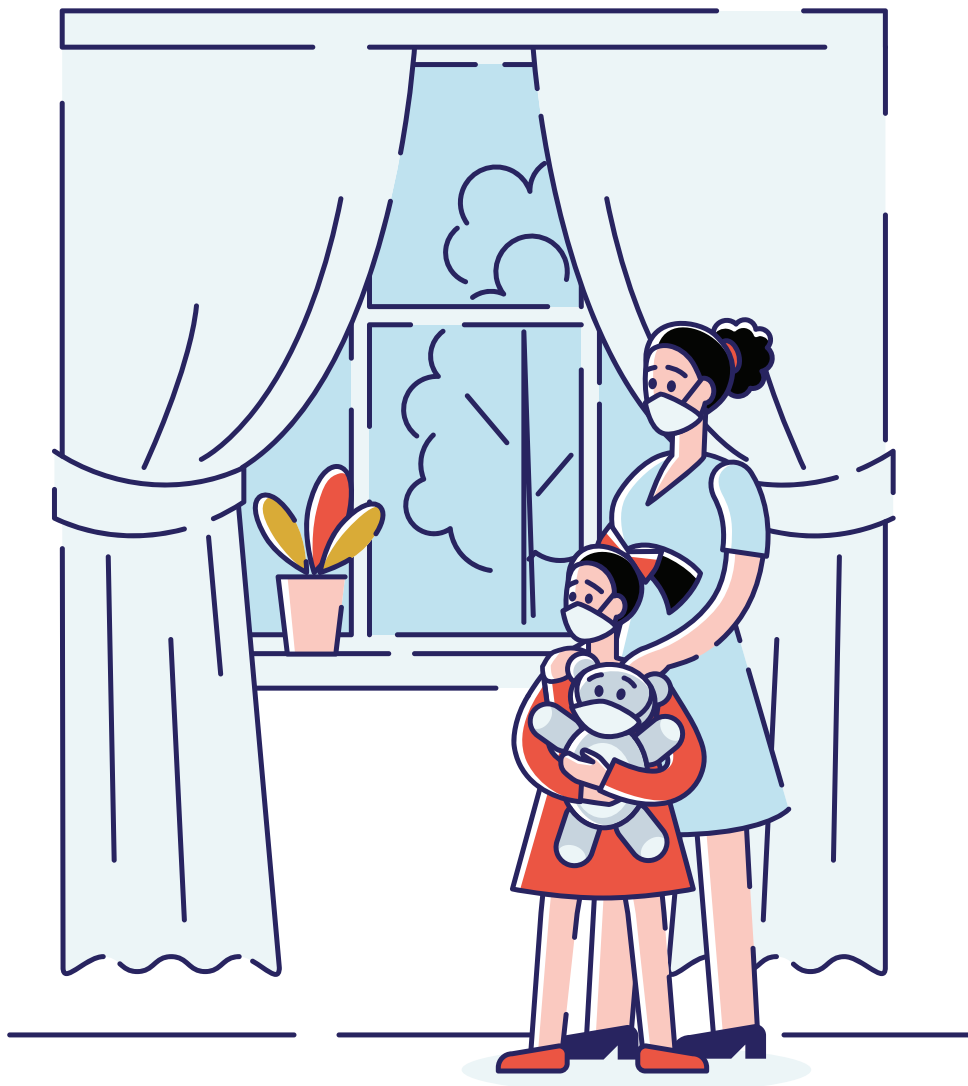


# FAQs on Immunization During Covid-19 Pandemic



## FAQs on Immunization During Covid-19 Pandemic

- The coronavirus disease (COVID-19) pandemic has led to disruption of routine immunization services putting women and children at risk for vaccine - preventable diseases. We have observed increased mortality due to measles in 2014-15 following Ebola outbreak. So, resumption of routine immunization services should be of prime concern.
- There are several unique issues related to immunization during the current pandemic. This guide addresses some of these common issues.



# Q1

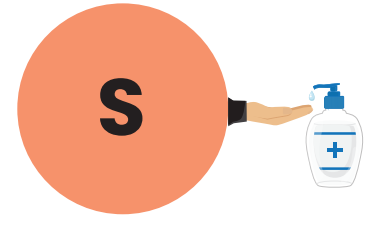
## Measures to follow during vaccination visits



Social Distancing



Mask



Sanitization

# Q2

## Any risk from immunizing the child during pandemic?

- No documented risk of immunizing a well child during pandemic.
- No risk if vaccination done during incubation period of COVID-19.
- No routine covid testing before immunization

# Q3

## Birth immunization of a neonate born to mother infected with SARS-CoV-2

- Covid negative neonate & asymptomatic-Hep B at birth or as early as possible within 24 hr, BCG at birth or as early as possible, OPV at birth or as early as possible within 15 days
- Covid negative neonate & symptomatic - At discharge but within 15 days
- Covid positive neonate & asymptomatic - At discharge but within 15 days
- Covid positive neonate & symptomatic - At discharge but within 15 days



## Q4

### Immunization in preterm/low birth weight neonate

- BCG and birth dose of OPV can be safely and effectively given to low birth weight and preterm babies after stabilization and preferably at the time of discharge.
- The birth dose of hepatitis B vaccine in the babies <2 kg should be delayed till the age of 1 month

## Q5

### What to do if due vaccines are missed?

- No change in the existing immunization schedule during the pandemic.
- Birth dose of vaccines to be administered at first contact with healthcare facility if not done at birth.
- Vaccination schedule can be resumed without any need to restart the series.
- The primary vaccination series and the vaccines for outbreak prone diseases should be prioritized for example DPT, hepatitis B, Hib, OPV/IPV, rotavirus, PCV, influenza, varicella, and MR/MMR. Postponing these vaccines is to be avoided.
- Shortest acceptable interval between two doses of the same vaccine is advisable. For inactivated primary vaccines this is 28 minus 4 days i.e. 24 days.
- Missed booster dose can be administered at next available contact with healthcare facility.
- All the opportunities should be utilized for administering eligible vaccines.



## Q6

### Covid-19 positive and asymptomatic child/under quarantine following exposure

- Eligible vaccine to be administered 14 days after day of positive test report/exposure

## Q7

### Covid-19 positive and symptomatic

- Eligible vaccine to be administered after resolution of symptoms preferably 14 days after day of onset of symptoms



## Q8

### Child with severe symptoms/MIS-C

- **If the child receives steroids:** If the child receives steroid in high doses (prednisolone 2 mg/kg/day or for those weighing more than 10 kg, 20 mg/day or its equivalent) for >2 weeks should not receive live or inactivated vaccines until the steroids have been discontinued for at least 1 month.
- **If the child receives IVIG:** Live virus vaccine like measles containing vaccines to be avoided for 3 months after IVIG administration.  
Killed/inactivated vaccine can be administered after resolution of symptoms preferably 14 days after day of onset of symptoms.
- **If the child receives Remdesivir/Tocilizumab:** No interference with vaccine. Eligible vaccines to be administered after resolution of symptoms preferably 14 days after onset of symptoms



## Q9

### Should the vaccine be repeated if child receives IVIG after administration of a vaccine?

- There is no interference if child receives IVIG after killed/inactivated vaccine at any interval. However, live vaccines like measles and varicella vaccine to be repeated if child receives IVIG <14 days after administration of these vaccines.
- No need to repeat if received steroid/Remdesivir/Tocilizumab.

# Q10

## Covid vaccine for children

- Children do get the severe disease, even if it is small in numbers. The safety and efficacy, however, are being assessed in trials for this age and if proven immunogenic and safe, it could be fast-tracked for mass vaccination in children.



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