

**Criteria for Assessment of Donor Eligibility:****Vaccinations**

If a donor presents with a vaccination that is not on the following list, initiate an internal medical inquiry as per SOP 0801A: Medical Examinations and Investigations. A donor deferral may be required.

NOTE: Exposure refers to the incident where a donor was in contact with an infectious agent. Post-exposure vaccination refers to vaccination administered to the donor after an exposure. No exposure refers to the vaccination administered to the donor as a preventive measure.

NOTE: It is responsibility of the designated administrator to ensure that any changes to this appendix that are applicable to questionnaire related deferrals are applied in Donor-ID (D-ID). Changes must be in effect in D-ID on the same day as the effective date of the appendix. For further instructions APP 0509A-01: Donor-ID™ Administrative Functions: Instructions of use for Admin.

| DISEASE | VACCINE NAME BRAND | DEFERRAL PERIOD |
|--|---|------------------------|
| Anthrax | - | No deferral |
| BCG | - | 6 weeks |
| Chicken Pox | <i>Varivax</i> | 3 months |
| Cholera | <i>Dukoral</i> | No deferral |
| | <i>Mutacol Berna</i> | 4 weeks |
| COVID-19 (mRNA based vaccines)* | <i>Moderna COVID-19 vaccine</i> | No deferral |
| | <i>Pfizer-BioNTech COVID-19 vaccine</i> | No deferral |
| COVID-19 (Non-replicating Viral vector based vaccines)* | <i>AstraZeneca COVID-19 vaccine</i> | No deferral |
| | <i>Janssen COVID-19 vaccine</i> | No deferral |
| COVID-19 (Inactivated vaccines) | - | No deferral |
| Diarrhea (travellers) | <i>Dukoral</i> | No deferral |
| Diphtheria | <i>Boostrix, Adacel</i> | No deferral |
| DTP (Diphtheria, Tetanus, Pertussis) | <i>Boostrix,</i> | No deferral |

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*List is non-exhaustive as a result for vaccine brand names that are not listed apply deferral based on vaccine type (mRNA, viral vector). For management of other vaccine types see APP 0801A-01: Criteria for Assessment of Donor Eligibility: Health



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|---|--|--|
| DTP + Hepatitis B and Polio | <i>Pediarix</i> | 4 weeks |
| DTP + Hepatitis B, Polio and Hemophilus | <i>Infanrix-hexa</i> | 4 weeks |
| Hemophilus | <i>Infanrix-IPV/Hib,</i> | 2 days |
| | <i>Infanrix-hexa</i> | 4 weeks |
| Hepatitis A | <i>Avaxim, Havrix, Vaqta, Vivaxim, Epaxal</i> | No deferral if well and no exposure. See APP 0801A-01 under “Hepatitis A” if donor has been exposed |
| Hepatitis B | <i>Engerix B, Infanrix-hexa, Pediarix, Recombivax-HB</i> | 4 weeks |
| Hepatitis B Immunoglobulin | - | 1 year |
| Hepatitis A & Hepatitis B | <i>Twinrix</i> | 4 weeks |
| Herpes Zoster (Shingles) | <i>Zostavax</i> | 3 months |
| | <i>Shingrix</i> | No deferral if symptom free |
| HPV (Human Papillomavirus) | <i>Gardasil, Cervarix</i> | No deferral |
| Influenza (Flu Shot, Intranasal) | - | No deferral |
| Japanese Encephalitis | <i>IXIARO</i> | No deferral |
| Measles, Mumps, Rubella | <i>MMR</i> | 4 weeks |
| Measles (Rubeola) | <i>MMR</i> | 4 weeks |
| Meningococcal | <i>Meningitec, Menjugate Menactra, Menveo, Nimenrix, Bexsero</i> | No deferral |
| Mumps | <i>MMR</i> | 4 weeks |
| Paratyphoid | - | No deferral |
| Pertussis | <i>Adacel, Boostrix</i> | No deferral |
| Plague | - | No deferral |
| Pneumococcal | <i>Pneumovax, Prevnar</i> | No deferral |

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|---------------------------------|-----------------------------|--|
| Polio (Oral) | <i>Sabin, Salk</i> | 6 weeks |
| Polio (IM or SubQ Injection) | <i>Imovax Polio, IPV</i> | No deferral |
| Rabies | <i>Immune Globulin</i> | 52 weeks |
| Rabies After exposure | <i>RabAvert only</i> | 1 year |
| Rabies Pre exposure prophylaxis | <i>RabAvert</i> | No deferral |
| Rocky Mountain Spotted Fever | - | No deferral |
| Rubella (German measles) | <i>MMR</i> | 4 weeks |
| Smallpox | - | 21 days after vaccination date See Smallpox in APP 0801A-01 for further details |
| Tetanus | <i>Adacel, Boostrix</i> | No deferral |
| Tick Borne Encephalitis | <i>FSME-IMMUN</i> | No deferral if no exposure. See APP 0801A-01 under “Tick Bite” if donor has been exposed |
| Typhoid (Oral) | <i>Vivotif</i> | 4 weeks |
| Typhoid (Injection) | <i>Typherix*, Typhim Vi</i> | No deferral |
| Typhoid, Hepatitis A | <i>Vivaxim</i> | No deferral |
| Typhus | - | No deferral |
| Yellow Fever | <i>YF-VAX</i> | 4 weeks |

NOTE: *Vaccine cancelled post-market on 21.12.2017

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