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COVID-19 vaccination programme Phase 2

The Joint Committee on Vaccination and Immunisation (JCVI) is an independent expert advisory committee which advises the UK health departments on vaccination.

In December 2020, JCVI advised the vaccination of 9 key priority groups against COVID-19 ([footnote 1](#)), covering all adults aged 50 years and over, and younger adults with underlying health conditions that put them at specific risk from COVID-19. This part of the programme, termed phase 1, began rollout in the UK from 8 December 2020. Phase 1 aims to reduce mortality from COVID-19, along with the protection of UK health and social care systems.

The programme has been a success in terms of delivery, with over 30 million people having received their first vaccine dose so far ([footnote 2](#)). The COVID-19 vaccines in use in the UK are highly effective and have been shown to substantially reduce the risk of infection and severe disease from COVID-19 ([footnote 3](#)). It has been estimated by Public Health England (PHE) that over 10,000 deaths have been averted by the COVID-19 immunisation in the first 3 months of the programme ([footnote 4](#)).



COVID-19 immunisation
Protect yourself.

CONTENTS

Advice

COVID-19 vaccination during pregnancy – Letter JCVI

New version 4 COVID-19 vaccination guides published and available to order

National protocols for COVID-19 vaccines are updated in line with changes to the programme

Look after your vaccines

Ramadan COVID-19 and vaccination posters and graphics

Vaccines for the national COVID-19 programme supplied by PHE

Moderna COVID-19 vaccine

May bank holiday COVID-19 vaccine deliveries

Reporting an ordering discrepancy via ImmForm

Vaccines for the 2020 to 2021 children's flu programme supplied by PHE

May bank holidays delivery schedules for routine vaccinations

Viper antivenom has changed

Change to dTaP/IPV vaccine for both the pre-school booster and maternal pertussis dTaP/IPV programmes

Update to Bexsero Patient Information Leaflet

MMR vaccine ordering

The EU Falsified Medicines Directive (FMD) and Delegated Regulation

Registering for a new or updating your existing ImmForm vaccine ordering account

Exceptional efforts deliver

The successful delivery of the phase 1 programme can be attributed to the exceptional efforts of the NHS, volunteers and community organisations and the operational simplicity of the programme. Programmes that are less complicated to organise are more readily delivered at speed and are more likely to achieve high vaccine coverage. Data on hospitalisations due to COVID-19 indicate that a substantial number of admissions occur in people under the age of 50 years who would not have been vaccinated in the first phase of the vaccination programme (see [footnote 5](#), [footnote 6](#), [footnote 7](#), [footnote 8](#) and [footnote 9](#)).

JCVI has been asked by the Department for Health and Social Care (DHSC) to formulate advice on the optimal strategy to further reduce mortality, morbidity and hospitalisations from COVID-19 disease in the next phase of the programme.

Options considered for the next phase (phase 2) of the programme include:

1. direct protection of those at higher risk of serious disease and hospitalisation, including groups associated with an increased risk
2. targeted vaccination to reduce transmission of COVID-19 in the population
3. vaccination of occupational groups at higher risk of exposure

These options are not mutually exclusive.

Mathematical modelling of vaccination strategies for phase 2 indicates that rapid vaccine deployment is the most important means to maximise public health benefits against severe outcomes from COVID-19 ([footnote 10](#), [footnote 11](#)).

A strategy aimed primarily at reducing transmission of infection would take longer to achieve reductions in hospitalisations and would require very high vaccine uptake in the target populations. There is evidence that some occupations have an increased risk of morbidity due to COVID-19 and that males aged 40 to 49 years are more likely to be employed in these occupations ([footnote 12](#), [footnote 13](#)).

However, a mass vaccination strategy centred specifically on occupational groups would be more complex to deliver and may require new vaccine deployment structures which would slow down vaccine delivery to the population as a whole, leaving some individuals unvaccinated for longer. Operationally, simple and easy-to-deliver programmes are critical for rapid deployment and high vaccine uptake.

Advice

This advice refers to COVID-19 vaccines authorised for use in the UK. Progress into phase 2 of the programme should be accompanied by continued efforts to extend coverage among those prioritised in phase 1 but who remain unvaccinated, and to complete delivery of second doses to all those given first doses in phase 1. There is good evidence that the risks of hospitalisation and critical care admission from COVID-19 increase with age. In occupations where the risk of exposure to SARS-CoV-2 is potentially higher, persons of older age are also those at highest risk of severe outcomes from COVID-19.

JCVI therefore advises that the offer of vaccination during phase 2 is age-based starting with the oldest adults first and proceeding in the following order:



In individuals aged 18 to 49 years there is an increased risk of hospitalisation in males, those from certain ethnic minority backgrounds, those with a body-mass index (BMI) of 30 or more (obese or morbidly obese), and those experiencing socio-economic deprivation (see [footnote 5](#), [footnote 6](#), [footnote 7](#), [footnote 8](#), [footnote 9](#) and [footnote 14](#)).

JCVI strongly advises that individuals in these groups promptly take up the offer of vaccination when they are offered, and that deployment teams should utilise their understanding of local health systems and demographics, combined with clear communications and outreach activity, to promote vaccination in these groups.

Unvaccinated individuals who are at increased risk of severe outcomes from COVID-19 on account of their occupation, male sex, obesity or ethnic background are likely to be vaccinated most rapidly by an operationally simple vaccine strategy.

Reactogenicity

Typical side effects from vaccination include injection site pain, headache or mild fever. Such side events are relatively common and are usually mild to moderate in intensity and short-lived ([footnote 15](#)). The frequency of these events is associated with age, with the effects seen most commonly in younger adults. Events typically resolve within a few days of vaccination. Given the frequency of mild to moderate reactions in younger adults, JCVI advises that those attending for vaccination should be informed of the frequency of reactions and that paracetamol can be used in ameliorating symptoms.

Special considerations

There have been reports of an extremely rare adverse event of concurrent thrombosis (blood clots) and thrombocytopenia (low platelet count) following vaccination with the first dose of AstraZeneca ChAdOx1 nCoV-19 vaccine (AZD1222). There has been no signal for thrombosis with thrombocytopenia following receipt of other COVID-19 vaccines approved for use in the UK (Pfizer/BioNTech and Moderna).

Given the very low numbers of events reported overall, there is currently a high level of uncertainty in estimates of the incidence of this extremely rare adverse event by age group. The available data suggests there may be a trend for increasing incidence of this adverse event at younger ages. In contrast, the risk of severe disease associated with COVID-19 increases steeply with age, with the youngest adults at lowest risk. There are currently no known risk factors for this extremely rare condition, which appears to be an idiosyncratic reaction on first exposure to the AstraZeneca COVID-19 vaccine.

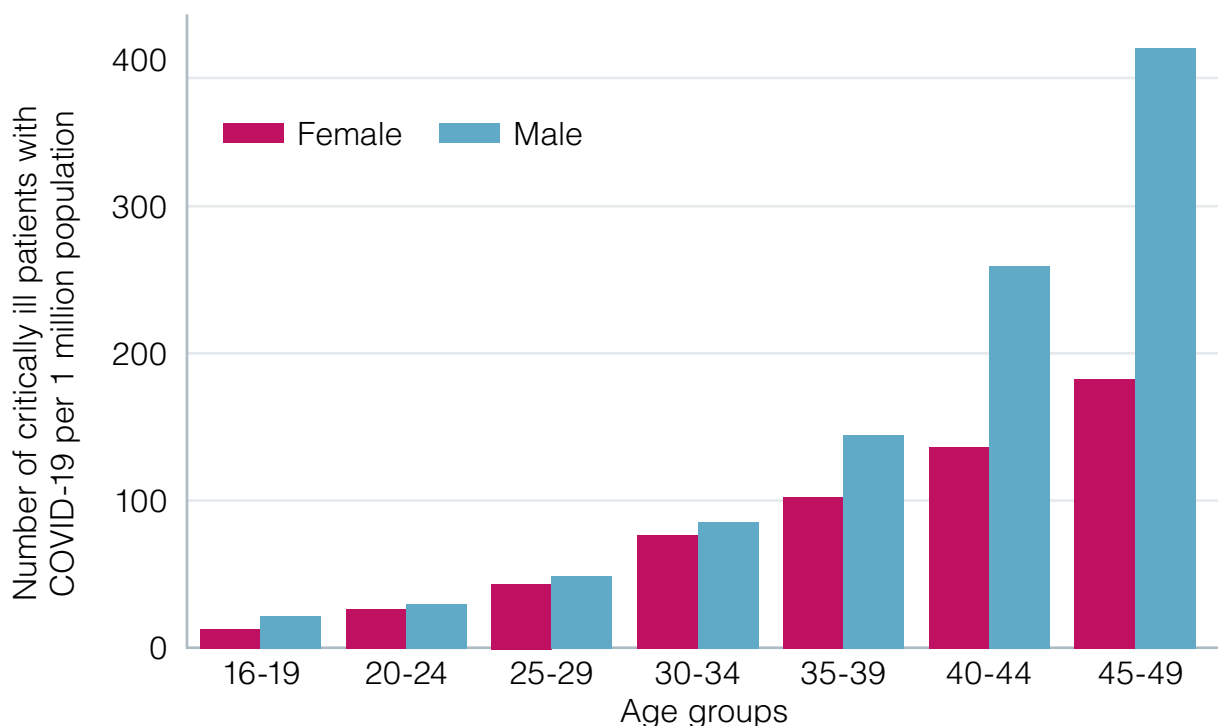
Alternatives to the AstraZeneca COVID-19 vaccine currently approved for use in the UK include the Pfizer/BioNTech BNT162b2 and Moderna mRNA-1273 vaccines. JCVI has weighed the relative balance of benefits and risks, and advises that the benefits of prompt vaccination with the AstraZeneca COVID-19 vaccine far outweigh the risk of adverse events for individuals aged 30 years and over or those at any age who have underlying health conditions which put them at higher risk of severe COVID-19 disease.

JCVI currently advises that in phase 2, it is preferable for adults aged 18 to 29 years without underlying health conditions that put them at higher risk of severe COVID-19 disease, to be offered an alternative to the AstraZeneca COVID-19 vaccine, if available ([weblink 1](#)). People may make an informed choice to receive the AstraZeneca COVID-19 vaccine to receive earlier protection.

Further details on contra-indications, precautions and scheduling will be outlined in the Green Book: immunisation against infectious disease ([weblink 2](#)).

Figure 1: profile of critical care admissions with COVID-19, 1 August 2020 to 31 January 2021 ([footnote 16](#)).

Vaccine priority group 10, admitted 1 August 2020 to 31 January 2021



Male sex

Evidence on hospitalisations indicates an increased risk of hospitalisation in males, particularly those aged 40 to 49 years (Figure 1).

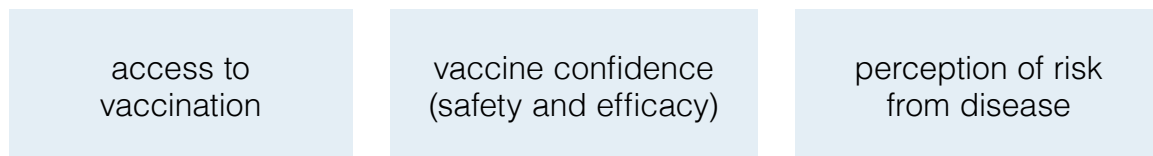
This risk may be associated with male sex itself, exposure to infection, occupation, and/or other factors. JCVI strongly advises that males promptly take up the offer of vaccination.

Persons from ethnic minority backgrounds

People from certain ethnic minority backgrounds are at higher risk of hospitalisation from COVID-19 (see [footnote 5](#), [footnote 6](#), [footnote 7](#), [footnote 8](#), [footnote 9](#) and [footnote 14](#)). This follows a similar pattern to data on mortality reviewed in considerations relating to phase 1 of the programme. There is no strong evidence that ethnicity by itself (or genetic characteristics) is the sole explanation for observed differences in rates of severe illness and deaths. Between waves 1 and 2 of the pandemic, changes in the risk of infection and mortality in people from ethnic minority backgrounds, and within ethnic minorities, have been observed ([footnote 17](#)). Such large rapid changes are unlikely to be due to biological factors and are more likely to be related to environmental and behavioural changes.

Discussions with ethnic minority communities and opinion leaders highlight the importance of building trust and the avoidance of stigmatisation or discrimination when planning the delivery of vaccination programmes ([footnote 18](#), [footnote 19](#)). Thus far, in phase 1 of the vaccination programme, slower coverage has been noted in persons from certain ethnic minority backgrounds ([footnote 20](#)).

Well-recognised factors that impact on vaccine uptake are:



The reasons for slower coverage in people from certain ethnic minority backgrounds are unclear at present, but there is evidence that addressing structural issues related to access and involving community influencers can have a positive impact.

JCVI strongly advises that priority is given to the deployment of vaccination in the most appropriate manner to promote vaccine uptake in persons from ethnic minority backgrounds who have not yet been vaccinated.

This may include planning to enable easy access to vaccination sites, supported engagement with local ethnic minority community and opinion leaders, and tailored communication with local and national coverage. As appropriate, these efforts should consider a longer-term view beyond the current COVID-19 mass vaccination programme and seek to address inequalities that already exist across the wider immunisation programme.

JCVI strongly advises persons from ethnic minority backgrounds who have not yet been vaccinated to promptly take up the offer of vaccination.

Underlying health conditions

Evidence indicates that individuals aged 18 to 49 years who have a BMI over 30 (obese or morbidly obese) ([footnote 5](#), [footnote 6](#), [footnote 7](#), [footnote 8](#), [footnote 9](#)) are at higher risk of hospitalisation compared with age matched peers. Only very modest increased risks for hospitalisation were identified in persons with certain other underlying health conditions not already covered in phase 1 of the programme. As the risk is also age associated, JCVI continues to advise that an age-based programme is the best way of delivering vaccine to these populations.

Post-acute COVID-19 syndrome

Prolonged symptoms after acute infection with SARS-CoV2 have been described in people of all ages, including healthy young adults. At present there is limited data on the aetiology, extent, duration and severity of these symptoms. Studies are ongoing to better define the nature of post-acute COVID-19 syndrome, and to identify any factors which could predispose individuals to it. Existing evidence is inadequate to structure a vaccination policy specifically targeting populations at risk of post-acute COVID-19 syndrome ([footnote 25](#)).

As COVID-19 vaccination reduces the risk of acquiring SARS-CoV2 infection, it will reduce the risk of vaccinated individuals developing post-acute COVID-19 syndrome.

COVID-19 vaccination during pregnancy – Letter JCVI

Statement 16 April 2021 ([weblink 3](#))

The advice, published in Public Health England's Green Book, a clinical professional guide for vaccinators in the UK, still advises that pregnant women should discuss the risks and benefits of vaccination with their clinician, including the latest evidence on safety and which vaccines they should receive.

Professor Wei Shen Lim, COVID-19 Chair for JCVI, said:

We encourage pregnant women to discuss the risks and benefits with their clinician – those at increased risk of severe outcomes from COVID-19 are encouraged to promptly take up the offer of vaccination when offered. There have been no specific safety concerns from any brand of COVID-19 vaccines in relation to pregnancy.

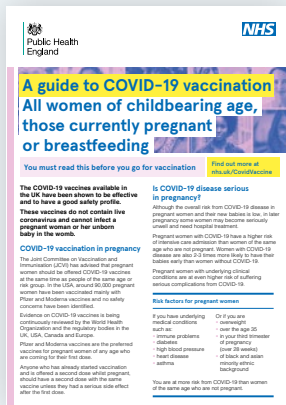
There is more real-world safety data from the US in relation to the Pfizer-BioNTech and Moderna vaccines in women who are pregnant – therefore, we advise a preference for these to be offered to pregnant women.

All vaccines being used in the UK have undergone robust clinical trials and have met the Medicines and Healthcare products Regulatory Agency (MHRA)'s strict standards of safety, effectiveness and quality.

Dr Mary Ramsay, Head of Immunisation at Public Health England (PHE), said:

The available data on the Pfizer-BioNTech and Moderna vaccines provides confidence that they can be offered safely to pregnant women. The COVID-19 vaccines continue to save thousands of lives and it is important that we encourage as many people as possible to take up the offer when it is their turn ([weblink 7](#)).

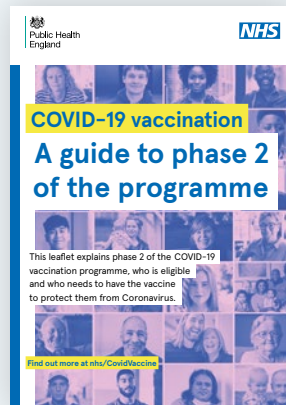
New version 4 COVID-19 vaccination guides published and available to order



Guide for childbearing, pregnant or breastfeeding women V4

Copies of the English leaflets are available to order using product code COV2020374V4

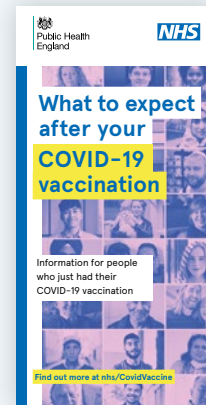
See [weblink 4](#)



Guide for adults – Phase 2 COVID-19 vaccination programme V4

Copies of the English leaflets are available to order using product code: COV2020351V4

See [weblink 5](#)



What to expect after your COVID-19 vaccination V4

Copies of the English leaflets are available to order now using product code: COV202307V4EN

See [weblink 6](#)

National protocols for COVID-19 vaccines are updated in line with changes to the programme

An updated protocol for the AstraZeneca COVID-19 vaccine programme which includes cautions relating to reports of blood clots, has been published on 27 April 2021 ([weblink 8](#), [weblink 9](#)).

Look after your vaccines

Please take a few minutes over the next week to check that all the staff involved with monitoring the vaccine fridge temperatures in the setting in which you give vaccines know how to accurately record the current, minimum and maximum temperatures and know how to RE-SET the fridge thermometer after each reading.

The PHE national immunisation team have been involved in advising on several cold chain incidents already this year and one of the main issues has been the absence of re-setting. Pages of temperature recordings for some of these incidents have been provided all with identical minimum/maximum readings, often out of range for days or weeks with no action taken. Readings of current/minimum/maximum temperature should ideally be taken and recorded at the beginning and end of each day and immediate action should be taken if any of these are found to be outside the recommended +2°C to +8°C temperature range.

Please help prevent vaccine wastage and maintain vaccine potency and patient confidence by ensuring everyone involved has access to your local cold chain protocol, that all know how to find and use the RE-SET button appropriately and that all staff know what action they need to take if any of the min/max/current temperatures are outside of the recommended range.

Public Health England **NHS**

Keep your vaccines healthy

When ordering

- Order when you have two to four weeks' worth of stock left
- You can make weekly orders, so it's best to order smaller amounts regularly
- Some vaccines come in multidose packs - check you order the correct number of doses
- Check vaccine Update newsletter for latest information

When receiving your order

- Check your delivery is correct and undamaged before you sign for it
- Refrigerate the stock as soon as you have checked it off against the order
- Do not open the fridge as this restricts the airflow
- Ensure the prepared stock is placed at the front of the fridge

When stocking your fridge

- Check expiry dates regularly - never use out of date vaccine
- Keep vaccines in their original packaging in the main part of the fridge, not in drawers
- Keep your fridge door locked at all times
- Keep the opening of the fridge door to a minimum
- Use a maximum-minimum thermometer and keep a daily record of the temperature
- Have back-up storage for your vaccines in case of power failure
- Position the fridge away from heat sources and make sure the fridge plug to avoid it being tripped off accidentally
- See Chapter 3 of the Green Book for more information

Keep a record of your account details

Our NHS MyMantle account number is
We need to place orders before 11:55 am on a for a delivery on

When responding to a vaccine change incident, please follow the guidance at www.gov.uk/government/uploads/system/uploads/attachment_data/file/92556/green-book-chapter-3-2019.pdf in the event of vaccine storage. Please email gov.uk@nhs.uk or the [NHS](https://www.gov.uk/government/organisations/nhs) on 0300 300 2400.

immunisation

Fridge magnets and posters can be ordered free here

Keep your vaccine healthy cold chain fridge magnet

Product code: CCPVM02

See [weblink 10](#)

Public Health England **NHS**

PROTECT YOUR VACCINES TO PROTECT YOUR PATIENTS

READ minimum and maximum temperatures

RECORD temperatures for each one on a log sheet

RESET the thermometer after each reading

REACT if the temperature is in the danger zone

Strive for 5°C

DANGER! Above 8°C or below 2°C may damage your vaccines

PH Product code: CCPVM02

Keep your vaccines healthy poster

Product code: CCPVP01

See [weblink 11](#)

Public Health England

Which COVID-19 vaccine?

Pfizer/BioNTech	AstraZeneca	Moderna
Age 16 years of age	Age 18 years of age	Age 18 years of age
Minimum interval between 2 doses 21 days	Minimum interval between 2 doses 28 days	Minimum interval between 2 doses 28 days
Number of doses 2	Number of doses 2	Number of doses 2
Storage -80°C to -120°C	Storage -2°C to +8°C	Storage -20°C to +10°C
Observation period 15 minutes	Observation period 15 minutes	Observation period 15 minutes

Resources:

Green Book Chapter 3: www.gov.uk/government/uploads/system/uploads/attachment_data/file/92556/green-book-chapter-3-2019.pdf

Which COVID-19 vaccine to use poster – now with added Moderna – order or download today

Paper copies of this poster can be ordered

using product code: COV2020520C

See [weblink 12](#)

Ramadan COVID-19 and vaccination posters and graphics

As Ramadan started earlier this month and lockdown begins easing, the Muslim community will want to start to reunite to celebrate this holy month. These posters are a reminder to continue to practise social distancing, to wear a mask and avoid crowded gatherings so people can continue to protect themselves and their families from COVID-19. It also explains that for most Muslims, it is permitted to have their COVID-19 vaccinations, if they are called to do so during the fasting period.

It is hoped that they will be ordered by screening and immunisation teams, local councils and widely used in communities, retail, food outlets, religious settings, high street locations, hairdresser, barber and beauty shops, vaccination centres and transport settings such as train stations and cab offices.

Subscribe to Vaccine update [here](#). Order immunisation publications [here](#).
For centrally-supplied vaccine enquiries, email: vaccinesupply@phe.gov.uk

We have published a set of three posters on .GOV and paper copies are available to order from the Health Publications website:



COVID-19 vaccination and Ramadan collage poster A

Product code:
COV2020606A
[Weblink 13](#)



COVID-19 vaccination and Ramadan poster B

Product code:
COV2020606B
[Weblink 14](#)



COVID-19 vaccination and Ramadan poster C

Product code:
COV2020606C
[Weblink 15](#)

The Ramadan posters are available in the following languages:

- Ramadan poster A in Arabic ([weblink 16](#)), Bengali ([weblink 17](#)) and Urdu ([weblink 18](#))
- Ramadan poster B in Arabic ([weblink 19](#)), Bengali ([weblink 20](#)) and Urdu ([weblink 21](#))
- Ramadan poster C in Arabic ([weblink 22](#)), Bengali ([weblink 23](#)) and Urdu ([weblink 24](#))

The is also a set of social media assets to accompany the posters.

Download the GIFs and graphics using product code: COV2021006 at [weblink 25](#).

You can share them with the hashtag using the Muslim Council of Britain #SafeRamadan

Ramadan, COVID-19 vaccination posters, infographics and GIFs

You can download the complete folder [here](#) which contains 15 files in total

- 3 poster designs (print for local commercial printing, web ready version and 3 x jpgs for convenience)
- 3 designs infographics
- 4 designs GIFs

Please promote the availability of these posters and resources widely in all your local networks and that paper copies can be ordered free of charge, especially for local councils as well as all settings as above.

We hope that you find these resources useful and are always interested in any feedback about them from your local communities and I would like to wish anyone who will be celebrating a Happy and healthy Eid Mubarak.

Vaccines for the national COVID-19 programme supplied by PHE

Vaccine availability

The vaccines currently available to order by the pre-agreed providers is in the table below.

Manufacturer	Vaccine Name	Presentation	Storage
Pfizer/BioNTech	BNT162b2	Each pack of vaccine contains 195 vials with 5 doses per vial (975 doses per pack).	This vaccine requires ultra-low temperature storage (-80°C to -60°C)
AstraZeneca	ChAdOx1-S	Each pack of vaccine contains 10 vials with 10 doses per vial (100 doses per pack).	2°C to 8°C
AstraZeneca	ChAdOx1-S	Each pack of vaccine contains 10 vials with 8 doses per vial (80 doses per pack).	2°C to 8°C
Moderna*	Moderna COVID-19 vaccine	Each pack of vaccine contains 10 vials with 10 doses per vial (100 doses per pack).	This vaccine requires freezer (-25°C to -15°C)

*Recently made available.

If you have a query in respect of access to COVID-19 vaccines, please contact your SVOC and RVOC teams. Colleagues from Devolved Administrations please refer to guidance from your respective health departments for arrangements in Scotland, Wales and Northern Ireland.

Moderna COVID-19 vaccine

Access to product is for pre-authorized sites only.

The vaccine is available as a 100 dose pack (10 vials, each with 10 doses). Each pack of vaccine ordered will be automatically linked to 3 associated products which will arrive with the vaccine pack:

- PHE-issued vaccination record cards (pack of 100)
- package leaflet: Information for the user (pad of 100)
- a sheet of stickers with vaccine name and batch number on them

Combined needles and syringes for administration of vaccine, including to those morbidly obese, are available to order separately. Please note the combined needles and syringes available to order for administration of the Moderna vaccine are the same products being issued for use with the AstraZeneca vaccine:

- standard vaccine administration – BD Flu+ Combined Needle & Syringe 23G x 25mm (1 inch) with 1ml syringe with graduations at 0.25ml
- vaccine administration to Morbidly Obese patients – Prosum Combined Needle & Syringe 23G x 38mm (1.5 inch) with 1ml syringe with graduations at 0.1ml and 0.25ml

Extra vaccination record cards can be ordered via [weblink 27](#) should you require. These are available in packs of 50. Please only order what you need.

The vaccine will be delivered to your site according to your delivery schedule. The vaccine will be packed in validated packaging to maintain the vaccine storage conditions between -25°C and -15°C during transportation. The vaccine packaging will be dependent on the size of your order.

Unlike with deliveries of Pfizer and AstraZeneca COVID-19 vaccines, a mixed delivery model is utilised for Moderna COVID-19 vaccine using isothermic boxes and Tower cold chain solutions containers:

- the single use isothermic boxes (validated for up to 84 hours) will contain a quantity of ice packs and will be used for delivery of small orders of up to and including 12 packs of vaccine. Upon delivery these boxes will be left at site and should be disposed of in line with local protocols. Dry ice is not included with the product
- the reusable cold chain containers (validated for up to 120 hours) will be used for delivery of vaccine orders of between 13-459 vaccine packs. Upon delivery the Movianto driver will move container from the vehicle to the unloading area where the vaccine will be unpacked by the customer and transferred to a freezer. Dry ice is not included with the product. Containers will not be left at the delivery location and the drivers are aware it will take a few minutes to unload if significant quantities

When placing your orders, take care to ensure that there are staff within the department trained to be able to handle vaccine transfer to the freezer on the expected delivery date.

Further detailed information on each type of delivery is available on ImmForm.

May bank holiday COVID-19 vaccine deliveries

Vaccine and associated products will continue being delivered on a next day delivery schedule.

Customers in Isle of Wight, Welsh GPs and Scottish customers in Shetland, Orkney, Stornoway, Fort William, Inverness and Wick will continue receiving orders per their delivery schedule.

Jersey & Guernsey customers needing delivery during the bank holiday period please contact COVID19PHEsupplies@phe.gov.uk to discuss possible delivery options individually tailored to your locality.



Vaccine supply for the routine vaccination programme

Reporting an ordering discrepancy via ImmForm

You can now report delivery problems and order discrepancies online via your ImmForm account. For more information, please see the ImmForm Help Guide – How To Report An Order Discrepancy, which will be available in due course via the Help Guides link on the ImmForm home page.

Vaccines for the 2020 to 2021 children's flu programme supplied by PHE

Fluarix® Tetra remains available to order for children in England.

PHE does not supply any flu vaccines for patients aged 18 years and over.

All batches of Fluenz® Tetra issued for the 2020 to 2021 children's flu programme have now expired.

Please ensure that all remaining stock is removed from fridges and disposed of in line with local policies. Any disposed stock should be recorded through the stock incident page.

Providing a second dose of flu vaccine after all Fluenz® Tetra has expired

If you still need to give a second dose of flu vaccine 4 weeks after the first dose (for example, for children in clinical risk groups aged 2 to under 9 years who have not received influenza vaccine before), then it is safe and effective to give inactivated vaccine (Fluarix® Tetra) as a second dose.

All influenza vaccines for the 2020 to 2021 season

Information on all influenza vaccines that were available in the UK for the 2020 to 2021 season is available at [weblink 26](#).

May bank holidays delivery schedules for routine vaccinations

Due to the May Bank Holidays, there will be no deliveries or order processing by Movianto UK on Monday 3rd May and Monday 31st May 2021. Please see the table on the following page for revised order and delivery dates.

For customers with standard delivery dates of Monday, please be aware that:

- after the 26th of April, your next available delivery day will be the 10 May 2021
- after the 24th of May, your next available delivery day will be the 7 June 2021

You are reminded to be prepared for the break in deliveries and to order accordingly. Please make sure you have sufficient room in your fridge for any additional vaccine you wish to stock over this holiday period.

May Bank Holiday orders and deliveries

Early May Bank Holiday – Monday 3 May 2021		
Delivery date	Order cut-off date	Order cut-off time
Monday 26 April	Thursday 22 April	11:55 AM
Tuesday 27 April	Friday 23 April	11:55 AM
Wednesday 28 April	Monday 26 April	11:55 AM
Thursday 29 April	Tuesday 27 April	11:55 AM
Friday 30 April	Wednesday 28 April	11:55 AM
Monday 3 May	Closed – No deliveries or order processing	
Tuesday 4 May	Thursday 29 April	11:55 AM
Wednesday 5 May	Friday 30 April	11:55 AM
Thursday 6 May	Tuesday 4 May	11:55 AM
Friday 7 May	Wednesday 5 May	11:55 AM
Monday 10 May	Thursday 6 May	11:55 AM

Late May Bank Holiday – Monday 31 May 2021		
Delivery date	Order cut-off date	Order cut-off time
Monday 24 May	Thursday 20 May	11:55 AM
Tuesday 25 May	Friday 21 May	11:55 AM
Wednesday 26 May	Monday 24 May	11:55 AM
Thursday 27 May	Tuesday 25 May	11:55 AM
Friday 28 May	Wednesday 26 May	11:55 AM
Monday 31 May	Closed – No deliveries or order processing	
Tuesday 1 June	Thursday 27 May	11:55 AM
Wednesday 2 June	Friday 28 May	11:55 AM
Thursday 3 June	Tuesday 1 June	11:55 AM
Friday 4 June	Wednesday 2 June	11:55 AM
Monday 7 June	Thursday 3 June	11:55 AM

Please be advised that Emergency or “Out of Schedule” deliveries cannot be arranged for failure to place orders in good time.

Viper antivenom has changed

The viper antivenom product supplied via ImmForm has recently changed from ViperaTAb[®] to Viperfav[®]. The products have different active ingredients, formulations and presentations:



Product	ViperaTAb [®]	Viperfav [®]
Source of immune sera	Ovine	Equine
Licensed status	Unlicensed in the UK	Unlicensed in the UK
Storage	Store in a refrigerator between 2°C and 8°C	Store in a refrigerator between 2°C and 8°C
Presentation	Each pack includes 2 x 4ml vials, containing 100mg Fab fragments each.	Each pack includes 1 x 4ml vial containing F(ab') ₂ fragments.
Initial treatment recommendation	The initial dose of ViperaTAb [®] is the contents of 2 x 4ml vials (i.e. 1 pack per patient).	The initial dose of Viperfav [®] is the contents of one x 4ml vial (i.e. 1 pack per patient).

Recommendations for the treatment of common adder bites and the administration of Viperfav[®] can be found on TOXBASE ([weblink 28](#)). To minimise wastage, please use all locally held stocks of in date ViperaTAb[®] to treat eligible patients, before switching to Viperfav[®].

Change to dTaP/IPV vaccine for both the pre-school booster and maternal pertussis dTaP/IPV programmes

Boostrix-IPV[®] is currently supplied for both the pre-school booster and maternal pertussis dTaP/IPV programmes. This has recently changed from Repevax[®].

The two vaccines are equivalent. To minimise wastage, please use all your locally held stocks of Repevax[®] to vaccinate eligible individuals, before switching to Boostrix-IPV[®]. There is no other change to the pre-school booster or maternal pertussis immunisation programme.

Further details about this programme can be found in chapter 24 of the Green Book ([weblink 2](#)).

Update to Bexsero Patient Information Leaflet

Every pack of Bexsero (Meningitis B vaccine; 10 doses) is supplied with a pad of 10 Patient Information Leaflets (PILs), as well as there being a single PIL inside each Bexsero pack. Since September 2020, an updated version of the PIL pad has been distributed with Bexsero orders. Please dispose of the single PIL from inside the pack, as it will be out-of-date. We will advise further when the PIL supplied in the pack is in line with the PIL pad.



MMR vaccine ordering

To rebalance central supplies of both MMR vaccines please consider ordering M-M-RvaxPRO® as your first choice, which is available without restriction.

Customers in England and Wales who require Priorix®, for example because you serve communities that do not accept vaccines containing porcine gelatine, may order up to **6 packs** of Priorix® per ImmForm account per week. For assistance please contact the ImmForm Helpdesk at helpdesk@immform.org.uk. Customers in Scotland should refer to their local ordering restrictions.

The EU Falsified Medicines Directive (FMD) and Delegated Regulation as applicable to PHE supplied vaccines for the national immunisation programme

From 11pm on 31 December 2020, when the UK's EU exit transition period ended, the 'safety features' Delegated Regulation (2016/161) under the EU Falsified Medicines Directive (FMD; 2011/62/EU) no longer applied in Great Britain.

This means that in Great Britain, end users of the majority of prescription-only medicines, including the FMD-compliant products supplied by PHE via ImmForm, are no longer required to verify or decommission the unique identifiers on serialised packs. Serialised packs can nonetheless continue to be dispensed for as long as they are still in date.

Registering for a new or updating your existing ImmForm vaccine ordering account

When you register for or update an existing ImmForm account, Public Health England as a wholesaler of vaccines need to verify the requesting customer.

Please ensure you have your professional regulatory body registration number or Wholesaler Dealer Licence and an organisation code which can be verified when requesting updates or requesting a new vaccine ordering account.

For more information please see the ImmForm Helpsheets – How to register ([weblink 29](#)).

Vaccine Supply for the non-routine programme

HEPATITIS A VACCINE

Adult

- GSK: Havrix Adult PFS singles and packs of 10 are available
- Sanofi Pasteur: Avaxim PFS singles and packs of 10 are available
- MSD: VAQTA Adult is available

Paediatric

- GSK: Havrix Paediatric PFS singles and packs of 10 are available
- MSD: VAQTA Paediatric is available

HEPATITIS B VACCINE

Adult

- GSK: Engerix B PFS singles and packs of 10 are available
- GSK: Engerix B single vials are discontinued
- GSK: Engerix B vials packs of 10 are discontinued
- GSK: Fendrix is available
- MSD: HBVAXPRO 10 µg is unavailable until late April 2021
- MSD: HBVAXPRO 40 µg is available

Paediatric

- GSK: Limited supplies of Engerix B Paediatric singles are available
- MSD: HBVAXPRO 5µg is available

COMBINED HEPATITIS A & B VACCINE

- GSK: Twinrix Adult singles and packs of 10 are available
- GSK: Twinrix Paediatric is available
- GSK: Ambirix is available

COMBINED HEPATITIS A & TYPHOID VACCINE

- Sanofi Pasteur: Viatim is available

TYPHOID VACCINE

- Sanofi Pasteur: Typhim singles and packs of 10 are available
- Emergent: Vivotif is available

RABIES VACCINE

- Valneva: Rabipur is currently available. Orders should be placed directly with Valneva via the Valneva website ([weblink 30](#)) or via your preferred wholesaler. Vaccine supply contact details: Valneva UK, Tel: 01252 761007.
- Sanofi Pasteur: Rabies BP is currently available without restriction

PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPV)

- MSD: Supply of Pneumovax 23 (PPV23) PFS is currently limited

PNEUMOCOCCAL POLYSACCHARIDE CONJUGATE VACCINE (PCV)

- Pfizer: Prevenar 13 is currently available

VARICELLA ZOSTER VACCINE

- GSK: VARILRIX is available
- MSD: VARIVAX is available
- MSD: ZOSTAVAX is currently available without restrictions

DIPHTHERIA, TETANUS AND POLIOMYELITIS (INACTIVATED) VACCINE

- Sanofi Pasteur: Revaxis is available

DIPHTHERIA, TETANUS, PERTUSSIS (acellular) AND POLIOMYELITIS (inactivated) VACCINE

- GSK: Supply of Boostrix-IPV is currently limited
- Sanofi Pasteur: Repevax is available to order without restrictions

MMR

- MSD: MMR Vaxpro is currently available without restriction
- GSK: Priorix are currently available

MENINGITIS ACWY VACCINE

- GSK: Menveo is available
- Pfizer: Nimenrix is currently available

YELLOW FEVER

- Sanofi Pasteur: Stamaril is available

HUMAN PAPILLOMAVIRUS VACCINE

- MSD: GARDASIL is available but will be discontinued in May 2021
- MSD: Gardasil 9 is currently available
- GSK: Cervarix has been discontinued

CHOLERA VACCINE

- Valneva: Dukoral is available

JAPANESE ENCEPHALYTIS VACCINE

- Valneva: Ixiaro is available

Weblinks

- Weblink 1** <https://www.gov.uk/government/publications/use-of-the-astrazeneca-covid-19-vaccine-jcvi-statement>
- Weblink 2** <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>
- Weblink 3** <https://www.valneva.co.uk/healthcare-professionals/placeanorder>
- Weblink 4** <https://www.gov.uk/government/publications/covid-19-vaccination-women-of-childbearing-age-currently-pregnant-planning-a-pregnancy-or-breastfeeding>
- Weblink 5** <https://www.gov.uk/government/publications/covid-19-vaccination-guide-for-older-adults>
- Weblink 6** <https://www.gov.uk/government/publications/covid-19-vaccination-what-to-expect-after-vaccination>
- Weblink 7** <https://www.gov.uk/government/news/jcvi-issues-new-advice-on-covid-19-vaccination-for-pregnant-women>
- Weblink 8** <https://www.gov.uk/government/publications/national-protocol-for-covid-19-vaccine-astrazeneca-chadox1-s-recombinant>
- Weblink 9** <https://www.gov.uk/government/publications/national-protocol-for-covid-19-vaccine-moderna>
- Weblink 10** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Skeepyourvaccinehealthycoldchainfridgemagnet-460>
- Weblink 11** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Skeepyourvaccineshealthyposter-472>
- Weblink 12** <https://www.gov.uk/government/publications/covid-19-vaccination-vaccine-product-information-poster>
- Weblink 13** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Scovid19vaccinationandramadancollagepostera>
- Weblink 14** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Scovid19vaccinationandramadanposterb>
- Weblink 15** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Scovid19vaccinationandramadanposterc>
- Weblink 16** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Scovid19vaccinationandramadanposteraarabicversion>

Weblinks

- Weblink 17** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanposterabengaliversion>
- Weblink 18** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanposteraurduversion>
- Weblink 19** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanposterbarabicversion>
- Weblink 20** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanposterbbengaliversion>
- Weblink 21** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanposterburduversion>
- Weblink 22** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanposterarabicversion>
- Weblink 23** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanpostercbengaliversion>
- Weblink 24** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationandramadanpostercurduversion>
- Weblink 25** <https://www.healthpublications.gov.uk/ViewArticle.html?sp=S covid19vaccinationsandramadansocialmediagifsandinfographics>
- Weblink 26** <https://www.gov.uk/government/publications/influenza-vaccine-ovalbumin-content>
- Weblink 27** <https://www.healthpublications.gov.uk/Home.html>
- Weblink 28** <http://www.toxbase.org>
- Weblink 29** <https://portal.immform.phe.gov.uk/Help-Guides.aspx>
- Weblink 30** <https://www.valneva.co.uk/healthcare-professionals/placeanorder>