Appendix 1: Summary Table of Vaccination Recommendations

S/N Recommendations Two Vaccine Doses Recommended for Unvaccinated 1. Persons aged 6 months and above are recommended to receive one of the following vaccines, with doses received 8 weeks apart: Vaccine **Doses** Pfizer-BioNTech/Comirnaty 6 months to 4 years Two 3mcg doses 2 Pfizer-BioNTech/Comirnaty 5 to 11 years Two 10mcg doses Pfizer-BioNTech/Comirnaty 3 12 years and above Two 30mcg doses 4 Moderna/Spikevax 6 months to Two 25mcg doses years Moderna/Spikevax 5 12 years and above Two 50mcg doses Novavax/Nuvaxovid* 6 12 years and above Two 5mcg doses Persons aged 18 years and above who are medically ineligible to complete the primary vaccination series with the mRNA vaccines or Novavax/Nuvaxovid vaccine may receive the Sinovac-CoronaVac vaccine to complete their primary series. These persons should receive a total of 2 doses of vaccines (inclusive of the mRNA vaccines or Novavax/Nuvaxovid vaccine) to complete their primary vaccination series. The recommended interval between doses is eight weeks. Individuals, particularly those who are at risk for exposure to COVID-19 or severe disease, may receive the second dose earlier than eight weeks after the first dose but not less than the intervals (21 days for the Pfizer-BioNTech/Comirnaty Novavax/Nuvaxovid vaccines and 28 days for Moderna/Spikevax and Sinovac-CoronaVac vaccines). The Novavax/Nuvaxovid vaccine is currently unavailable under the National Vaccination Programme. Novavax is in the process of filing for regulatory approval for its updated COVID-19 XBB.1.5 vaccine formulation. 2. **Enhanced Primary Series for Immunocompromised** Persons with moderate to severe immunocompromise are recommended to receive a total of three doses of the mRNA vaccines). This comprises a third primary vaccine dose two months after the second dose as part of an enhanced three-dose primary series. This includes persons with the following conditions: a. Transplant patients on immunosuppressive therapy, including solid organ and allogenic stem cell transplants b. Cancer patients on active treatment with chemotherapy and immunosuppressive therapy c. Haematological cancers

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- d. Immunosuppressive treatment for non-cancer conditions
- e. End-stage kidney disease
- f. Advanced or untreated HIV

Children aged 6 months to 4 years who are immunocompromised are recommended to receive an enhanced primary series comprising three doses of the Moderna/Spikevax vaccine or Pfizer-BioNTech/Comirnaty vaccine.

3. Additional Dose for Year 2023/2024

After having completed the recommended doses above and any other additional doses previously (where applicable), persons aged 6 months and above may receive in 2023/2024, one additional dose of COVID-19 vaccine at an interval of around 1 year (minimally 5 months) after their last dose. The additional dose is:

- a. Recommended for all persons aged 60 years and above, medically vulnerable individuals and residents of aged care facilities;
- Encouraged for all individuals aged 6 months and above, in particular, healthcare workers, as well as household members / caregivers of medically vulnerable individuals

Immunocompromised persons can be considered to receive the additional dose of COVID-19 vaccine from 5 months after their last dose in consultation with their treating physician for better protection.

4. Persons who Have Recovered from COVID-19

Recovered persons who were unvaccinated, or partially vaccinated before their infection can proceed to complete the standard primary vaccination series. They are recommended to receive remaining vaccine doses from 3 months or more after the date of infection to reduce their risk of reinfection.

Recovered persons who are recommended to receive an additional COVID-19 vaccine dose after their last vaccine dose should do so at the recommended interval thereafter, and at least **28 days** after the infection although an interval of three months from the infection is recommended for better effectiveness.

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Appendix 2: Common Examples of Allergies and Guidance for COVID-19 Vaccination

Allergy Information	Vaccination Decision
25/M with urticaria to penicillin and cephalosporins.	Can vaccinate
Had history of throat swelling, shortness of breath	Persons with anaphylaxis to
and dizziness, no ulcers.	drugs/medications can be
	vaccinated.
35/F with hives to ibuprofen and celecoxib.	Can vaccinate
Had throat swelling with celecoxib and some	Persons with anaphylactoid
<u>dizziness</u> .	reactions can be vaccinated
45/F with eye and lip swelling to naproxen and	Can vaccinate
paracetamol.	Persons with
No throat swelling, no shortness of breath, no	drugs/medications allergies
dizziness, no ulcers. No history of anaphylaxis or	can be vaccinated
Epi-Pen use.	
35/M with hives that started 8 hours after first dose	Can vaccinate
of mRNA-COVID-19 vaccine. No throat swelling, no	Persons with non-severe
shortness of breath, no dizziness.	skin reaction occurring
Did not see a doctor. Rash took 2 days to resolve	more than four hours after
with antihistamines.	vaccination
35/F with fever and arm swelling after first dose of	Can vaccinate
COVID-19 vaccine.	Non-allergic side effect.
Injection site erythema and swelling was	
approximately 6 cm.	
45/F with rash on limbs after eating crab.	Can vaccinate
No throat swelling, no shortness of breath, no	Persons with food allergies
dizziness. Resolved in half a day.	can be vaccinated
30/F with shortness of breath and dizziness after	Can vaccinate
eating peanuts.	Persons with anaphylaxis to
	food can be vaccinated.
Used Epi-Pen to resolve symptoms	
	History of Epi-pen usage
	can be vaccinated
55/M with diabetes, <u>SJS</u> to Bactrim.	Can vaccinate
Severe rash, with lip ulceration, admitted for a week	SJS is not a
for SJS.	contraindication
No throat swelling, no shortness of breath, no	
dizziness.	

55/F with HIV, also macular-papular rash to Bactrim	Can vaccinate
CD4 = 540 cells/mm ³ , virologically controlled.	Allergy is not anaphylaxis
No throat swelling, no shortness of breath, no	
dizziness, no ulcers	

M – Male

F – Female

SJS – Steven-Johnson Syndrome

Appendix 3: List of Medical Conditions for Which Persons are Considered Medically Vulnerable to Severe COVID-19 (current as of 26 October 2023)

The Expert Committee on COVID-19 Vaccination has recommended that medically vulnerable persons who are at higher risk of severe disease due to medical risk factors should receive an additional dose of COVID-19 vaccine in 2023/2024, at an interval of one year after the last dose.

Persons with the following conditions are recommended to receive the additional dose in 2023/2024:

- 1. Diabetes
- 2. Heart conditions such as heart failure, ischemic heart disease, cardiomyopathy
- 3. Chronic lung conditions, including severe asthma
- 4. Chronic liver conditions, including cirrhosis
- 5. Chronic kidney conditions, including dialysis
- 6. Chronic neurologic conditions, including stroke
- 7. Cancer on active treatment
- 8. Blood conditions such as thalassemia and sickle cell anemia
- 9. Immunodeficiencies, including HIV infection
- 10. Obesity (BMI \geq 30)
- 11. Genetic or metabolic conditions, including Down's syndrome and cystic fibrosis
- 12. Persons on non-cancer immunosuppressive treatment
- 13. Pregnancy (any trimester)