Clinical Guidance - COVID-19 Vaccine Medical Exemptions
Version 1.0 updated 09/11/2021

Background

An increasing number of sectors (e.g. residential aged care, Queensland Health and Queensland Police Service) and other employers are requiring staff to be vaccinated against COVID-19 as a condition of their employment. Completed Covid-19 vaccinations are also being becoming mandated in a number of jurisdictions for entry across borders, including international borders.

Individuals may seek assessment for a medical exemption from the Covid-19 Vaccines from specific medical practitioners. As per the Services Australia immunisation medical exemptions advice, a consumer may be able to get an exemption from having a vaccine if there is a valid medical reason.

Granting medical exemptions to these COVID-19 vaccination requirements for reasons outside the ATAGI Guidelines, such as for conscientious objections, creates inequity and increases health risks, particularly to vulnerable Queenslanders.

This guidance clearly sets out the only reasons medical exemptions may be provided, to assist you in conversations with your patients.

Please note that despite a medical exemption being granted, this does not mean that an employer or relevant authority will accept such exemption as vaccination status can be subject to Queensland Public Health Directions.

Queensland Health Staff

Queensland Health employees who are seeking an exemption to the COVID-19 vaccination should refer to the requirements in the Health Employment Directive No. 12/21 (HED 12/21) and HR Policy B70 Employee COVID-19 vaccination requirements (QH-POL-486) available on QHEPS. Further Guidance can be sought from your local hospital and Health Service (HHS) or Departmental Human Resources team.

Who can grant an exemption?

Only specific medical practitioners are authorised to grant medical exemptions. These are:

- general practice registrars on an approved 3GA training placement
- paediatricians
- public health physicians
- infectious disease physicians
- clinical immunologists
- General practitioners as defined by the Health Insurance Act 1973 as.
  - on Medicare’s Vocation Register of General Practitioners
  - a fellow of the Royal Australian College of General Practitioners (RACGP)
  - a fellow of the Australian College of Rural and Remote Medicine (ACRRM).

Authorised medical practitioners should notify the Australian Immunisation Register (via this form-IM011) of an individual who has a vaccine exemption due to medical contraindications, which will be displayed on an individual’s Immunisation History Statement (IHS). This includes permanent vaccine exemption or temporary vaccine exemption until a specified date due to acute major illness or significant immunocompromise of short duration.
What is a medical exemption?
General guidance around medical circumstances which qualify as medical exemptions form immunisation can be found on the Services Australia webpage. This resource also provides guidance on what does not count as a medical exemption.

There are a limited number of medical contraindications to the COVID-19 vaccination outlined in the Australian Technical Advisory Group on Immunisation (ATAGI) Clinical Guidelines on use of COVID-19 Vaccine in Australia.

ATAGI has also provided specific guidance on temporary medical exemptions for COVID-19 vaccines.

Current contraindications to Vaxzevria (AstraZeneca) are:

- Anaphylaxis after a previous dose.
- Anaphylaxis to any component of the vaccine, including polysorbate 80.
  - Please note anaphylaxis to polysorbate 80, which is also included in many other vaccines, is rare
- History of capillary leak syndrome.
- Thrombosis with thrombocytopenia occurring after a previous dose. Please see ATAGI guidance on Thrombosis with Thrombocytopenia Syndrome (TTS) following COVID-19 vaccination.
- Any other serious adverse event attributed to a previous dose of Vaxzevria (and without another cause identified) that has been reported to Queensland Health as an Adverse Event Following Immunisation (AEFI), and, has been determined following review by, and/or on the opinion of, an experienced immunisation provider/medical specialist taking into account whether repeat vaccine doses would be associated with a risk of recurrence of the serious adverse event.*

Current contraindications to Comirnaty (Pfizer) or Spikevax (Moderna) are:

- Anaphylaxis to a previous dose of an mRNA COVID-19 vaccine (Spikevax or Comirnaty) is a contraindication to further doses of either vaccine.
- Anaphylaxis to any component of the vaccine, including polyethylene glycol (PEG).
  - Please note anaphylaxis to PEG is extremely rare
- Myocarditis and/or pericarditis attributed to a previous dose of either Comirnaty or Spikevax. People who have myocarditis or pericarditis following Comirnaty or Spikevax may still be able to receive further doses following a risk assessment. Refer to Guidance on Myocarditis and Pericarditis after mRNA COVID-19 vaccines.
- Any other serious adverse event attributed to a previous dose of Comirnaty or Spikevax (and without another cause identified) that has been reported to Queensland Health as an Adverse Event Following Immunisation (AEFI), and, has been determined following review by, and/or on the opinion of, an experienced immunisation provider/medical specialist taking into account whether repeat vaccine doses would be associated with a risk of recurrence of the serious adverse event.*

* Assessment of adverse events following immunisation requires detailed information on the event, a determination of the likelihood of a causal link with vaccination, as well as the severity of the condition. Serious adverse events are generally defined as those which require hospitalisation (e.g., thrombosis with thrombocytopenia following the first dose of Vaxzevria); are medically significant (e.g., immune
thrombocytopenia purpura, myocarditis), are potentially life threatening (e.g., anaphylaxis) and/or result in persistent or significant disability (e.g., Guillain-Barre Syndrome).

These reactions do not typically include expected local or systemic reactions known to occur within the first few days after vaccination. Attributing a serious adverse event to a previous dose of a COVID-19 vaccine may require discussion with the consumer’s GP, local immunisation service or relevant medical specialist. In Queensland, cases of this severity can be referred for further care and assessment to the Queensland Adult Specialist Immunisation Service (for consumers aged 16 years and over) at the Royal Brisbane & Women’s Hospital or the Queensland Specialist Immunisation Service (for consumers aged below 16 years) at the Queensland Children’s Hospital. Consumers may also wish to be referred privately if they choose.

Please note that a contraindication to one vaccine does not preclude the consideration and use of another vaccine type. Please refer to the ATAGI Guidelines on the use of a different COVID-19 vaccine as the second dose in special circumstances. A patient must have medical contraindications to all of the COVID-19 vaccines available for use in Australia in order to be exempted from COVID-19 vaccination requirements.

Temporary Exemptions

ATAGI does not recommend that temporary exemptions for longer than 6 months should be granted in the first instance. This is so that the illness, treatment plan or clinical situation necessitating a temporary exemption can be reassessed as these are generally time limited indications. Please see the ATAGI guidance on temporary medical exemptions for Covid-19 Vaccines.

Previous SARS-CoV-2 infection

Past confirmed infection with SARS-CoV-2 is not a contraindication to vaccination, however ATAGI recommends deferring COVID-19 vaccination for up to 6 months after the onset of acute illness. Current evidence suggests that the risk of SARS-CoV-2 re-infection is low in the 6 months after initial infection, but may increase with time due to waning immunity. Queensland Health Covid-19 Vaccination Taskforce’s Clinical and Technical Advisory Group advises that vaccination can be given as short as 4 weeks after resolution of the acute illness if a consumer prefers.

People who have received an anti-SARS-CoV-2 monoclonal antibody or convalescent plasma should defer future doses of COVID-19 vaccine for at least 90 days.

Pregnant Women

RANZCOG medical advice recommends the COVID-19 vaccine for women who are pregnant or breastfeeding. The ATAGI Guidelines highlight pregnant women as a priority group for vaccination and recommends that either Comirnaty (Pfizer) or Spikevax (Moderna) should be routinely offered to pregnant people at any stage of pregnancy. Given that the COVID-19 vaccine is recommended for pregnant and breastfeeding mothers, they are not recognised as a medical exemption and any requirement to be vaccinated would still apply.

Forms to complete

Authorised medical officers need to complete the Australian Immunisation Register (AIR) - immunisation medical exemption form (IM011) for anaphylaxis of permissible temporary exemptions. Other exemptions, as listed above, can be documented in a clinical letter or other appropriate clinical document with relevant exemption details once the medical practitioner has considered the consumer’s specific medical history in conjunction with this document and related ATAGI guidance.