

**From:** Dr. Janice Fitzgerald, Chief Medical Officer of Health

**To:** Physicians and Other Primary Care Providers

**Re:** COVID-19 Fall Booster Vaccine Program

**Date:** September 21, 2022

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The Department of Health and Community Services (HCS) continues to collaborate with the Public Health Agency of Canada (PHAC) and other provinces and territories to monitor the global COVID-19 situation. The epidemiology of COVID-19 continues to change and it is possible that the incidence of COVID-19 may increase in the later fall and winter seasons and that new variants of concern (VOCs) may emerge.

Current data suggest that COVID-19 vaccines continue to provide significant protection against hospitalization, severe disease and death from COVID-19. **On Wednesday, September 21st** all adults, adolescents, and children 5 to 11 years of age will be eligible for a fall booster with an authorized monovalent (ancestral) COVID-19 vaccine regardless of the number of COVID-19 vaccine doses previously received.

On September 1, 2022, Health Canada authorized the use of Moderna Spikevax Bivalent COVID-19 vaccine as a booster dose of 50mcg (0.5mL) in adults  $\geq 18$  years of age. The Moderna Spikevax Bivalent COVID-19 vaccine is the first bivalent Omicron BA.1- containing mRNA COVID-19 vaccine authorized for use in Canada. Health Canada authorization and NACI recommendations for use of the Pfizer bivalent formulation are expected in Canada in the coming weeks.

NL will be receiving approximately 63,550 doses of Moderna bivalent vaccine by the end of September 2022. NL anticipates a supply of Pfizer bivalent vaccine once approved by Health Canada. Further projections on vaccine allocations into October are anticipated in the coming weeks. Based on the limited allocations noted above, HCS is authorizing the use of bivalent Omicron-containing mRNA COVID-19 vaccine for those at increased risk of severe illness from COVID-19 until bivalent vaccine is readily available to a greater number of the population.

- Based on expected provincial vaccine allocations, and consistent with NACI recommendations, initial eligibility criteria for the bivalent formulations in Newfoundland and Labrador include:
  - Adults 65 years of age and older
  - Residents of long term care facilities or congregate living settings for seniors
  - Adults in or from First Nations, Metis, or Inuit communities, where infection can have disproportionate consequences
  - Adults in racialized communities and/or marginalized communities (e.g. people living with disabilities) disproportionately affected by COVID 19

- Residents of other congregate care settings (e.g. shelters, group homes, correctional facilities) who are 18 years of age or older.
- Individuals 12 years of age or older with an underlying condition that places them at high risk of severe COVID-19 disease, which includes:
  - Down syndrome
  - Pregnancy
  - The following chronic conditions:
    - asthma (moderate to severe)
    - dementia
    - diabetes
    - heart disease
    - high blood pressure
    - kidney disease
    - liver disease
    - lung disease
    - stroke
    - a body mass index [BMI] of 40 or more
  - Immune compromise, including the following:
    - Active treatment for solid tumor or hematologic malignancies
    - Receipt of solid-organ transplant and taking immunosuppressive therapy
    - Receipt of chimeric antigen receptor (CAR)-T-cell therapy or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)
    - Moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
    - Stage 3 or advanced untreated HIV infection and those with acquired immunodeficiency syndrome
    - Active treatment with the following categories of immunosuppressive therapies: anti-B cell therapies (monoclonal antibodies targeting CD19, CD20 and CD22), high-dose systemic corticosteroids (prednisone equivalent of  $\geq 2$  mg/kg/day or 20 mg/day if weight  $> 10$  kg, for  $\geq 14$  days), alkylating agents, antimetabolites, or tumor-necrosis factor (TNF) inhibitors and other biologic agents that are significantly immunosuppressive.

Individuals will be encouraged to receive their booster dose 20 weeks from their last vaccine dose and 3 months from COVID-19 infection. Epidemiology and viral factors (e.g., a new circulating VOC) may necessitate a change in the dose interval in the future and HCS will provide updates as warranted.

NACI continues to recommend a primary series with an authorized mRNA vaccine in all authorized age groups.

Appointments for fall COVID-19 boosters will be available starting September 21, 2022. Pharmacists and physicians will be able to offer boosters of ancestral vaccine as well as bivalent vaccine. During the initial roll out, pharmacists and physicians will be asked to order bivalent vaccine based on booked appointments and not stockpile vaccine. This



ensures equal distribution and access of bivalent vaccine between pharmacists, physicians, and public health, and will be a short-term measure while HCS monitors supply. Once more bivalent vaccine is available within the province, vaccine distribution can occur more broadly without restrictions. Ancestral strain vaccine can be ordered as per usual process.

Fall booster vaccines can be given at the same time as other immunizations. This will include the seasonal flu vaccine, once the campaign begins this fall.

Documentation of all vaccine administration is required. Work to allow documentation of bivalent vaccine in EMR in the province is ongoing. In the interim, if physicians choose to offer and administer bivalent vaccine before October 11<sup>th</sup>, 2022, paper documentation will be required. Back entry of vaccine administration documentation for physicians will be entered at the Newfoundland and Labrador Centre for Health Information (NLCHI) and only viewable through HealthNL. Physicians will need to send paper documentation via courier to:

Newfoundland and Labrador Centre for Health Information  
70 O'Leary Avenue  
St. John's, NL A1B 2C7

Communication from HCS and NLCHI will be provided at a later date to advise when physicians can commence electronic documentation of administration of bivalent vaccine.

HCS will continue to provide updates as they become available. Visit the [COVID-19 website](#) for more information on provincial COVID-19 vaccine recommendations.