Frequently Asked Questions: MHRA and JCVI guidance on AstraZeneca COVID-19 vaccine and very rare clotting disorders

This document should be read alongside the operational note of 7 April, the JCVI advice and the MHRA advice.

Questions and answers

1. Should we still give people who are under 30 their second dose of AstraZeneca?

   As per JCVI advice for all those in cohorts 1-9 who have received a first dose of AstraZeneca and are due to receive their second dose, appointments should continue unless AstraZeneca is contraindicated. See Regulation 174 information for healthcare professionals on COVID-19 AstraZeneca and COVID-19 vaccination: blood clotting information for healthcare professionals.

2. Who can have a risk benefit conversation with patients?


3. How do people under 30 in Phase 1 access alternative vaccines if they are yet to receive their first vaccination?

   PCN-led Local Vaccination Services, working with system partners including Hospital Hubs, should rebook this group at clinics offering Pfizer BioNtech vaccines over the coming few weeks and they should be offered the opportunity to be contacted at short notice when sites may have excess Pfizer vaccine from second dose clinics.

   For Hospital Hubs, any available Pfizer BioNtech doses should be offered as first doses for those in cohort 1-9 aged under 30 or for those in whom AstraZeneca is contraindicated.

4. What is the expectation of practices that are not signed up to the COVID-19 vaccination enhanced service?

   If you are contacted by a patient under 30, who is eligible for a vaccine in cohorts 1-9, about the AstraZeneca vaccine, you should ensure individual risk versus benefit conversations are made available. You should direct your patient to the appropriate local vaccination site for subsequent vaccination.
5. What if someone under 30 in Phase 1 presents and wants to go ahead with receiving their first dose of the AstraZeneca vaccine, can I give it?

JCVI currently advises that it is preferable for adults under 30 without underlying health conditions that put them at higher risk of severe COVID-19 disease, to be offered an alternative COVID-19 vaccine, if available.

If, following a conversation with a registered healthcare professional, an individual chooses to go ahead with the AstraZeneca vaccination and has no contra-indications, the vaccination sites should make this available following the guidance on obtaining informed consent set out in the Green Book.

6. What if I have a high number of cancellations and Did Not Attends (DNAs) as a result of this change?

Providers should contact people on their reserve list for cohorts 1-9 who are 30 or over if they have cancellations and DNAs.

Community pharmacies whose bookings drop below 400 vaccines per week should speak to their regional team.

7. What if people aged 30 years or over, without contraindications or cautions, have reservations about the AstraZeneca vaccine?

JCVI guidance states that alternative vaccinations should only be offered for first doses for those under 30 and for those for whom AstraZeneca is contraindicated.

JCVI and MHRA have carefully considered the relevant risks of mortality and morbidity from COVID-19 versus benefits of the vaccine as part of the consent process. The MHRA and JCVI have made clear, the balance of risk is still very much in favour of vaccination.

8. What if I administered an AstraZeneca vaccine to someone under 30 in the past month?

The PHE patient leaflet provides information for patients about symptoms and actions to take.

9. Can PCNs offer Pfizer first dose vaccinations to those under 30 who are booked in over the next few days, and will there be supplies of Pfizer for their 2nd dose in 10-12 weeks’ time?

Yes, vaccinations should be offered if they are in eligible cohorts and are under 30. Supplies will be available to sites in time to deliver second doses.

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1. Cohort 1: residents in a care home for older adults and their carers; Cohort 2: all those 80 years of age and over and frontline health and social care workers; Cohort 4: all those 70 years of age and over and clinically extremely vulnerable individuals; Cohort 6: all individuals aged 16 years to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality unpaid carers and household contacts of the immunosuppressed.
10. Can PCN sites request additional Pfizer vaccines for those who cannot have the AstraZeneca vaccine? Will pack down Pfizer be available?

Yes, PCNs will be able to order pack down Pfizer for use in patients under 30 in eligible cohorts if this is necessary. Further information will be issued on this process shortly.

11. If a PCN has spare Pfizer after second doses should we call 18-29 year olds before 49 year olds?

Providers should call patients who are eligible in Cohorts 1-9 as a priority. Second dose guidance should be followed.

12. Will NIVs/NIMs/Pinnacle be updated?

We are currently reviewing these systems and will notify providers of any changes made to reflect and support operationalising this new guidance.

Further information