 38 degrees Celsius	
COVID-19 mRNA-1273 Vaccine	COVID-19 mRNA-1273 Vaccine is administered intramuscularly in the deltoid muscle after dilution. It is administered as a series of two doses (0.5 mL each) 28 days apart Intact vials can remain at room temperature for up to 12 hours. After puncture they must be discarded after 6 hours. The product must be used within 6 hours of being drawn.	The following applies for both the first and second dose administrations. Vaccine Recipients presenting to be vaccinated and meeting the criteria of the targeted vaccination group must: • pass the COVID-19 Screening Criteria • be 18 years of age and older AND • provide Informed consent AND • indicate no contraindicati ons based on the list of known contraindicati ons during	Do not administer the vaccine if: - Particulates or discoloration are present upon visual inspection of the vial. Do not administer the vaccine if the Vaccine Recipient has any of the following: - anaphylactic reaction to previous vaccinations and/or a history of anaphylaxis to medications or food - administration of another vaccine in the last 14 days - known hypersensitivity to the active substance or to any of the following excipients: - 1, 2-distearoyl-sn-glycero-3-phosphocholine	Individuals not meeting the eligibility criteria will be directed to discuss and seek immunization with their primary care provider who is most familiar with their medical history. Individuals with the following conditions, or receiving the following therapies, should be directed to consult with their primary care provider who is most familiar with their medical history prior to vaccination: • autoimmune disease, immunocomprom ised or receiving immunosuppress ant therapy. • receiving anticoagulant therapy or has a known bleeding disorder that would contraindicate an intramuscular

Drug	Name & Dosage Range	Indications	Absolute Contraindications	Special Considerations
		the consent process for vaccination	(DSPC) - Acetic acid - Cholesterol - Lipid SM-102 - PEG2000 DMG 1,2-dimyristoyl-rac-glycerol,methoxy-polyethyleneglycol - Sodium acetate - Sucrose - tromethamine hydrochloride	injection • pregnant or breastfeeding.
			Temperature of greater than or equal to 38 degrees Celsius	
Alpha and beta-adrenergic agonist	Epinephrine HCL 1:1,000 (1 mg/mL) IM STAT. Administer 0.3 mg which is 0.3 mL intramuscular injection Dose may be repeated twice, administered 3 to 5 minutes apart	Vaccine recipient observed or indicates Anaphylaxis or acute hypersensitivity reaction to administration of vaccine		 Epinephrine dosing may be repeated twice, administered 3 to 5 minutes apart Call for assistance as per the clinic's escalation protocol including calling 911 Transfer patient to an Emergency Department immediately
Antihistamines	{BENADRYL} diphenhydrAMINE 25 to 50 mg IM or PO as needed	Vaccine recipient observed or reporting hives, or allergic asthma	Do not administer if vaccine recipient has: • a history of hypersensitivity to {BENADRYL} diphenhydramine Avoid use in persons with narrow-angle glaucoma, pylorodudenal obstruction, symptomatic prostatic hypertrophy or bladder neck obstruction	 May cause CNS depression –impaired physical or mental abilities. Use in caution when requiring tasks that require mental alertness Due to anticholinergic properties, use with caution if taking medications that contain anticholinergic properties

Required Education:

The RN/RPN will complete any required education and will be evaluated by a clinical supervisor to ensure competency.

Implementation:

- Particulates or discoloration are present upon visual inspection of the vial.
- Before and after dilution, the vaccine should present as an off-white solution with no visible particulate.
- Never shake the vaccine vial.
- Vaccine vials must be used within 6 hours of dilution and stored at a temperature between 2 degrees Celsius and 25 degrees Celsius.
- Do not mix COVID-19 mRNA Vaccine with other vaccines or products in the same syringe.
- Individuals who receive one dose of COVID-19 mRNA Vaccine BNT 162b2 should receive a second dose of COVID-19 mRNA Vaccine BNT 162b2 to complete the vaccination series.
- Individuals may not be protected until at least 7 days after their second dose of the vaccine.
- Adverse reactions from clinical studies include but may not be limited to:

Arthralgia, myalgia	Very common	
Headache	Very common	
Injection site pain, fatigue, chills,	Very common	
pyrexia		
Redness at injection site, injection	Common	
site swelling		
Nausea	Common	
Malaise	Uncommon	
Lymphadenopathy	Uncommon	
Anaphylaxis	Rare	