

# Post COVID-19 vaccination considerations for healthcare workers

## COVID-19 VACCINATION HUB



### Overview

To appropriately evaluate and manage post-vaccination signs and symptoms among healthcare workers (HCW), Western Health will be adopting the following matrix, developed by the Centres for Disease Control and Prevention (CDC) in the United States to reduce risk for disruptions in care provision and pathogen transmission resulting from:

- unnecessarily excluding HCW with only post-vaccination signs and symptoms from work, and
- inadvertently allowing HCWs with SARS-CoV-2 or another transmissible infection to work

### Background

COVID-19 vaccination will help protect you from getting COVID-19. Like all vaccines, you may experience some side effects, which are normal signs that your body is responding to the vaccine and building protection. Common side effects include pain and swelling at the injection site, and systemic symptoms such as fever, chills, tiredness and headache; these should resolve in a few days.

Because systemic post-vaccination signs and symptoms might be challenging to distinguish from signs and symptoms of COVID-19 or other infectious diseases, HCW with post vaccination signs and symptoms could be mistakenly considered infectious and restricted from work unnecessarily; this might have negative consequences for HCW, patients, and residential aged care facility residents. Hence, strategies are needed to effectively manage post-vaccination systemic signs and symptoms and limit *unnecessary* work restrictions.

### Staffing Risk Mitigation Strategies

Western Health will implement the following strategies to reduce the impact of post-vaccination systemic signs and symptoms on staffing:

- Staggering delivery of vaccine to HCW at Western Health, so that not all HCW in a single department, service, or unit are vaccinated at the same time.
- Encouraging vaccination timing to occur prior to rostered days off if possible, during which the HCW would not be on site.
- Inform HCW about the potential for short-term systemic signs and symptoms post-vaccination and potential options for mitigating them if symptoms arise (e.g. nonsteroidal anti-inflammatory drugs and/or paracetamol)
- Any Western Health HCW who has systemic signs and symptoms suggestive of COVID-19 after receipt of vaccination can present to the Sunshine or Sunbury Respiratory Assessment Clinics for assessment and priority testing.

### Signs and Symptoms Matrix

The following matrix will be applied for a HCW who has received COVID-19 vaccination in the prior three days (including day of vaccination, which is considered day one) and are not known to have been exposed to COVID-19 as a close or casual contact within the previous 14 days. Symptomatic HCW who are within 14



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days of a potential exposure (as advised by Department of Health or infection prevention/ contact tracing team) should be excluded from work and tested as per usual processes.

### HCW POST VACCINATION SIGNS AND SYMPTOMS MATRIX

HCW Signs and Symptoms	Management Approach
<p><b>Signs and symptoms <i>unlikely</i> to be from COVID-19 vaccination</b></p> <p>Presence of <b>ANY</b> systemic signs and symptoms consistent with COVID-19 infection (e.g. cough, shortness of breath, runny nose, sore throat, loss of taste or smell) <b>OR</b> another infectious aetiology (e.g. influenza) that are <b>not typical for post-vaccination signs and symptoms</b>.</p>	<ul style="list-style-type: none"> <li>Exclude from work pending evaluation for possible aetiologies, including COVID-19 infection, as appropriate.</li> <li>Criteria for return to work depends on the suspected or confirmed diagnosis.</li> </ul>
<p><b>Signs and symptoms that <i>may be</i> from either COVID-19 vaccination, COVID-19 infection, or another infection</b></p> <p>Presence of <b>ANY</b> systemic signs and symptoms (e.g. fever, fatigue, headache, chills, muscle pain, joint pain) that are consistent with post-vaccination signs and symptoms, COVID-19 infection or another infectious aetiology (e.g. influenza)</p>	<ul style="list-style-type: none"> <li>If HCW has symptoms that preclude them from working based on a failed attestation they <b>should exclude</b> themselves from work during that period.</li> <li>HCW who meet the following criteria may consider returning to work <b>without</b> getting a COVID-19 test: <ul style="list-style-type: none"> <li>Feel well enough and are willing to work <b>AND</b> are afebrile <b>AND</b></li> <li>Systemic signs and symptoms are limited only to those observed following COVID-19 vaccination (i.e. do <b>not</b> have other signs and symptoms of COVID-19 including cough, shortness of breath, sore throat, or change in smell or taste).</li> <li>Symptoms of fever, fatigue, headache, chills, muscle pain, joint pain resolve within 2 days.</li> </ul> </li> <li>If the HCW's symptoms post vaccination are not improving or persist for more than 2 days, they should continue to be excluded from work and should seek a COVID-19 swab.</li> </ul>
<p><b>The following signs and symptoms, alone, are not consistent with COVID-19 infection</b></p> <p>Presence of immediate hypersensitivity reactions (e.g. pink or red itchy rashes, anaphylaxis) <b>AND/OR</b> local symptoms (e.g. pain, swelling, or redness at injection site)</p>	<p>Manage per usual protocols for vaccine-related side effects. Exclusion from work is not necessary</p>

**NOTE:** These considerations are based on the current understanding of signs and symptoms following COVID-19 vaccination, including timing and duration, and might change as experience with the vaccine accumulates.

**REFERENCE:** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/post-vaccine-considerations-healthcare-personnel.html>

