HEALTHCARE PROVIDER ALERT September 22, 2021



If you have any questions or concerns, please contact your local Timiskaming Health Unit:

> **Monday to Friday** 8:30 a.m. – 4:30 p.m.

New Liskeard

Tel: (705) 647-4305 (866) 747-4305 Toll Free: (705) 647-5779 Fax:

Kirkland Lake

Tel:	(705) 567-9355
Toll Free:	(866) 967-9355
Fax:	(705) 567-5476

After-Hours or Weekend On-Call Number (705) 647-3033

www.timiskaminghu.com

Physicians, Nurse Practitioners, Nurses, and Midwives

To: Hospital Infection Control Departments and Emergency Departments

COVID-19 Vaccine Exemptions

The Ministry of Health has published guidelines and a form that can be used to document vaccination exemptions for the COVID-19 vaccine.

IMPORTANT UPDATES ON COVID-19

This document is intended to assist physicians/specialists and nurse practitioners in evaluating contraindications or precautions to COVID-19 vaccination that may warrant a medical exemption. A contraindication is a situation where a vaccine should not be given as the risks outweigh any potential therapeutic benefit. A precaution is a condition that may increase the risk of an adverse event following immunization (AEFI) or compromise the ability of the vaccine to produce an immune response, which may result in deferral of immunization; however, there may be circumstances where the benefits of vaccination outweigh the potential risks from vaccination associated with the condition or where reduced immunogenicity still benefits immunocompromised individuals (Canadian Immunization Guide). In general, there are very few actual contraindications to available COVID-19 vaccines that would qualify as medical exemptions and most individuals can safely receive COVID-19 vaccines.

The guidance for exemptions for COVID-19 vaccinations can be found here / FR Version. The exemption form can be found here / FR Version.

COVID-19 Third Dose Eligibility and Referral Form

The medical conditions eligible for a third dose of the COVID-19 vaccine can be found here / French Version. The THU referral form that is to be accepted at all pharmacies and mass clinics is attached. Please complete these for your eligible patients to present at a clinic or participating pharmacy.