

Youth COVID-19 Vaccination Program

Information for parents, caregivers and students

Vaccination against COVID-19 is the most effective way to reduce severe illness, hospitalisation and death from infection. As part of the national COVID-19 vaccination rollout, from September 2021, all children 12 years of age and older are eligible to receive vaccination against COVID-19.

COVID-19 infection and adolescents

COVID-19 (SARS-CoV-2) can be a serious illness for anyone who gets it, including people who are young, fit and otherwise healthy. As with other respiratory illnesses, some people infected with coronavirus disease may experience mild symptoms and will recover easily, and in others it can cause very serious disease, long term health issues, and death.

New variants or strains of the COVID-19 virus can spread more easily across all age groups and can increase the risk of developing COVID 19. Australia, like many other countries across the world, has seen higher numbers of adolescents and children becoming infected, particularly from the Delta variant. Adolescents and adults now have similar rates of infection

COVID-19 vaccination and children/adolescents

The Therapeutic Goods Administration (TGA) has approved the use of the Comirnaty™ (Pfizer) and Spikevax™ (Moderna) mRNA COVID-19 vaccines from the age of 12 years of age and above. The Australian Technical Advisory Group on Immunisation (ATAGI) has reviewed available information on the safety and efficacy of both these vaccines in children aged 12 years and above, as well as the risk of getting infected COVID-19 in this age group, and evidence of wider benefits and risks of vaccinating children; and it is recommending offering COVID-19 vaccine to all children in this age group.

There is growing evidence that vaccinated people are less infectious if they do catch COVID-19, which means getting vaccinated is the best way you can protect yourself, your loved ones and the community.

The Comirnaty™ (Pfizer) COVID-19 vaccine

Comirnaty (Pfizer Australia Pty Ltd) is a vaccine that can prevent people from becoming ill from COVID-19. Comirnaty does not contain any live virus, and it cannot give you COVID-19. It contains the genetic code for an important part of the COVID-19 virus called the spike protein. After getting the vaccine, your body makes copies of the spike protein. Your immune system will then learn to recognise and fight the COVID-19 virus. The genetic code is then broken down quickly by the body.

More information on the Comirnaty vaccine is available on the Department of Health website.

Search: [About the Pfizer \(Comirnaty\) COVID-19 vaccine](#)

Benefits of the vaccine

People who have had two doses of Comirnaty are about 95 per cent less likely to get symptoms of COVID-19 than people who did not get the vaccine. Protection against COVID-19 starts from about 2–3 weeks after the first dose. While one dose may give some protection, it may not be long lasting. Two doses will give optimal protection. No vaccine is 100% effective, so it is possible that you can still get sick from COVID-19 after vaccination.

Even if you have been vaccinated with two doses of Comirnaty, you should still get a COVID-19 test if you have symptoms (e.g. fever, cough, sore throat).

Common vaccine reactions

- > injection site pain, swelling and redness
- > fatigue
- > headache
- > myalgia (sore muscles) and chills
- > arthralgia (sore joints)
- > fever (more common after second dose) and injection site swelling
- > nausea

Rare reactions

A rare risk of myocarditis (inflammation of the heart) and pericarditis (inflammation of the membrane around the heart) has been observed in people who have received mRNA COVID-19 vaccines. It is more common in younger males and more commonly after the second dose, however, it is an extremely rare side effect. Most cases do not last long; some cases require treatment in hospital.

Myocarditis and pericarditis are much more common with COVID-19 infection and damage to the heart is frequently severe after infection. Myocarditis and pericarditis can also occur due to other causes, including common viral infections.

Symptoms usually appear within 10 (usually 1-5) days after vaccination and can include:

- > chest pain
- > palpitations (irregular heartbeat)
- > fainting
- > shortness of breath

People who experience any of these symptoms after having an mRNA COVID-19 vaccine should seek medical attention.

ATAGI and the Cardiac Society of Australia and New Zealand (CSANZ) emphasise that the overwhelming benefits of vaccination in protecting against COVID-19 greatly outweigh the rare risk of these conditions. Most pre-existing cardiac conditions are not regarded as contraindications to vaccination.

Students with a history of cardiac (heart) conditions should consult their GP or cardiologist about the best timing of vaccination and whether any additional precautions are recommended. More information is available on the Department of Health website. Search:

[Guidance on Myocarditis and Pericarditis after mRNA COVID-19 Vaccines](#)

Reporting vaccine reactions

All serious or unexpected reactions should be reported to the SA Health COVID-19 Clinical Advisory Service.

- > **Online:** Use the online [Vaccine Reaction Report Form](#).
- > **Telephone:** COVID-19 Clinical Advisory Service; Immunisation Section, Communicable Disease Control Branch between 8.30 am – 5.00 pm Monday to Friday on [1300 232 272](tel:1300232272). Serious adverse reactions related to COVID vaccines can also be reported on this number outside of business hours.

Further information

SA Health

- > sahealth.sa.gov.au/covidvaccine
- > SA COVID-19 Information Line – 1800 253 787

Australian Government Department of Health

- > health.gov.au/resources/publications/covid-19-vaccine-information-for-teens-and-parentsguardians
- > health.gov.au/initiatives-and-programs/covid-19-vaccines
- > health.gov.au/resources/publications/how-to-speak-to-kids-about-covid-19-vaccines
- > tga.gov.au/covid-19-vaccines
- > National Coronavirus Helpline – 1800 020 080

COVID-19 SA YOUTH VACCINATION CONSENT CARD

- Parent/Legal Guardian to complete ALL details fully using blue or black pen in BLOCK LETTERS
- Complete BOTH sides of card
- RETURN card to the school/take completed form to COVID-19 Vaccination Clinic (if applicable)

Student details

Name of School.....

Class (Home Room, Colour, etc).....

Legal Family Name.....

Legal Given Name(s).....

Date of Birth/...../..... Age..... Male Female Prefer not to say

Medicare number Reference number next to student's name

Main language spoken at home

Postal address

Suburb

Postcode

Aboriginal and Torres Strait Islander Aboriginal Torres Strait Islander Neither

Consenting Parent/Legal Guardian details

Mr / Mrs / Miss / Ms (please circle)

Family Name.....

Given Name(s).....

Relationship to Student Parent Legal Guardian

Contact Phone (Home).....(Mobile).....

(Work)

Email

Email and phone numbers may be used to clarify information if required.

Alternative emergency contact (school hours only)

Name

Relationship to child

Contact Phone (Home).....

(Mobile)

(Work).....

Student pre-vaccination checklist

Please tick the appropriate box(es) if the student:

<input type="checkbox"/> has previously had a reaction to a vaccine or any other medication	<input type="checkbox"/> has lowered immunity (eg leukaemia, cancer, HIV/AIDS, radiotherapy, chemotherapy or oral steroids)
<input type="checkbox"/> has ever had anaphylactic reaction or/and any allergies/Allergy Plan	<input type="checkbox"/> has had COVID-19 before
<input type="checkbox"/> has ever had myocarditis/pericarditis/endocarditis/heart failure or heart transplant	<input type="checkbox"/> has had a COVID-19 vaccine before
<input type="checkbox"/> has ever had acute rheumatic fever or rheumatic heart disease	<input type="checkbox"/> has had a vaccine/s recently (a 7 day interval is recommended between a COVID-19 vaccine and any other vaccine)
<input type="checkbox"/> is taking any medication	<input type="checkbox"/> is pregnant
<input type="checkbox"/> has a bleeding disorder	<input type="checkbox"/> has ever fainted when given an injection.

Please describe.....

Before vaccination, the vaccinator will ask the student about the above information and **must be informed of any changes** as it may be several weeks or more between completing this card and receiving the vaccine(s).

Parent/Legal Guardians please read the following before completing the consent section on the other side of this card

I have read and understood the information on the Student Parent/Legal Guardian Information Sheet including the risk of vaccination and the risk of COVID-19.

- I understand that I can contact my COVID-19 Vaccination Provider to discuss these risks and benefits.
- I understand that I can withdraw consent at any time before vaccination takes place by contacting the COVID-19 Vaccination Provider.
- I understand the information provided on the Consent Card, and information related to vaccines administered will be stored electronically and/or in hard copy as a medical record. I consent to disclosure of this information to staff involved in the provision of an immunisation service for SA Health and local government councils and their immunisation providers. I understand that immunisation records will be recorded on the Australian Immunisation Register where it will be stored on my child's Medicare account.
- I understand I may receive an SMS as part of monitoring vaccine safety.



Please complete the required information over the page



Parent/Legal guardian to complete BOTH sides of the card. Tick the relevant box below and sign.

Student name:

COMIRNATY™ (PFIZER) COVID-19 VACCINE

YES
I consent for this student to receive **2 doses** of the Pfizer COVID-19 Vaccine

Parent/Legal Guardian signature:

Date: / /

Comments

NO
I do not consent for this student to receive 2 doses of the Pfizer COVID-19 Vaccine

Parent/Legal Guardian signature:

Date: / /

OFFICE USE ONLY

COMIRNATY™ (PFIZER) COVID-19 VACCINE

Student ID and consent verified

DOSE 1

Date: / / Time:

L arm R arm

Given by:

COMIRNATY™ (PFIZER) COVID-19 VACCINE

Student ID and consent verified

DOSE 2

Date: / / Time:

L arm R arm

Given by:

Chief Public Health Officer

Health Regulation & Protection

Citi Centre Building
11 Hindmarsh Square
Adelaide SA 5000

PO Box 287 Rundle Mall
Adelaide SA 5000
DX 243

Tel 08 8226 7100
ABN 97 643 356 590

www.sahealth.sa.gov.au

RE: COVID-19 vaccines coming to your school

Dear Parent/Legal Guardian

A COVID-19 vaccination team is visiting your child's school to offer free COVID-19 vaccinations for students aged 12 years and over.

What is the consent process?

- Consent must be provided by the student's parent/legal guardian.
- Please read the '*Youth COVID-19 Vaccination Program Information*' before completing the '*COVID-19 Youth Vaccination Program Consent Card*.'
- Complete the Consent Card and return it to the school, even if you DO NOT consent for your child to be vaccinated at school.
- If your child has already received a COVID-19 vaccine/s elsewhere, write this on the Consent Card.
- If you change your mind, or if any information on your Consent Card needs to be updated, contact your COVID-19 Youth Vaccination Program provider and/or school.

How else can you and your child get vaccinated?

If your child misses one or both vaccinations at school, you can book at another vaccination clinic, GP or pharmacy.

Find a location to get vaccinated by scanning the QR Code or by visiting covid-vaccine.healthdirect.gov.au/eligibility



I would like to thank you and your family for taking steps to protect yourself, your loved ones and our community against COVID-19.

More information can be found at www.covidvaccine.sa.gov.au.

Yours sincerely,

PROFESSOR NICOLA SPURRIER
Chief Public Health Officer
Health Regulation & Protection