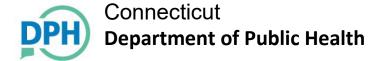
From: CT Department of Public Health <noreply-dphimmunizations@ct.gov>

Sent: Thursday, April 15, 2021 1:27 PM

Subject: J&J Pause - Further information and guidance

Ct.gov



Dear COVID Vaccine providers,

Yesterday afternoon, on April 14, the Advisory Committee on Immunization Practices (ACIP) met and decided to extend the current pause on the administration of J&J COVID-19 vaccine, citing the need to collect and assess more data before lifting the pause or offering additional clinical guidance regarding continued use of the J&J vaccine. The meeting information and materials can be found here.

There is a Clinician Outreach and Communication Activity (COCA) call starting shortly (2p today). Details for the call-in information are below, and providers are encouraged to attend.

Detail about the J&J pause

At this time, it is not known exactly when J&J administration will resume nor whether there will be changes to the label and guidance for patients.

For the time being, providers should:

- Mark any Janssen/J&J vaccine in your inventory "Do not use. Awaiting guidance."
- Continue to store the vaccine in the refrigerator between 2°C and 8°C (36°F and 46°F).
- Follow <u>vaccine storage practices</u> and continue to monitor and document storage unit temperatures.

In addition, orders for mRNA vaccines should be placed as usual by Tuesday of this coming week. No orders for J&J should be placed. We will let you know when J&J is available again for ordering.

Using mRNA vaccines in place of J&J

All vaccine providers should plan to not use J&J for the foreseeable future. In an effort to continue to quickly increase vaccine coverage levels in Connecticut, as well as continue our outreach and equity efforts, providers are encouraged to switch to mRNA vaccines for all vaccination efforts. This includes homebound vaccinations, mobile teams, administration of vaccine in EDs, and administration upon discharge to SNFs.

Providers should make all reasonable efforts to administer the second doses to these individuals. However, potential loss to follow-up should not prevent a first dose from being administered.

Specifically, providers are advised to:

- Hold second dose clinics at the same time of day and day of week as the first dose clinic
 at the appropriate interval for all mobile clinics
- Schedule the second dose at the time of the first dose
- Use multiple methods to remind patients to return for their second doses including email, phone call, and text messages
- If a patient does not return for their second dose on schedule, make at least three attempts to recall the patient before considering them to be lost to follow-up

For administration upon discharge to SNFs or other cases where the patient cannot easily return to the site of the first dose for the second dose, we expect that greater availability of vaccine in the community will allow these individuals to get a second dose in an alternative setting.

Reminder re: VAERS

All CoVP providers are required to report any adverse events to the Vaccine Adverse Event Reporting System (VAERS). VAERS is a passive data collection system that accepts reports from any patient or provider regarding confirmed and potential adverse events relating to vaccination. Please see the CDC webpage for more information and review the latest news from CDC's Health Alert Network. The link below can be used to access the VAERS webpage to complete a report.

VAERS: https://vaers.hhs.gov/

COCA Call

Providers should join today's COCA call at 2-3 pm. There will be a presentation of the latest evidence on cerebral venous sinus thrombosis (CVST) with thrombocytopenia associated with the administration of the Johnson & Johnson/Janssen COVID-19 vaccine. Speakers will discuss what is known about CVST, the importance of early detection, and updated vaccine recommendations. There will be a web ondemand version of the call available after the live event.

Access the call in details here: https://emergency.cdc.gov/coca/calls/2021/callinfo 041521.asp

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