

The Vaccine Adverse Event Reporting System (VAERS) Results

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------------|---------------------------|---------------------------|--|
| ABDOMINAL DISCOMFORT | COVID19 VACCINE (COVID19) | 1369033-1 | tired, body aches, restricted breathing, upset stomach, vomiting, congestion |
| ABDOMINAL DISCOMFORT | COVID19 VACCINE (COVID19) | 1506475-1 | syncope dizzy, light headed, upset stomach lasted 15 minutes |
| ABDOMINAL PAIN | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| ABDOMINAL PAIN | COVID19 VACCINE (COVID19) | 1861272-1 | Vaccine yesterday. This morning about 9am, developed headache, blurry vision, abdominal pain, fatigue. |
| ABDOMINAL PAIN UPPER | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| ABDOMINAL PAIN UPPER | COVID19 VACCINE (COVID19) | 1694293-1 | Pain at injection site one hour after vaccine, bad headache, pain in arms and legs, 102 degree fever, periodic stomach cramps. |
| ADENOVIRUS TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| ADENOVIRUS TEST | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| ADENOVIRUS TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| ALANINE AMINOTRANSFERASE INCREASED | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| ALANINE AMINOTRANSFERASE INCREASED | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| ALANINE AMINOTRANSFERASE INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| ALANINE AMINOTRANSFERASE NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| AMENORRHOEA | COVID19 VACCINE (COVID19) | 1726997-1 | amenorrhea, was on period at time of vaccine, that period was heavier than usual with more cramping, has not had a period since the one she was having at the time of the first dose of vaccine. She did get second dose of vaccine on time as well. |
| ANAEMIA | COVID19 VACCINE (COVID19) | 1840949-1 | Patient received first dose 08/14/21, had symptoms of light headedness and diaphoresis 2 days later with menorrhagia. She was seen in the ER. She was found to be anemic. Was prescribed iron supplements. She received her second dose 3 weeks later and again had menorrhagia. She was seen in the ER a week later with menorrhagia and severe anemia. She came back the next day and required a blood transfusion and a D and C. She wsas in the hospital for 3 days. She has a history of heavy menstrual bleeding. |
| ANAPHYLACTIC REACTION | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did |

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| ANGIOEDEMA | COVID19 VACCINE (COVID19) | 1715365-1 | Angiderma to head, lips, eyes, throat and hives on torso and extremities. |
| ANION GAP | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| ANOSMIA | COVID19 VACCINE (COVID19) | 1460278-1 | Patient describes loss of smell 2 days after #1 dose of COVID vaccine. |
| ANXIETY | COVID19 VACCINE (COVID19) | 1322379-1 | Patient described that she was seeing black surrounding her after 2 minutes receiving the Covid-19 vaccination. Patient was given 10 ml of Benadryl 12.5 mg /5 ml liquid immediately. After 5 minutes taking Benadryl, patient complained that she felt that her physical condition is getting worse; she was anxious. I decided to call 911 based on her existing medical condition. The 911 team arrived within 10 minutes and checked her health condition. Patient recovered and went home safe. |
| ANXIETY | COVID19 VACCINE (COVID19) | 1505874-1 | See above. Abrupt worsening of anxiety. |
| ANXIETY | COVID19 VACCINE (COVID19) | 1519828-1 | patient felt faint, skin color turned white. patient complained she could not see or hear anything and she felt weak. we assisted patient back into our immunization, placed her on the floor, elevated her feet, and placed a pillow under her head. called 911. within 5 minutes the patient's color was returning to her face and she was able to see and hear again. it appears the patient had an anxiety attack as a result of the immunization. |
| ANXIETY | COVID19 VACCINE (COVID19) | 1716780-1 | Worsening anxiety, OCD tendencies, and breast pain |
| APHASIA | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |
| APPENDICECTOMY | COVID19 VACCINE (COVID19) | 1634192-1 | My son got his first dose of the Pfizer Covid-19 Vaccine and five days later he had sharp pains in his side followed by vomiting three times and being in pain all night. I took him to pediatrician in morning and was told to go to the ER where they did an emergency appendectomy on the Tuesday following his vaccine. I am not quite sure if it is a direct result of the vaccine but I did research on the website as well as the University and it states a 1/2500 chance through their testing. |
| ARRHYTHMIA | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| ARTHRALGIA | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |

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| ARTHRALGIA | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIK); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| ARTHRALGIA | COVID19 VACCINE (COVID19) | 1536269-1 | Developed reactions to cold in the form of hives, large welts, and swelling of the lips. First reaction was a softball size welt on June 25th after icing sore elbow. Now any contact with chilled or iced items produces welts, swelling, and itching. Contact with cold river water while rafting August 8 produced hives over entire body. Contact with ice cream on 8/7 produced swollen lips. Very concerned as my daughter is a competitive swimmer. While the first notable welt on elbow, was approximately 9 days after 2nd vaccine, she said she noticed an itchy sensation when exposed to cold at some point prior to this but never before 2nd vaccine. |
| ARTHRALGIA | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| ASPARTATE AMINOTRANSFERASE INCREASED | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| ASPARTATE AMINOTRANSFERASE INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| ASPARTATE AMINOTRANSFERASE INCREASED | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procalcitonin elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| ASPARTATE AMINOTRANSFERASE NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| ASTHENIA | COVID19 VACCINE (COVID19) | 0942502-1 | Patient described rapid onset sweating and flushing. Said he felt light headed as well. Gave Benadryl 25 mg with continued observation for 30 minutes and he said he felt mostly better, but still tired and weak. Followed up next day and his mother said he was |

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| | | | doing better. |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1231181-1 | Heart racing Dizziness Weakness Numbness at injection site |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lisons. She visited her pediatrician Tuesday, June 8th, 2021, and the lisons were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lisons are still present and painful, and continue to be treated. |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1474052-1 | Polyneuropathy in bilateral legs, headache, and weakness 24 hours after first dose of Pfizer with worsening over subsequent 48 hours - currently being admitted to hospital for evaluation. |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1512712-1 | "SUBJECTIVE: Pt. is a 15 year old male here vaccinated at our community vaccine event at high school last evening and received the Pfizer vaccine Approx 10 min after receiving the vaccine the patient reported: weakness and lightheadness At approx 10 min post vaccination he was still sitting in the chair he was vaccinated in. When I came to him he was clammy and pale and felt weak and lightheaded. He also c/o of feeling tremulous This Hx of was obtained by pt and pt's mother who was with pt at the vaccine event. Pt was feeling anxious but well prior to the vaccine. He last ate approx 5 hrs prior to vaccine and had hamburger and root beer. He had no significant activity during the day prior to the event. He did wake up approx 4 hrs earlier than his usual time on day of event because of school orientation he had that day. Pt and mom denied any prior hx of similar reactions after vaccines Pt reported it ""feels like just got a shot"" No nausea, itching or resp distress No PMHx -Per pt. has been on IEP for adhd No current medications NKDA SoCHx: pt denied any recent drug or etoh use Sudden onset of symptoms/signs: yes Rapid progression of symptoms/signs: Rapid progression that quickly improved OBJECTIVE: General appearance: pale and clammy Skin:no rashes Resp: CTA bilat CV: RRR Vitals Vaccine given at 5:58 pm 6:05 pm BP 87/50, P 83, pox 98%- pt was given water 6:08 pm BP 134/84, - coloring in face improved and pt began to feel better- pt was alert and oriented x 3 at this point 6:13pm BP 130/66- pt was given granola bar and 2nd bottle of water BS: 118 DISPOSITION: After sitting in chair for approx 35 min, drinking two bottles of water and two granola bars pt was feeling better, appeared better with normal coloring and not clammy and had normal vitals signs. He and his mom felt comfortable going home to rest. I reviewed warning signs with mom to call or go to ED for I called the next day (7/29) and spoke with his mom and she stated pt was doing better after eating dinner and was feeling well this. She plans to call pt's pediatrician to coordinate his 2nd dose in their office or affiliated clinic." |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1519828-1 | patient felt faint, skin color turned white. patient complained she could not see or hear anything and she felt weak. we assisted patient back into our immunization, placed her on the floor, elevated her feet, and placed a pillow under her head. called 911. within 5 minutes the patient's color was returning to her face and she was able to see and hear again. it appears the patient had an anxiety attack as a result of the immunization. |
| ASTHENIA | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak-numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| ATRIOVENTRICULAR BLOCK | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |

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| AXILLARY PAIN | COVID19 VACCINE (COVID19) | 1651047-1 | Right shoulder after the 2nd shot started to swell up.; Arm pit is much more full and feels very sore.; Lymph nodes are swollen.; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old male patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EW0173) via an unspecified route of administration in the right arm on 08Apr2021 at 14:00 (at the age of 16-years-old) as a single dose for COVID-19 immunisation. The patients' medical history included a known allergy to fentanyl (MANUFACTURER UNKNOWN). Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any medication within two weeks of the COVID-19 vaccination. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EW0173) via an unspecified route of administration in the right arm an unknown date as a single dose for COVID-19 immunisation. On 30Apr2021 at 12:00, the patient reported that his right shoulder started to swell up after the second dose, the arm pit was much fuller and felt very sore. The patients' father who was a medical professional said that the lymph nodes were swollen. The events did not result in a visit to the doctors or other healthcare professional office/clinic visit, and emergency room/department or urgent care. It was unknown whether any therapeutic measures were taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events right shoulder started to swell up, arm pit was much fuller and felt very sore and lymph nodes were swollen were not resolved at the time of this report. No follow-up attempts are needed. No further information is expected. |
| AXILLARY PAIN | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| AXILLARY PAIN | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |
| BACK PAIN | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| BACTERIAL INFECTION | COVID19 VACCINE (COVID19) | 1386601-1 | He started taking Giferan gel - for acne - it dried out his skin - he started using this a week before the vaccine; on the 31st - rash around his mouth - it was getting red and crusty and looking abnormal - called the Intertrigo- bacterial infection. Put him on antibiotic cream - Mupirocin 2 % ointment. Five day treatment It's resolved now. Dermatologist: dermatology is where we went and he saw a PA. |
| BASILAR ARTERY THROMBOSIS | COVID19 VACCINE (COVID19) | 1430330-1 | admitted 6/23 in status epilepticus. Found to have a basilar artery thrombus |
| BASILAR ARTERY THROMBOSIS | COVID19 VACCINE (COVID19) | 1520184-1 | Pt presented with nausea and altered mental status, imaging confirmed a R pons ischemic stroke, later found to be due to basilar artery thrombosis |
| BICUSPID AORTIC VALVE | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |
| BILIRUBIN CONJUGATED INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLINDNESS | COVID19 VACCINE (COVID19) | 1519828-1 | patient felt faint, skin color turned white. patient complained she could not see or hear anything and she felt weak. we assisted patient back into our immunization, placed her on the floor, elevated her feet, and placed a pillow under her head. called 911. within 5 minutes the patient's color was returning to her face and she was able to see and hear again. it appears the patient had an anxiety attack as a result of the immunization. |
| BLOOD ALBUMIN DECREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD ALKALINE PHOSPHATASE INCREASED | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| BLOOD BILIRUBIN INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---|---------------------------|---------------------------|--|
| BLOOD CREATINE NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| BLOOD CREATINE PHOSPHOKINASE MB INCREASED | COVID19 VACCINE (COVID19) | 1416452-1 | Myocarditis diagnosis |
| BLOOD CREATININE DECREASED | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| BLOOD CREATININE INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD CULTURE NEGATIVE | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD FIBRINOGEN INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD GLUCOSE INCREASED | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| BLOOD GLUCOSE NORMAL | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD KETONE BODY | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| BLOOD LACTATE DEHYDROGENASE | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| BLOOD LACTATE DEHYDROGENASE INCREASED | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| BLOOD PRESSURE DECREASED | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| BLOOD PRESSURE DECREASED | COVID19 VACCINE (COVID19) | 1502004-1 | Approximately 3 minutes after injection, pt. reported that her vision had gone black, her ears were ringing, and she felt faint. I notified the nurse immediately. Within another minute her breathing became rapid and faint. She was given water and coached to breath slowly and deeply. The nurse checked her blood pressure with a result of 67/22. A second BP check resulted in 70/27. The nurses transferred her to the ER. In the ER, a third BP check 20 minutes after injection resulted in a normal reading of approximately 110/70. She continued to take oral fluids for approximately one hour before being released. The medical staff reported to us that this is a completely normal reaction for many people to all vaccinations, and suggested that she should get the second dose of Pfizer vaccine in 3-4 weeks. However, when we check the CDC website we find that these are anaphylactic symptoms and should not get the 2nd dose of Pfizer, so we are greatly concerned and decided to report the event. |
| BLOOD PRESSURE DECREASED | COVID19 VACCINE (COVID19) | 1724302-1 | Within five minutes from receiving vaccine, patient reported feeling lightheaded, nauseous, and was pale. He was offered water and blood pressure was taken around 7:10pm, showing 61/43 mmHg. Upon patient's mother's consent, emergency services was called where he had his vitals re-checked. After ten minutes, his vitals are normal and blood pressure was back up to normal range. Patient was able to stand without dizziness. His mother was given the option to go to the hospital for further monitoring or leave on their own, in which she decided they were to leave on their own and monitor at home. |
| BLOOD PRESSURE FLUCTUATION | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| BLOOD PRESSURE MEASUREMENT | COVID19 VACCINE (COVID19) | 1848345-1 | A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use; This case was received via an unknown source (no reference has been entered for a health authority or license partner) on 28-Oct-2021 and was forwarded to Moderna on 29-Oct-2021. This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use) in a 15-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 051C21A) for COVID-19 vaccination. The patient's past medical history included Painful ankle and Drug use disorder (History of Drug Use). Concurrent medical conditions included Drug allergy (Tylenol) and Obesity (on 15-02-2020 the weight was 102.4kg on 04-08-2021 the weight was 133.4kg). On 02-Sep-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 02-Sep-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use). On 02-Sep-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use) had resolved. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 08-Apr-2021, Blood pressure measurement: elevated (High) ELEVATED BLOOD PRESSURE. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant and treatment medications was not reported. This case was linked to MOD-2021-303426 (Patient Link). |
| BLOOD SODIUM DECREASED | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| BLOOD SODIUM NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| BLOOD SODIUM NORMAL | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD TEST | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| BLOOD TEST | COVID19 VACCINE (COVID19) | 1474052-1 | Polyneuropathy in bilateral legs, headache, and weakness 24 hours after first dose of Pfizer with worsening over subsequent 48 hours - currently being admitted to hospital for evaluation. |
| BLOOD TEST | COVID19 VACCINE (COVID19) | 1634192-1 | My son got his first dose of the Pfizer Covid-19 Vaccine and five days later he had sharp pains in his side followed by vomiting three times and being in pain all night. I took him to pediatrician in morning and was told to go to the ER where they did an emergency appendectomy on the Tuesday following his vaccine. I am not quite sure if it is a direct result of the vaccine but I did research on the website as well as the University and it states a 1/2500 chance through their testing. |
| BLOOD TEST | COVID19 VACCINE (COVID19) | 1756937-1 | Debilitating vertigo, transported via ambulance to emergency room. |
| BLOOD TEST | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak- numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| BLOOD TEST NORMAL | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| BLOOD THYROID STIMULATING HORMONE NORMAL | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------------------------|---------------------------|---------------------------|---|
| BLOOD UREA NITROGEN/CREATININE RATIO | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| BLOOD UREA NORMAL | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BLOOD URIC ACID | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| BODY TEMPERATURE | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIC); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| BODY TEMPERATURE | COVID19 VACCINE (COVID19) | 1812932-1 | fever 99-100 via forehead /low fever 99-100 now 7 days post vaccination; fever of 102-103 taken via forehead; This is a spontaneous report from a contactable Other Healthcare Professional reporting for a patient. A 15-years-old male patient received bnt162b2 (COMIRNATY, PFIZER-BIONTECH COVID-19 VACCINE, Formulation: Solution for injection, Batch No: Not reported/Lot Number: EW0180) via intramuscular route on 08Jun2021 (at the age of 15-years-old) as dose 2, single for covid-19 immunization. The patient medical history included known allergy to peanut and concomitant medications were not reported. The historical vaccine included patient received bnt162b2 (COMIRNATY, PFIZER-BIONTECH COVID-19 VACCINE, Formulation: Solution for injection, Batch No: Not reported/Lot Number: EW0185) via an intramuscular route on 18May2021 (at the age of 15-years-old) as dose 1, single for covid-19 immunization. Patient had no covid prior vaccination and was not tested post vaccination. It was unknown if other vaccine taken within four weeks. Patient did not receive his vaccination at reporter clinic. On 09Jun2021, Mom of patient called to report a fever of 102-103 taken via forehead and asked if ok to give Tylenol and the PCP said it was ok to give. On 14Jun2021, Mom of patient called again and said that the patient was still having fever 99-100 via forehead and had no other symptoms otherwise he was feeling fine. Patient had virtual appointment with provider on 15Jun2021 and reported that, the patient was still having low fever 99- 100 now 7 days post vaccination and no other symptoms at this time. The patient underwent lab tests and procedures which included body temperature taken via forehead on 09Jun2021 which results as 102-103, on 14Jun2021 body temperature via forehead was measured as 99-100, and on 15Jun2021 body temperature was measured still having low fever 99-100 now 7 days post vaccination. The therapeutic measure taken as a result of event was Unknown. The outcome of the events was unknown. Follow-up attempts are completed. No further information is expected. |
| BODY TEMPERATURE INCREASED | COVID19 VACCINE (COVID19) | 1341490-1 | Pericarditis, temp 100, chest pain |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------------------|---------------------------|---------------------------|--|
| BODY TEMPERATURE INCREASED | COVID19 VACCINE (COVID19) | 1415425-1 | My child began feeling tired and ran a temperature about a degree warmer than usual for the first three days after his second COVID vaccine on Sunday 13 June. (So Monday, Tuesday, Wednesday). Thursday he was extra tired and began to complain of itching under the chin in the evening. Friday morning he woke up and had what he described as itchy/painful raised, red patches of skin on his right collarbone, under his chin, across his face (right cheek, temple). His temperature was about 100* and he was, quite frankly, pretty miserable. These weren't little skin irritations, they were giant patches of inflamed tissue covering the better part of each cheek, his temple, under the chin and then in smaller spots on his collarbones and back. Saturday the rash moved to cover the left side of his face, and the left collarbone. (And no, for the record, I did not switch laundry detergents, change his diet or anything like that.) As of today, 6/21 condition has improved but not fully resolved. |
| BRAIN NATRIURETIC PEPTIDE | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| BRAIN NATRIURETIC PEPTIDE | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| BRAIN NATRIURETIC PEPTIDE INCREASED | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| BRAIN NATRIURETIC PEPTIDE INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| BRAIN NATRIURETIC PEPTIDE NORMAL | COVID19 VACCINE (COVID19) | 1341490-1 | Pericarditis, temp 100, chest pain |
| BRAIN NATRIURETIC PEPTIDE NORMAL | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| BREAST PAIN | COVID19 VACCINE (COVID19) | 1716780-1 | Worsening anxiety, OCD tendencies, and breast pain |
| BREATH SOUNDS ABNORMAL | COVID19 VACCINE (COVID19) | 1502004-1 | Approximately 3 minutes after injection, pt. reported that her vision had gone black, her ears were ringing, and she felt faint. I notified the nurse immediately. Within another minute her breathing became rapid and faint. She was given water and coached to breath slowly and deeply. The nurse checked her blood pressure with a result of 67/22. A second BP check resulted in 70/27. The nurses transferred her to the ER. In the ER, a third BP check 20 minutes after injection resulted in a normal reading of approximately 110/70. She continued to take oral fluids for approximately one hour before being released. The medical staff reported to us that this is a completely normal reaction for many people to all vaccinations, and suggested that she should get the second dose of Pfizer vaccine in 3-4 weeks. However, when we check the CDC website we find that these are anaphylactic symptoms and should not get the 2nd dose of Pfizer, so we are greatly concerned and decided to report the event. |
| BURNING SENSATION | COVID19 VACCINE (COVID19) | 1350803-1 | She developed 3 isolated episodes of 30-90 minutes where she has tingling and burning in bilateral hands, worse in right, and worst in the thumb. No symptoms in feet. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------|---------------------------|---------------------------|--|
| BURNING SENSATION | COVID19 VACCINE (COVID19) | 1357951-1 | My son developed a fever, brain fog, and his legs felt like they were burning. More worrisome was the heart pain he woke up with in the middle of the night and throughout the day on 5/20. He complained of a sharp stabbing pain on left side of his chest and said it was hard to take a deep breath. I gave him ibuprofen and he rested. I called his doctor and they said not to worry, these side effects were normal. I'm a bit nervous for him to get the second vaccine since he had the chest pain side effects as to why I'm reporting this. I'm surprised they give the same dose to a 80lb child, they do to a 200 lb grown man. |
| BURNING SENSATION | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| C-REACTIVE PROTEIN | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| C-REACTIVE PROTEIN | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| C-REACTIVE PROTEIN | COVID19 VACCINE (COVID19) | 1394691-1 | Patient presented the emergency department with chest pain radiating to left arm on 6/12. Studies indicate myocarditis. Patient will be transferred to specialty hospital for cardiology. |
| C-REACTIVE PROTEIN | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1342146-1 | Suspect pericarditis, elevated CRP, very very slight pericardial effusion, classic story, few EKG findings |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1361977-1 | myocaritis - chest pain with elevated troponin reequiring hospital admission. symptoms started 3 days after vaccination which was his second dose of the Pfizer vaccine. First dose was on 5/1/21. |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------------|---------------------------|---------------------------|---|
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1464697-1 | chest pain, slightly more on left |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| C-REACTIVE PROTEIN INCREASED | COVID19 VACCINE (COVID19) | 1837449-1 | Chest pain. E |
| C-REACTIVE PROTEIN NORMAL | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| CARDIAC IMAGING PROCEDURE ABNORMAL | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| CARDIAC MONITORING | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| CARDIAC MONITORING NORMAL | COVID19 VACCINE (COVID19) | 1674476-1 | She woke up the next morning was barely conscious, couldn't breathe, lips and face extremely pale , almost stopped breathing |
| CEREBROVASCULAR ACCIDENT | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|--|
| CHEILITIS | COVID19 VACCINE (COVID19) | 1346824-1 | Patient received above noted COVID19 Vaccine on Friday morning and reported symptoms starting Saturday morning. Symptoms include lip swelling, lip rash, and erythema only affected the lip area of the face. Symptoms have persisted for 3 days and that is when the pharmacy was contacted. Mother has given Benadryl to patient to help with itching/swelling. Pharmacist recommended close monitoring for worsening symptoms and to follow-up with primary care provider for further guidance. |
| CHEST DISCOMFORT | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| CHEST DISCOMFORT | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1341490-1 | Pericarditis, temp 100, chest pain |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1351955-1 | He developed acute chest pain 4 days after the vaccine and presented to the ED. Pain was worse in recumbent position and improved with sitting. ED physician suspected possible pericarditis and he was given ibuprofen. Symptoms resolved within 24 hours while taking ibuprofen. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1352373-1 | Patient reporting increase in chest pain starting 7-8 days after administration of vaccine |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1357951-1 | My son developed a fever, brain fog, and his legs felt like they were burning. More worrisome was the heart pain he woke up with in the middle of the night and throughout the day on 5/20. He complained of a sharp stabbing pain on left side of his chest and said it was hard to take a deep breath. I gave him ibuprofen and he rested. I called his doctor and they said not to worry, these side effects were normal. I'm a bit nervous for him to get the second vaccine since he had the chest pain side effects as to why I'm reporting this. I'm surprised they give the same dose to a 80lb child, they do to a 200 lb grown man. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1361977-1 | myocaritis - chest pain with elevated troponin requiring hospital admission. symptoms started 3 days after vaccination which was his second dose of the Pfizer vaccine. First dose was on 5/1/21. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1382297-1 | Severe chest pain along with dizziness/lightheadedness started 2 hours after vaccine. Sx persisted for several hours. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1382927-1 | 2nd dose was on Saturday at 10a. Felt body aches and headache that evening and the next day. Arm was sore at the injection site. Treated with ibuprofen (400 mg). Was able to go to school on Monday. Tuesday morning at 3a woke up not feeling well with chest pain and headache. Treated with ibuprofen. Still felt a little unwell in the morning, but by afternoon was feeling normal. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1386138-1 | Patient developed chest pain 2 days after vaccination. EKG consistent with pericarditis. He had chest pain 2 days after vaccination and briefly on the 3rd day. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1388978-1 | My teenaged son experienced chest pain and shortness of breath following his second Pfizer COVID shot. He felt he could not get a deep breathe for multiple days. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------|---------------------------|---------------------------|---|
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1394691-1 | Patient presented the emergency department with chest pain radiating to left arm on 6/12. Studies indicate myocarditis. Patient will be transferred to specialty hospital for cardiology. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1399081-1 | Fever, lethargy, shortness of breath, chest pain, neck pain, swollen lymph nodes |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1399992-1 | chest pain for about 24 hours that resolved spontaneously over 24 hours. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1400914-1 | chest pain intermittent for 2 days, EKG no acute changes, high sensitivity troponin 2217 (ref range <45). |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1412447-1 | Labored breathing; chest pains; fast heart rate; This is a spontaneous report from a contactable consumer reported for himself. A 16-years-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration, administered in Arm Right on 13May2021 11:30 AM as unknown, single (at age of 15-years-old) for covid-19 immunisation. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. No other medications the patient received within 2 weeks of vaccination. Medical history included choanal atresia, tonsils and adenoids removed, ear tags. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant medications were none. On 04Jun2021 09:00, the patient experienced labored breathing, chest pains, fast heart rate. The adverse events resulted in emergency room/department or urgent care, hospitalization for 2 days. The adverse events received treatment included Aspirin, Ibuprofen. The patient underwent lab tests and procedures which included Nasal Swab: negative on 05Jun2021. Outcome of the event was not recovered. Information on the lot/batch number has been requested. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1417707-1 | Chest pain 3 days after vaccine, evaluated 4 days after vaccine and found to have evidence of pericarditis without myocarditis. As no myocarditis and symptoms mild, was discharged with plan for cardiology follow up in 1 month. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------|---------------------------|---------------------------|--|
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging, constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1441095-1 | Mom called PCP office 6/30/21 about 4:00 and reported Cainan had a headache and mild chest pain. She brought him into the ED that evening. Mom called 7/1/2021 in the morning and informed us that he had been admitted to BAH for heart swelling. myocarditis |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1463557-1 | Palpitations and chest pain Seen in ER on 7/8/21 and admitted overnight with rising troponin levels, improved by next day. Diagnosis of myocarditis related to COVID19 vaccine |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1464697-1 | chest pain, slightly more on left |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1533287-1 | Myocarditis - chest pain with significantly elevated troponin. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1574537-1 | Chest Pain Developed a few days after vaccine administration. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1582314-1 | chest pain 48hr after 2nd Pfizer COVID-19 vaccine |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1632935-1 | Patient developed myocarditis with acute chest pain and peak troponin of 11. He required 2 nights of hospitalization. He symptomatically improved within 48 hours with troponin trending down to 6. He had normal echo. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1655967-1 | Patient developed chest pain approximately 3 days after second Pfizer COVID vaccine. Patient went to the ER and was admitted with acute myocarditis and elevated troponins. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1693635-1 | Acute myocarditis. Patient initially developed headache, chest pain, nausea and vomiting. All other symptoms resolved, but chest pain continued, so he presented to the ED 2 days after receiving the vaccine (Wed, 9/8). He was found to have elevated troponins at that time and was hospitalized for further observation and management. His chest pain resolved by Friday, 9/10. His troponins fluctuated between 4.14-9.94. He was discharged in good condition with downtrending troponins on Saturday, 9/11. |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1772257-1 | Acute myocarditis ~48 hours after vaccination with shortness of breath and chest pain, TPN elevation |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1826456-1 | chest pain, shortness of breath, likely myocarditis |
| CHEST PAIN | COVID19 VACCINE (COVID19) | 1837449-1 | Chest pain. E |
| CHEST X-RAY NORMAL | COVID19 VACCINE (COVID19) | 1376659-1 | syncope within minutes of vaccination with resultant left front incisor tooth fracture |
| CHEST X-RAY NORMAL | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------|---------------------------|---------------------------|---|
| CHEST X-RAY NORMAL | COVID19 VACCINE (COVID19) | 1412936-1 | Pericarditis |
| CHEST X-RAY NORMAL | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| CHEST X-RAY NORMAL | COVID19 VACCINE (COVID19) | 1574537-1 | Chest Pain Developed a few days after vaccine administration. |
| CHILLS | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| CHILLS | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| CHILLS | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| CHILLS | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did lighten up. |
| CHILLS | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| CHILLS | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| CHILLS | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |
| CHILLS | COVID19 VACCINE (COVID19) | 1392614-1 | reported Fever, body aches. chills, Nausea, Severe headache which made me take her to Emergency Room on 6/11/21. Severe headache possibly from Covid Vaccine. |
| CHILLS | COVID19 VACCINE (COVID19) | 1407186-1 | Patient developed a fever, chills, headache. Fever and chills lasted for 1.5 days, headache persisted for 3 days. He has never had adverse reactions to any childhood vaccines prior to this. |
| CHILLS | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021;Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------|---------------------------|---------------------------|--|
| CHILLS | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| CHILLS | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |
| CHROMATOPSIA | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |
| COLD SWEAT | COVID19 VACCINE (COVID19) | 1397729-1 | The morning after the 1st COVID vaccine, patient experienced a sudden onset of feeling clammy, pale and narrowing vision. Near syncopal episode. Resolved after lying down and resting for about 10 minutes. |
| COLD SWEAT | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| COLD SWEAT | COVID19 VACCINE (COVID19) | 1512712-1 | "SUBJECTIVE: Pt. is a 15 year old male here vaccinated at our community vaccine event at high school last evening and received the Pfizer vaccine Approx 10 min after receiving the vaccine the patient reported: weakness and lightheadedness At approx 10 min post vaccination he was still sitting in the chair he was vaccinated in. When I came to him he was clammy and pale and felt weak and lightheaded. He also c/o of feeling tremulous This Hx of was obtained by pt and pt's mother who was with pt at the vaccine event. Pt was feeling anxious but well prior to the vaccine. He last ate approx 5 hrs prior to vaccine and had hamburger and root beer. He had no significant activity during the day prior to the event. He did wake up approx 4 hrs earlier than his usual time on day of event because of school orientation he had that day. Pt and mom denied any prior hx of similar reactions after vaccines Pt reported it ""feels like just got a shot"" No nausea, itching or resp distress No PMHx -Per pt. has been on IEP for adhd No current medications NKDA Sochx: pt denied any recent drug or etoh use Sudden onset of symptoms/signs: yes Rapid progression of symptoms/signs: Rapid progression that quickly improved OBJECTIVE: General appearance: pale and clammy Skin:no rashes Resp: CTA bilat CV: RRR Vitals Vaccine given at 5:58 pm 6:05 pm BP 87/50, P 83, pox 98%- pt was given water 6:08 pm BP 134/84, - coloring in face improved and pt began to feel better- pt was alert and oriented x 3 at this point 6:13pm BP 130/66- pt was given granola bar and 2nd bottle of water BS: 118 DISPOSITION: After sitting in chair for approx 35 min, drinking two bottles of water and two granola bars pt was feeling better, appeared better with normal coloring and not clammy and had normal vitals signs. He and his mom felt comfortable going home to rest. I reviewed warning signs with mom to call or go to ED for I called the next day (7/29) and spoke with his mom and she stated pt was doing better after eating dinner and was feeling well this. She plans to call pt's pediatrician to coordinate his 2nd dose in their office or affiliated clinic." |
| COLD SWEAT | COVID19 VACCINE (COVID19) | 1592988-1 | Pt presented with guardian at point of sale to report fainting spell in the bathroom with guardian. Reported feeling clammy and nauseous after shot but attributed to anxiousness. Guardian said the the patient started tunnel vision while walking to the bathroom then collapsed onto guardian. She did not loose consciousness. Had the patient sit back down in the waiting room. Her pulse was 80bpm regular rate and rhythm. Pale paler with clammy feel. Pt was alert and followed directions but did not speak for herself. Blood Pressure was taken 110/81 79BPM. Vaccine was given about 12:30 with reporting to point of sale at 12:56pm Monitored patient for 5 more minutes. She was feeling better and able to stand with out any faintness. Sent on her way to call if any reoccurrence. |
| COLD URTICARIA | COVID19 VACCINE (COVID19) | 1536269-1 | Developed reactions to cold in the form of hives, large welts, and swelling of the lips. First reaction was a softball size welt on June 25th after icing sore elbow. Now any contact with chilled or iced items produces welts, swelling, and itching. Contact with cold river water while rafting August 8 produced hives over entire body. Contact with ice cream on 8/7 produced swollen lips. Very concerned as my daughter is a competitive swimmer. While the first notable welt on elbow, was approximately 9 days after 2nd vaccine, she said she noticed an itchy sensation when exposed to cold at some point prior to this but never before 2nd vaccine. |
| COMPUTERISED TOMOGRAM | COVID19 VACCINE (COVID19) | 1430330-1 | admitted 6/23 in status epilepticus. Found to have a basilar artery thrombus |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------------------|---------------------------|---------------------------|---|
| COMPUTERISED TOMOGRAM | COVID19 VACCINE (COVID19) | 1634192-1 | My son got his first dose of the Pfizer Covid-19 Vaccine and five days later he had sharp pains in his side followed by vomiting three times and being in pain all night. I took him to pediatrician in morning and was told to go to the ER where they did an emergency appendectomy on the Tuesday following his vaccine. I am not quite sure if it is a direct result of the vaccine but I did research on the website as well as the University and it states a 1/2500 chance through their testing. |
| COMPUTERISED TOMOGRAM HEAD | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| COMPUTERISED TOMOGRAM HEAD NORMAL | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| COMPUTERISED TOMOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| COMPUTERISED TOMOGRAM THORAX NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| CONDITION AGGRAVATED | COVID19 VACCINE (COVID19) | 1409006-1 | Child developed a massive PANDAS OCD Flare and possibly cytokine storm. He ended up in the hospital asking to die because OCD thoughts became over whelming. Child has had PANDAS for 6 years and never had an incident like this. |
| CONDITION AGGRAVATED | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |
| CONDITION AGGRAVATED | COVID19 VACCINE (COVID19) | 1602814-1 | Vomiting every 10-15 minutes. Inability to keep fluids down |
| CONDITION AGGRAVATED | COVID19 VACCINE (COVID19) | 1840949-1 | Patient received first dose 08/14/21, had symptoms of light headedness and diaphoresis 2 days later with menorrhagia. She was seen in the ER. She was found to be anemic. Was prescribed iron supplements. She received her second dose 3 weeks later and again had menorrhagia. She was seen in the ER a week later with menorrhagia and severe anemia. She came back the next day and required a blood transfusion and a D and C. She was in the hospital for 3 days. She has a history of heavy menstrual bleeding. |
| CONFUSIONAL STATE | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| CONFUSIONAL STATE | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| CONJUNCTIVITIS | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procalcitonin elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| COPROLALIA | COVID19 VACCINE (COVID19) | 1657447-1 | 3-4 hours of severe physical tics accompanied by non-stop coprolalia, head banging and screaming. Complaining of ringing in ears and aural sensitivity. Episode receded, but significant tics occurred the next day as well. |
| COUGH | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| COUGH | COVID19 VACCINE (COVID19) | 1457684-1 | Cough beginning day after vaccination and continuing now 7 weeks later; no chest pain, no shortness of breath. possibly coincidental |
| COVID-19 | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have been Covid positive by PCR. No medications initiated. ECHO normal. |
| COVID-19 | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procalcitonin elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------------------|---------------------------|---------------------------|---|
| CYTOMEGALOVIRUS TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| CYTOMEGALOVIRUS TEST | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| CYTOMEGALOVIRUS TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| DEAFNESS | COVID19 VACCINE (COVID19) | 1519828-1 | patient felt faint, skin color turned white. patient complained she could not see or hear anything and she felt weak. we assisted patient back into our immunization, placed her on the floor, elevated her feet, and placed a pillow under her head. called 911. within 5 minutes the patient's color was returning to her face and she was able to see and hear again. it appears the patient had an anxiety attack as a result of the immunization. |
| DECREASED APPETITE | COVID19 VACCINE (COVID19) | 1374485-1 | Body aches, nausea, lethargy, decreased appetite, possible fever, sleeping difficulties approx. 24 hours |
| DECREASED APPETITE | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| DECREASED APPETITE | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| DECREASED APPETITE | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| DECREASED NASOLABIAL FOLD | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |
| DEHYDRATION | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| DEMYELINATION | COVID19 VACCINE (COVID19) | 1722615-1 | Paresthesias, muscle weakness: Guillian Barre syndrome. Onset 12 days following first COVID vaccination. No other acute illness typically associated with GB. |
| DEPRESSED LEVEL OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1322138-1 | Patient had what appeared to be absence seizures (facial twitching, unresponsive but moving eyes, fist clenching) for 30 seconds. This occurred 10 minutes post injection. Patient did not fall out of chair as her grandmother was right next to her. 911 was called, patient recovered immediately after and had no other incidence. patient taken to hospital. |
| DEPRESSED LEVEL OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1674476-1 | She woke up the next morning was barely conscious, couldn't breathe, lips and face extremely pale , almost stopped breathing |
| DIARRHOEA | COVID19 VACCINE (COVID19) | 1692342-1 | Diarrhea; Soreness at vaccination site of left arm; This is a spontaneous report from a contactable consumer, the parent. A 12-year-old male patient received first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: FC3182) via an unspecified route of administration in the left arm on 04Sep2021 at 14:30 (at the age of 12-years-old) as a single dose for COVID-19 immunisation. Medical history included seasonal allergies and allergy to peanuts. It was also reported that the patient could have had COVID-19 in Jan/Feb2021 as family members had it, but the patient was not tested. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the vaccination. Concomitant medications included over the counter cetirizine hydrochloride (WAL ZYR) taken for allergies from an unknown date and unknown if ongoing. On 06Sep2021 at 08:00 in the morning, the patient experienced diarrhea which lasted all day and soreness at vaccination site of left arm. On 07Sep2021 in the morning, the patient still had diarrhea. The events did not result in doctor or other healthcare professional office/clinic visit, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events soreness at vaccination site of left arm and diarrhea were not resolved at the time of this report. |
| DIARRHOEA | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |

| Symptoms | COVID19 Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| DIFFERENTIAL WHITE BLOOD CELL COUNT | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| DIFFERENTIAL WHITE BLOOD CELL COUNT NORMAL | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |
| DISORIENTATION | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| DISTURBANCE IN ATTENTION | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |
| DIZZINESS | COVID19 VACCINE (COVID19) | 0942502-1 | Patient described rapid onset sweating and flushing. Said he felt light headed as well. Gave Benadryl 25 mg with continued observation for 30 minutes and he said he felt mostly better, but still tired and weak. Followed up next day and his mother said he was doing better. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1178328-1 | PER PT, FEELING DIZZY AND AS IF SHE WAS FAINTING - PT WAS RESPONSIVE TO QUESTIONS AND HAD NORMAL BREATHING. PT GIVEN 1 DOSE OF ADULT EPI (LOT 0FM501, EXP 05/22). PER EMT (ARRIVED WITHIN 10 MIN OF CALL), PT HAD NORMAL FAINTING SYMPTOMS OF HYPOTENSION AND LOOKING PALE |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1182296-1 | "Patient felt lightheaded almost immediately after receiving vaccine. She was walking with her parents to the lobby and they reported pt ""jerking"" then becoming unconscious. She woke up right away. She was nauseous and pale for another 20 minutes or so. We called 911 and paramedics determined it to be a vasovagal response." |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1231181-1 | Heart racing Dizziness Weakness Numbness at injection site |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1272692-1 | Patient felt light headed 2 minutes after receiving the vaccines and recovered after 15 minutes. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did lighten up. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1325402-1 | Patient bopped her head back and then forward (fainted for about one second) after receiving vaccine. Reports of low blood pressure and dizziness |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1344851-1 | Person complained of light headedness, dizziness and blurred vision after receiving the first dose of the Pfizer vaccine. EMS was called and treated the individual on scene and was released on their own. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------|---------------------------|---------------------------|--|
| DIZZINESS | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1382297-1 | Severe chest pain along with dizziness/lightheadedness started 2 hours after vaccine. Sx persisted for several hours. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1389049-1 | Dizzy, low blood pressure, tingling in hands and feet. Patient was placed in supine position, legs elevated. Oxygen was administered. BP slowly returned to normal, he was slowly transitioned from supine to sitting then standing and was able to walk out of office on his own. Event lasted about 1 hour. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1389274-1 | My daughter was receiving her second vaccine about 1230pm and while administered she immediately told me she felt ?dizzy and nauseous.? We sit down, she is not feeling better and within 3 minutes or so she said she felt? dizzy and feel like I?m going to throw up.? She then starts nodding off and on, not able to keep her eyes open. I waved over for help and by the time volunteers got to her she went limo and passes out. She was taken by wheelchair to medic room and they had her lay down. She came alert and said ? everything went black? and had no memory/recollection or awareness of where she was and how she got to the medic room. We gave her water and I asked for crackers and she felt better and was able to leave around 115pm. In addition, we saw a teenage male pass out prior to my daughter and was also taken by wheelchair. I spoke with a RN as I was leaving and was told multiple teens had had the same initial reaction today. She had no reactions or side effects with her first dose. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1416567-1 | She felt dizziness immediately and passed out as we were leaving the store. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1470479-1 | Vasovagal reaction to vaccine, dizziness, diaphoresis, pale. Had client lie down and raised legs. Lasted 4-5 minutes. Completely recovered |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------|---------------------------|---------------------------|---|
| DIZZINESS | COVID19 VACCINE (COVID19) | 1498414-1 | Began feeling dizzy at about 5:10pm, about 10 minutes after vaccination. Was in seated position. Took to exam room to lay down on exam table. No LOC. Vitals checked repeatedly during observation. Found to be normal. Patient alert and communicating during observation period. No food today (as of 5:18pm). Has had water. Takes fluoxetine 20mg daily, had medication today. Has a history of anxiety. Has a history of dizziness, feels like current episode is consistent with a panic attack. Has a history of a similar episode in which she fainted during a panic attack, went to ER (August 2020). Vasovagal episode. At 5:43pm, the patient continues to appear clinically well with vitals stable, continues to feel a little anxious but overall better. Denies nausea. Dizziness better. Breathing feels better. Respiration rate 20 but slows to normal rate when engaged in conversation, becomes faster when not distracted/engaged in conversation. Patient sat up without difficulty at 5:55pm but became dizzy when trying to stand. Returned to sitting position and waited 5 minutes, brought out to waiting area where cooler. Patient continued to appear improved and distracted with conversation but reported feeling trembling and some dizziness but improved. Anxiety continued to be suspected but also consider hypoglycemia. Unable to locate glucose tabs and glucometer in clinic. Manager went for supplies while observation continued in waiting room. Vitals continued to be normal during observation. Also, noted not to be orthostatic between sitting and standing BP. Blood glucose normal at 97 when checked at 6:40pm. Was offered water and snacks multiple times throughout observation but declined. Provided emesis bag but no emesis observed in clinic stay. Discussion with mom and patient about symptoms which are believed to be due to anxiety rather than allergic reaction. Discussed observation in the hospital vs returning home with close observation and plan to go to ER/call 911 if symptoms worsen. Both mom and patient would like to go home with close observation and a clear understanding of when/if to go to hospital. Patient left clinic at 6:45pm and walked out on her own strength (noted to be standing on one foot several times and not appearing to be dizzy). Vitals normal and patient appeared comfortable and not in any acute distress. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1502004-1 | Approximately 3 minutes after injection, pt. reported that her vision had gone black, her ears were ringing, and she felt faint. I notified the nurse immediately. Within another minute her breathing became rapid and faint. She was given water and coached to breath slowly and deeply. The nurse checked her blood pressure with a result of 67/22. A second BP check resulted in 70/27. The nurses transferred her to the ER. In the ER, a third BP check 20 minutes after injection resulted in a normal reading of approximately 110/70. She continued to take oral fluids for approximately one hour before being released. The medical staff reported to us that this is a completely normal reaction for many people to all vaccinations, and suggested that she should get the second dose of Pfizer vaccine in 3-4 weeks. However, when we check the CDC website we find that these are anaphylactic symptoms and should not get the 2nd dose of Pfizer, so we are greatly concerned and decided to report the event. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1506475-1 | syncope dizzy, light headed, upset stomach lasted 15 minutes |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1512712-1 | "SUBJECTIVE: Pt. is a 15 year old male here vaccinated at our community vaccine event at high school last evening and received the Pfizer vaccine Approx 10 min after receiving the vaccine the patient reported: weakness and lightheadedness At approx 10 min post vaccination he was still sitting in the chair he was vaccinated in. When I came to him he was clammy and pale and felt weak and lightheaded. He also c/o of feeling tremulous This Hx of was obtained by pt and pt's mother who was with pt at the vaccine event. Pt was feeling anxious but well prior to the vaccine. He last ate approx 5 hrs prior to vaccine and had hamburger and root beer. He had no significant activity during the day prior to the event. He did wake up approx 4 hrs earlier than his usual time on day of event because of school orientation he had that day. Pt and mom denied any prior hx of similar reactions after vaccines Pt reported it ""feels like just got a shot"" No nausea, itching or resp distress No PMHx -Per pt. has been on IEP for adhd No current medications NKDA SocHx: pt denied any recent drug or etoh use Sudden onset of symptoms/signs: yes Rapid progression of symptoms/signs: Rapid progression that quickly improved OBJECTIVE: General appearance: pale and clammy Skin:no rashes Resp: CTA bilat CV: RRR Vitals Vaccine given at 5:58 pm 6:05 pm BP 87/50, P 83, pox 98%- pt was given water 6:08 pm BP 134/84, - coloring in face improved and pt began to feel better- pt was alert and oriented x 3 at this point 6:13pm BP 130/66- pt was given granola bar and 2nd bottle of water BS: 118 DISPOSITION: After sitting in chair for approx 35 min, drinking two bottles of water and two granola bars pt was feeling better, appeared better with normal coloring and not clammy and had normal vitals signs. He and his mom felt comfortable going home to rest. I reviewed warning signs with mom to call or go to ED for I called the next day (7/29) and spoke with his mom and she stated pt was doing better after eating dinner and was feeling well this. She plans to call pt's pediatrician to coordinate his 2nd dose in their office or affiliated clinic." |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1518463-1 | Shortly after receiving the shot, the patient was was waiting the 15 minutes monitoring period in the store. She was standing/walking and told her parents that she was feeling dizzy and needed to urgently sit down to prevent herself from falling. I was notified that a patient was having an event. I encountered Pt who was sitting on the floor. She was conscience but seemed lethargic. I attempted a BP measurement with a machine x 2 with no result then obtained a manual pressure of 115/65. I obtained a radial pulse rate of 65. Forehead Temp was 97.4. We placed patient in a chair and encouraged water and bit of orange juice. I took a follow up vital set BP 115/61, HR 65, T 97.2. Patient recovered spontaneously and was observed for approximately 15 minutes and then left store with parents. I followed up with a phone call at 0915 on 7/31/21 and the parents reported a full recovery. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1519828-1 | patient felt faint, skin color turned white. patient complained she could not see or hear anything and she felt weak. we assisted patient back into our immunization, placed her on the floor, elevated her feet, and placed a pillow under her head. called 911. within 5 minutes the patient's color was returning to her face and she was able to see and hear again. it appears the patient had an anxiety attack as a result of the immunization. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------|---------------------------|---------------------------|--|
| DIZZINESS | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1724302-1 | Within five minutes from receiving vaccine, patient reported feeling lightheaded, nauseous, and was pale. He was offered water and blood pressure was taken around 7:10pm, showing 61/43 mmHg. Upon patient's mother's consent, emergency services was called where he had his vitals re-checked. After ten minutes, his vitals are normal and blood pressure was back up to normal range. Patient was able to stand without dizziness. His mother was given the option to go to the hospital for further monitoring or leave on their own, in which she decided they were to leave on their own and monitor at home. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| DIZZINESS | COVID19 VACCINE (COVID19) | 1835295-1 | Headache everyday; Nauseated; Sore throat; Tired; Dizzy; This is a spontaneous report from a non-contactable consumer, the patient. A 13-year-old non-pregnant female patient received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: 30130BA) via an unspecified route of administration in the left arm on 09Sep2021 at 12:15 (at the age of 13-years-old) as a single dose for COVID-19 immunisation. Medical history included asthma. The patient had no known allergies. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other medications within two weeks of vaccination. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. On 09Sep2021 at 19:00, the patient experienced headache everyday, nauseated, sore throat, tired and dizzy. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events headache everyday, nauseated, sore throat, tired and dizzy were resolving at the time of this report. No follow-up attempts are possible. No further information is expected. |
| DRAINAGE | COVID19 VACCINE (COVID19) | 1321376-1 | "reports ""throat feels a little tight "" and ""hard to swallowing"". Brought to observation area. Vss (baseline HTN per his report). reports seasonal allergies. Oropharynx red upon inspection and drainage noted at back of throat. Able to drink fluids with difficulty. Reports immediate improvement of symptoms after PO fluids. Discussed symptoms of anaphylaxis with him. Released him to home after discussion of serious symptoms and what to contact ems for" |
| DRUG SCREEN NEGATIVE | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| DRUG SCREEN NEGATIVE | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---------------|---------------------------|---------------------------|---|
| DRY SKIN | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient's nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| DYSKINESIA | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| DYSMENORRHOEA | COVID19 VACCINE (COVID19) | 1466792-1 | 1. Intense bloody nose that bled for 35 minutes, very heavy flow and had a hard time stopping it. 2. Menstrual cycle started 13 days early with unusually heavy flow and cramping. |
| DYSPHAGIA | COVID19 VACCINE (COVID19) | 1281968-1 | Pt has had a rash on neck and face X 3 days. She reports its slightly itchy, swollen and red. Not painful. It started on neck and spread to face. No fever, no trouble breathing. Very slight tight feeling in her throat yesterday with mild difficult in swallowing, but otherwise no issues swallowing/breathing today. Had first dose of covid pfizer vaccine 10 days ago. Has tried benadryl and hydrocortisone (one dose/application each) with no significant improvement. |
| DYSPHAGIA | COVID19 VACCINE (COVID19) | 1321376-1 | "reports ""throat feels a little tight "" and ""hard to swallowing"". Brought to observation area. Vss (baseline HTN per his report). reports seasonal allergies. Oropharynx red upon inspection and drainage noted at back of throat. Able to drink fluids with difficulty. Reports immediate improvement of symptoms after PO fluids. Discussed symptoms of anaphylaxis with him. Released him to home after discussion of serious symptoms and what to contact ems for" |
| DYSPHAGIA | COVID19 VACCINE (COVID19) | 1403749-1 | 13 yo old girl c/o difficulty swallowing and scratchy throat approximately ten minutes after receiving the second dose of the Pfizer vaccine. She appears well but has a nasal tone to her voice. Auscultation of her larynx did not reveal stridor. No rash, wheezing, or other associated signs or symptoms. She was treated with 25 mg of oral diphenhydramine with a resolution of symptoms after an extended monitoring period. |
| DYSPHONIA | COVID19 VACCINE (COVID19) | 1403749-1 | 13 yo old girl c/o difficulty swallowing and scratchy throat approximately ten minutes after receiving the second dose of the Pfizer vaccine. She appears well but has a nasal tone to her voice. Auscultation of her larynx did not reveal stridor. No rash, wheezing, or other associated signs or symptoms. She was treated with 25 mg of oral diphenhydramine with a resolution of symptoms after an extended monitoring period. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1362616-1 | Patient complained of shortness of breath after receiving the Pfizer vaccine. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|--|
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1369033-1 | tired, body aches, restricted breathing, upset stomach, vomiting, congestion |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1388978-1 | My teenaged son experienced chest pain and shortness of breath following his second Pfizer COVID shot. He felt he could not get a deep breathe for multiple days. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1399081-1 | Fever, lethargy, shortness of breath, chest pain, neck pain, swollen lymph nodes |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1412447-1 | Labored breathing; chest pains; fast heart rate; This is a spontaneous report from a contactable consumer reported for himself. A 16-years-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration, administered in Arm Right on 13May2021 11:30 AM as unknown, single (at age of 15-years-old) for covid-19 immunisation. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. No other medications the patient received within 2 weeks of vaccination. Medical history included choanal atresia, tonsils and adenoids removed, ear tags. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant medications were none. On 04Jun2021 09:00, the patient experienced labored breathing, chest pains, fast heart rate. The adverse events resulted in emergency room/department or urgent care, hospitalization for 2 days. The adverse events received treatment included Aspirin, Ibuprofen. The patient underwent lab tests and procedures which included Nasal Swab: negative on 05Jun2021. Outcome of the event was not recovered. Information on the lot/batch number has been requested. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging. constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1546154-1 | Passed out and went into convulsions, woke up and couldn't breathe well until albuterol was administered |

| Symptoms | COVID19 Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------|---------------------------|---------------------------|---|
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1674476-1 | She woke up the next morning was barely conscious, couldn't breathe, lips and face extremely pale , almost stopped breathing |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1772257-1 | Acute myocarditis ~48 hours after vaccination with shortness of breath and chest pain, TPN elevation |
| DYSPNOEA | COVID19 VACCINE (COVID19) | 1826456-1 | chest pain, shortness of breath, likely myocarditis |
| DYSPNOEA EXERTIONAL | COVID19 VACCINE (COVID19) | 1358000-1 | Patient experienced fatigue, malaise and rash within 24 hours of second COVID vaccine. Then reported feeling short of breath with exertion while at wrestling practice on 5th day following COVID vaccine. |
| DYSSTASIA | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| EAR PAIN | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| ECHOCARDIOGRAM | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| ECHOCARDIOGRAM | COVID19 VACCINE (COVID19) | 1772257-1 | Acute myocarditis ~48 hours after vaccination with shortness of breath and chest pain, TPN elevation |
| ECHOCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| ECHOCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------------|---------------------------------|---------------------------|---|
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1417707-1 | Chest pain 3 days after vaccine, evaluated 4 days after vaccine and found to have evidence of pericarditis without myocarditis. As no myocarditis and symptoms mild, was discharged with plan for cardiology follow up in 1 month. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1505874-1 | See above. Abrupt worsening of anxiety. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1533287-1 | Myocarditis - chest pain with significantly elevated troponin. |
| ECHOCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1632935-1 | Patient developed myocarditis with acute chest pain and peak troponin of 11. He required 2 nights of hospitalization. He symptomatically improved within 48 hours with troponin trending down to 6. He had normal echo. |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1275018-1 | on the same day as first dose of covid vaccine, several hours later, patient had first episode of supraventricular tachycardia. Required vagal maneuvers in ambulance to resolve. No longterm sequelae. |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1358000-1 | Patient experienced fatigue, malaise and rash within 24 hours of second COVID vaccine. Then reported feeling short of breath with exertion while at wrestling practice on 5th day following COVID vaccine. |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1362007-1 | pericarditis |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1386138-1 | Patient developed chest pain 2 days after vaccination. EKG consistent with pericarditis. He had chest pain 2 days after vaccination and briefly on the 3rd day. |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1394691-1 | Patient presented the emergency department with chest pain radiating to left arm on 6/12. Studies indicate myocarditis. Patient will be transferred to specialty hospital for cardiology. |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1412936-1 | Pericarditis |
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1441095-1 | Mom called PCP office 6/30/21 about 4:00 and reported Cainan had a headache and mild chest pain. She brought him into the ED that evening. Mom called 7/1/2021 in the morning and informed us that he had been admitted to BAH for heart swelling. myocarditis |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------------|---------------------------|---------------------------|--|
| ELECTROCARDIOGRAM | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1342146-1 | Suspect pericarditis, elevated CRP, very very slight pericardial effusion, classic story, few EKG findings |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1417707-1 | Chest pain 3 days after vaccine, evaluated 4 days after vaccine and found to have evidence of pericarditis without myocarditis. As no myocarditis and symptoms mild, was discharged with plan for cardiology follow up in 1 month. |
| ELECTROCARDIOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1351955-1 | He developed acute chest pain 4 days after the vaccine and presented to the ED. Pain was worse in recumbent position and improved with sitting. ED physician suspected possible pericarditis and he was given ibuprofen. Symptoms resolved within 24 hours while taking ibuprofen. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1376659-1 | syncope within minutes of vaccination with resultant left front incisor tooth fracture |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1399992-1 | chest pain for about 24 hours that resolved spontaneously over 24 hours. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1400914-1 | chest pain intermittent for 2 days, EKG no acute changes, high sensitivity troponin 2217 (ref range <45). |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1505874-1 | See above. Abrupt worsening of anxiety. |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1546154-1 | Passed out and went into convulsions, woke up and couldn't breathe well until albuterol was administered |
| ELECTROCARDIOGRAM NORMAL | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| ELECTROCARDIOGRAM REPOLARISATION ABNORMALITY | COVID19 VACCINE (COVID19) | 1464697-1 | chest pain, slightly more on left |
| ELECTROCARDIOGRAM ST SEGMENT ABNORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | COVID19 VACCINE (COVID19) | 1386138-1 | Patient developed chest pain 2 days after vaccination. EKG consistent with pericarditis. He had chest pain 2 days after vaccination and briefly on the 3rd day. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | COVID19 VACCINE (COVID19) | 1464697-1 | chest pain, slightly more on left |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| ELECTROCARDIOGRAM T WAVE INVERSION | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| ELECTROMYOGRAM ABNORMAL | COVID19 VACCINE (COVID19) | 1722615-1 | Paresthesias, muscle weakness: Guillian Barre syndrome. Onset 12 days following first COVID vaccination. No other acute illness typically associated with GB. |
| ENTEROVIRUS TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| ENTEROVIRUS TEST | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| ENTEROVIRUS TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| EOSINOPHIL PERCENTAGE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| EPISTAXIS | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| EPISTAXIS | COVID19 VACCINE (COVID19) | 1304172-1 | Nose bleed 2 hrs after vaccine. Occured on 4/18,4/23, 5/6 and 5/7. No history of nose bleeds prior. |
| EPISTAXIS | COVID19 VACCINE (COVID19) | 1466792-1 | 1. Intense bloody nose that bled for 35 minutes, very heavy flow and had a hard time stopping it. 2. Menstrual cycle started 13 days early with unusually heavy flow and cramping. |
| EPISTAXIS | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------------------|---------------------------|---------------------------|--|
| EPISTAXIS | COVID19 VACCINE (COVID19) | 1812915-1 | Severe nosebleed lasting a little over 45 minutes; This is a spontaneous report from a contactable consumer (Patient). A 13-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Batch/Lot Number: EW0186, Expiry Date was not provided), via an unspecified route of administration, administered in right arm, on 13Jun2021 at 11:15 AM (age at vaccination was 13 Years) as DOSE 2, SINGLE for COVID-19 immunization in other facility. The patient's medical history was not reported. Concomitant medications included Clonidine. Historical vaccine included first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Batch/Lot Number: EW0186, Expiry Date was not provided), via an unspecified route of administration, administered in right arm, on 22May2021 at 02:15 PM (age at vaccination was 13 Years) as DOSE 1, SINGLE for COVID-19 immunization in other facility. The patient did not have known allergies. The patient did not receive any other vaccines in four weeks. The patient received 0.1mg clonidine (been taking it for about 4 years) in two weeks. Patient did not have COVID prior vaccination. Patient has not been tested post vaccination. On 14Jun2021 at 8:00 AM, patient experienced severe nose-bleed lasting a little over. Patient did not receive any treatment for events. The outcome of event was recovering. No follow up attempts are possible. No further information is expected. |
| EPSTEIN-BARR VIRUS INFECTION | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| EPSTEIN-BARR VIRUS TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| EPSTEIN-BARR VIRUS TEST | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| EPSTEIN-BARR VIRUS TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| ERYTHEMA | COVID19 VACCINE (COVID19) | 1281968-1 | Pt has had a rash on neck and face X 3 days. She reports its slightly itchy, swollen and red. Not painful. It started on neck and spread to face. No fever, no trouble breathing. Very slight tight feeling in her throat yesterday with mild difficult in swallowing, but otherwise no issues swallowing/breathing today. Had first dose of covid pfizer vaccine 10 days ago. Has tried benadryl and hydrocortisone (one dose/application each) with no significant improvement. |
| ERYTHEMA | COVID19 VACCINE (COVID19) | 1346824-1 | Patient received above noted COVID19 Vaccine on Friday morning and reported symptoms starting Saturday morning. Symptoms include lip swelling, lip rash, and erythema only affected the lip area of the face. Symptoms have persisted for 3 days and that is when the pharmacy was contacted. Mother has given Benadryl to patient to help with itching/swelling. Pharmacist recommended close monitoring for worsening symptoms and to follow-up with primary care provider for further guidance. |
| ERYTHEMA | COVID19 VACCINE (COVID19) | 1804124-1 | He woke up the next morning from shoulder to wrist was red and hot to touch. I gave me Tylenol. I called the doctor office spoke with a triage nurse. The nurse recommended Tylenol and Motrin and Benadryl and cold compresses and if he were to get worse to bring him in. That evening it started improving. |
| EXPIRED PRODUCT ADMINISTERED | COVID19 VACCINE (COVID19) | 1526207-1 | the vaccine was expired by 1 day of manufacture expiration date. |
| EXTERNAL VAGAL NERVE STIMULATION | COVID19 VACCINE (COVID19) | 1275018-1 | on the same day as first dose of covid vaccine, several hours later, patient had first episode of supraventricular tachycardia. Required vagal maneuvers in ambulance to resolve. No longterm sequelae. |
| EXTRA DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1591295-1 | full vial of vaccine given |
| EXTRA DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1591311-1 | full vial of vaccine given |
| EXTRA DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1837431-1 | This patient was given a booster dose when he is not 18 years of age, he was 17 at the time of immunization. Not immunocompromised per screening paper. |
| EYE DISORDER | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------|---------------------------|---------------------------|--|
| EYE MOVEMENT DISORDER | COVID19 VACCINE (COVID19) | 1297599-1 | 16yoF was accompanied with an adult who was present for the vaccination. The COVID-19 Vaccine Pfizer-BioNTech 0.3mL administered IM in right deltoid while patient was sitting. Patient remained sitting for 10 minutes after administered dose. Patient reported feeling well after the injection. Patient stood up while we continued to talk, after 2 more minutes passed out while standing. Suddenly, patient began to go limp and her eyes crossed and rolled back. Patient fell backwards into the privacy curtain and into aisle 13 of the store. Patient's head bounced off the floor. Immunizer knelt next to patient. Patient was unresponsive until immunizer placed cold hand on back of neck and front of chest to check if she was breathing, immunizer calmly guided patient to breath, slow deep breaths into the belly and patient's eyes fluttered open. She said her head hurt really bad. Immunizer offered to the accompanying adult to call EMS because patient should be evaluated after hitting her head so hard. The accompanying adult denied EMS, then stating that patient had previously fainted while walking and said that she would be fine. Immunizer advised patient to remain laying down while immunizer got some ice. Ice was then placed on the back of the head. Patient slowly stood up after laying for 10 minutes and was walked over to a sitting area to put feet up and continue with ice for another 5 minutes before the accompanying adult wanted to leave. |
| EYE MOVEMENT DISORDER | COVID19 VACCINE (COVID19) | 1351900-1 | Patient received c19 vaccine Pfizer - lot EW0178 at 1437 on 5/26/2021 At 1443, patient was given 0.15mg Epi in left thigh due to reaction. BP 104/68 P: 63 O2: 97% RA (laying) BP 101/70 P: 88 O2: 98% RA (laying) Patient was seen with her head back in her chair, then sliding down the chair with her eyes rolled and unable to breath. RN assisted Patient mother at side Lab Mgr present Patient was kept on the floor until 911 arrived for EMS transport to Hospital. |
| EYE PAIN | COVID19 VACCINE (COVID19) | 1487142-1 | 48 hours after vaccine right upper eyelid became swollen and slightly tender to palpation |
| FALL | COVID19 VACCINE (COVID19) | 1259688-1 | bp 128/76 pt w syncope 5 mins into monitoring. hit head on front left. monitored for s/sx of concussion. denies blurred vision head ache. monitored for 15mins post fall 09:07 am pt c/o blurring in right eye peripheral vision pt to check with pcp if symptoms continue or worsen. |
| FALL | COVID19 VACCINE (COVID19) | 1347710-1 | A 17 Year old boy, received his first dose of COVID -vaccine, Pfizer. He walked out of the health room feeling fine. Stood outside in the waiting room talking to his mom during his 15 min observatory period. within 10 mins, he fainted and fell on his face on the floor. Till the pharmacist came out to him, the pharmacist kept tapping his shoulder and called his name out loud, he recovered and woke up. pharmacist checked his BP and was 121/71 and 68 HR. 911 was called , and paramedics came in, checked his vitals and all were normal . He just hit his chin when he fell, and bled from his gum, no loose teeth reported and a chin wound that might need glue stitches per paramedics. Patient was fine and talking when paramedics transported him to the hospital. |
| FALL | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| FATIGUE | COVID19 VACCINE (COVID19) | 0942502-1 | Patient described rapid onset sweating and flushing. Said he felt light headed as well. Gave Benadryl 25 mg with continued observation for 30 minutes and he said he felt mostly better, but still tired and weak. Followed up next day and his mother said he was doing better. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| FATIGUE | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| FATIGUE | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1358000-1 | Patient experienced fatigue, malaise and rash within 24 hours of second COVID vaccine. Then reported feeling short of breath with exertion while at wrestling practice on 5th day following COVID vaccine. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1369033-1 | tired, body aches, restricted breathing, upset stomach, vomiting, congestion |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|---|
| FATIGUE | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| FATIGUE | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lisons. She visited her pediatrician Tuesday, June 8th, 2021, and the lisons were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lisons are still present and painful, and continue to be treated. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1415425-1 | My child began feeling tired and ran a temperature about a degree warmer than usual for the first three days after his second COVID vaccine on Sunday 13 June. (So Monday, Tuesday, Wednesday). Thursday he was extra tired and began to complain of itching under the chin in the evening. Friday morning he woke up and had what he described as itchy/painful raised, red patches of skin on his right collarbone, under his chin, across his face (right cheek, temple). His temperature was about 100* and he was, quite frankly, pretty miserable. These weren't little skin irritations, they were giant patches of inflamed tissue covering the better part of each cheek, his temple, under the chin and then in smaller spots on his collarbones and back. Saturday the rash moved to cover the left side of his face, and the left collarbone. (And no, for the record, I did not switch laundry detergents, change his diet or anything like that.) As of today, 6/21 condition has improved but not fully resolved. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging, constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| FATIGUE | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|--|
| FATIGUE | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021;Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| FATIGUE | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |
| FATIGUE | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1835295-1 | Headache everyday; Nauseated; Sore throat; Tired; Dizzy; This is a spontaneous report from a non-contactable consumer, the patient. A 13-year-old non-pregnant female patient received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: 30130BA) via an unspecified route of administration in the left arm on 09Sep2021 at 12:15 (at the age of 13-years-old) as a single dose for COVID-19 immunisation. Medical history included asthma. The patient had no known allergies. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other medications within two weeks of vaccination. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. On 09Sep2021 at 19:00, the patient experienced headache everyday, nauseated, sore throat, tired and dizzy. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events headache everyday, nauseated, sore throat, tired and dizzy were resolving at the time of this report. No follow-up attempts are possible. No further information is expected. |
| FATIGUE | COVID19 VACCINE (COVID19) | 1861272-1 | Vaccine yesterday. This morning about 9am, developed headache, blurry vision, abdominal pain, fatigue. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|--|
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1357951-1 | My son developed a fever, brain fog, and his legs felt like they were burning. More worrisome was the heart pain he woke up with in the middle of the night and throughout the day on 5/20. He complained of a sharp stabbing pain on left side of his chest and said it was hard to take a deep breath. I gave him ibuprofen and he rested. I called his doctor and they said not to worry, these side effects were normal. I?m a bit nervous for him to get the second vaccine since he had the chest pain side effects as to why I?m reporting this. I?m surprised they give the same dose to a 80lb child, they do to a 200 lb grown man. |
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1415425-1 | My child began feeling tired and ran a temperature about a degree warmer than usual for the first three days after his second COVID vaccine on Sunday 13 June. (So Monday, Tuesday, Wednesday). Thursday he was extra tired and began to complain of itching under the chin in the evening. Friday morning he woke up and had what he described as itchy/painful raised, red patches of skin on his right collarbone, under his chin, across his face (right cheek, temple). His temperature was about 100* and he was, quite frankly, pretty miserable. These weren't little skin irritations, they were giant patches of inflamed tissue covering the better part of each cheek, his temple, under the chin and then in smaller spots on his collarbones and back. Saturday the rash moved to cover the left side of his face, and the left collarbone. (And no, for the record, I did not switch laundry detergents, change his diet or anything like that.) As of today, 6/21 condition has improved but not fully resolved. |
| FEELING ABNORMAL | COVID19 VACCINE (COVID19) | 1600860-1 | received first dose at seventeen years of age; concerned and freaked out; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (received first dose at seventeen years of age) and FEELING ABNORMAL (concerned and freaked out) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for an unknown indication. The patient's past medical history included No adverse event (No medical history reported). On 30-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 30-Mar-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (received first dose at seventeen years of age) and FEELING ABNORMAL (concerned and freaked out). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (received first dose at seventeen years of age) and FEELING ABNORMAL (concerned and freaked out) outcome was unknown. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. Concomitant medication history not reported by reporter. Treatment information is not provided |
| FEELING COLD | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| FEELING HOT | COVID19 VACCINE (COVID19) | 1501053-1 | Warm flushing on right side of face near the ear, then eventually on the left side of face. Nausea. Throat felt it was swollen. |
| FIBRIN D DIMER | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| FIBRIN D DIMER | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittenly, and are associated w/fatigue. |

| Symptoms | COVID19 Vaccine Type | VAERS ID | Adverse Event Description |
|---------------------------|---------------------------|---------------------------|---|
| FIBRIN D DIMER | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| FIBRIN D DIMER | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| FIBRIN D DIMER INCREASED | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| FLANK PAIN | COVID19 VACCINE (COVID19) | 1634192-1 | My son got his first dose of the Pfizer Covid-19 Vaccine and five days later he had sharp pains in his side followed by vomiting three times and being in pain all night. I took him to pediatrician in morning and was told to go to the ER where they did an emergency appendectomy on the Tuesday following his vaccine. I am not quite sure if it is a direct result of the vaccine but I did research on the website as well as the University and it states a 1/2500 chance through their testing. |
| FLUSHING | COVID19 VACCINE (COVID19) | 0942502-1 | Patient described rapid onset sweating and flushing. Said he felt light headed as well. Gave Benadryl 25 mg with continued observation for 30 minutes and he said he felt mostly better, but still tired and weak. Followed up next day and his mother said he was doing better. |
| FLUSHING | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| FLUSHING | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| FLUSHING | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |
| FLUSHING | COVID19 VACCINE (COVID19) | 1378245-1 | Patient complained of facial flushing, tingling lips, and his throat feeling like it was tightening. Nurse administered 25mg IM Benadryl per clinic protocol. The reaction resolved after administration of IM Benadryl. |
| FLUSHING | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| FLUSHING | COVID19 VACCINE (COVID19) | 1501053-1 | Warm flushing on right side of face near the ear, then eventually on the left side of face. Nausea. Throat felt it was swollen. |
| FULL BLOOD COUNT | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| FULL BLOOD COUNT | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| FULL BLOOD COUNT | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| FULL BLOOD COUNT | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| FULL BLOOD COUNT ABNORMAL | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| FULL BLOOD COUNT ABNORMAL | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------|---------------------------|---------------------------|---|
| FULL BLOOD COUNT NORMAL | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| FULL BLOOD COUNT NORMAL | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| FULL BLOOD COUNT NORMAL | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| FULL BLOOD COUNT NORMAL | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |
| FULL BLOOD COUNT NORMAL | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| GENITAL HERPES | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lisons. She visited her pediatrician Tuesday, June 8th, 2021, and the lisons were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lisons are still present and painful, and continue to be treated. |
| GENITAL LESION | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lisons. She visited her pediatrician Tuesday, June 8th, 2021, and the lisons were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lisons are still present and painful, and continue to be treated. |
| GLOBULINS INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| GUILLAIN-BARRE SYNDROME | COVID19 VACCINE (COVID19) | 1722615-1 | Paresthesias, muscle weakness: Guillian Barre syndrome. Onset 12 days following first COVID vaccination. No other acute illness typically associated with GB. |
| GUILLAIN-BARRE SYNDROME | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak- numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillein barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| HAEMATOCRIT NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------|---------------------------|---------------------------|--|
| HAEMATURIA | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| HAEMATURIA | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |
| HAEMOGLOBIN DECREASED | COVID19 VACCINE (COVID19) | 1840949-1 | Patient received first dose 08/14/21, had symptoms of light headedness and diaphoresis 2 days later with menorrhagia. She was seen in the ER. She was found to be anemic. Was prescribed iron supplements. She received her second dose 3 weeks later and again had menorrhagia. She was seen in the ER a week later with menorrhagia and severe anemia. She came back the next day and required a blood transfusion and a D and C. She was in the hospital for 3 days. She has a history of heavy menstrual bleeding. |
| HEAD BANGING | COVID19 VACCINE (COVID19) | 1657447-1 | 3-4 hours of severe physical tics accompanied by non-stop coprolalia, head banging and screaming. Complaining of ringing in ears and aural sensitivity. Episode receded, but significant tics occurred the next day as well. |
| HEAD INJURY | COVID19 VACCINE (COVID19) | 1280705-1 | Within about 5 minutes of receiving her first Pfizer Covid19 vaccine, the patient passed out and hit her head on the floor. She regained consciousness quickly (within seconds) after I got to her. She stated she had felt nauseas and tingly before fainting. She has not experienced this before with other vaccines. Ambulance was dispatched due to her hitting her head. Parents and paramedics determined she was ok to go home. |
| HEAD INJURY | COVID19 VACCINE (COVID19) | 1297599-1 | 16yoF was accompanied with an adult who was present for the vaccination. The COVID-19 Vaccine Pfizer-BioNTech 0.3mL administered IM in right deltoid while patient was sitting. Patient remained sitting for 10 minutes after administered dose. Patient reported feeling well after the injection. Patient stood up while we continued to talk, after 2 more minutes passed out while standing. Suddenly, patient began to go limp and her eyes crossed and rolled back. Patient fell backwards into the privacy curtain and into aisle 13 of the store. Patient's head bounced off the floor. Immunizer knelt next to patient. Patient was unresponsive until immunizer placed cold hand on back of neck and front of chest to check if she was breathing, immunizer calmly guided patient to breath, slow deep breaths into the belly and patient's eyes fluttered open. She said her head hurt really bad. Immunizer offered to the accompanying adult to call EMS because patient should be evaluated after hitting her head so hard. The accompanying adult denied EMS, then stating that patient had previously fainted while walking and said that she would be fine. Immunizer advised patient to remain laying down while immunizer got some ice. Ice was then placed on the back of the head. Patient slowly stood up after laying for 10 minutes and was walked over to a sitting area to put feet up and continue with ice for another 5 minutes before the accompanying adult wanted to leave. |
| HEAD INJURY | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1030970-1 | Patient was inadvertently administered the Moderna vaccine before his 18th birthday. A headache was the only adverse effect that the patient reported having post vaccination. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| HEADACHE | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| HEADACHE | COVID19 VACCINE (COVID19) | 1297599-1 | 16yoF was accompanied with an adult who was present for the vaccination. The COVID-19 Vaccine Pfizer-BioNTech 0.3mL administered IM in right deltoid while patient was sitting. Patient remained sitting for 10 minutes after administered dose. Patient reported feeling well after the injection. Patient stood up while we continued to talk, after 2 more minutes passed out while standing. Suddenly, patient began to go limp and her eyes crossed and rolled back. Patient fell backwards into the privacy curtain and into aisle 13 of the store. Patient's head bounced off the floor. Immunizer knelt next to patient. Patient was unresponsive until immunizer placed cold hand on back of neck and front of chest to check if she was breathing, immunizer calmly guided patient to breath, slow deep breaths into the belly and patient's eyes fluttered open. She said her head hurt really bad. Immunizer offered to the accompanying adult to call EMS because patient should be evaluated after hitting her head so hard. The accompanying adult denied EMS, then stating that patient had previously fainted while walking and said that she would be fine. Immunizer advised patient to remain laying down while immunizer got some ice. Ice was then placed on the back of the head. Patient slowly stood up after laying for 10 minutes and was walked over to a sitting area to put feet up and continue with ice for another 5 minutes before the accompanying adult wanted to leave. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did lighten up. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|--|
| HEADACHE | COVID19 VACCINE (COVID19) | 1354950-1 | PATIENT EXPERIENCED BLURRY VISION, SWEATING, NAUSEA, AND HEADACHE. PATIENT WAS GIVEN WATER AND GUM. PATIENT WAS REQUESTED TO STAY FOR LONGER MONITORING. WAS DISMISSED ONCE THE BLURRY VISION, SWEATING, AND NAUSEA SUBSIDED. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| HEADACHE | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |
| HEADACHE | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| HEADACHE | COVID19 VACCINE (COVID19) | 1382927-1 | 2nd dose was on Saturday at 10a. Felt body aches and headache that evening and the next day. Arm was sore at the injection site. Treated with ibuprofen (400 mg). Was able to go to school on Monday. Tuesday morning at 3a woke up not feeling well with chest pain and headache. Treated with ibuprofen. Still felt a little unwell in the morning, but by afternoon was feeling normal. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1392614-1 | reported Fever, body aches. chills, Nausea, Severe headache which made me take her to Emergency Room on 6/11/21. Severe headache possibly from Covid Vaccine. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| HEADACHE | COVID19 VACCINE (COVID19) | 1397920-1 | Vertigo with occasional headache |
| HEADACHE | COVID19 VACCINE (COVID19) | 1407186-1 | Patient developed a fever, chills, headache. Fever and chills lasted for 1.5 days, headache persisted for 3 days. He has never had adverse reactions to any childhood vaccines prior to this. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1432307-1 | patient has headache for 24 hours after the vaccine, patient took Tylenol and Excedrin but did not work and he took tramadol after 24 hours then worked but still comes and goes. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1441095-1 | Mom called PCP office 6/30/21 about 4:00 and reported Cainan had a headache and mild chest pain. She brought him into the ED that evening. Mom called 7/1/2021 in the morning and informed us that he had been admitted to BAH for heart swelling. myocarditis |
| HEADACHE | COVID19 VACCINE (COVID19) | 1474052-1 | Polyneuropathy in bilateral legs, headache, and weakness 24 hours after first dose of Pfizer with worsening over subsequent 48 hours - currently being admitted to hospital for evaluation. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|---|
| HEADACHE | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIK); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1643330-1 | Pounding headache; Underage received vaccine; This spontaneous case was reported by a nurse and describes the occurrence of HEADACHE (Pounding headache) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Underage received vaccine) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 007C21A) for COVID-19 vaccination. No medical history was provided by the reporter. Concomitant products included ETHINYLESTRADIOL, NORGESTIMATE (SPRINTEC) for Birth control. On 25-May-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 25-May-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Underage received vaccine). On 26-May-2021, the patient experienced HEADACHE (Pounding headache). The patient was treated with IBUPROFEN for Headache, at an unspecified dose and frequency. On 25-May-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Underage received vaccine) outcome was unknown. At the time of the report, HEADACHE (Pounding headache) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021; Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1678879-1 | vomiting, malaise, headache |
| HEADACHE | COVID19 VACCINE (COVID19) | 1693635-1 | Acute myocarditis. Patient initially developed headache, chest pain, nausea and vomiting. All other symptoms resolved, but chest pain continued, so he presented to the ED 2 days after receiving the vaccine (Wed, 9/8). He was found to have elevated troponins at that time and was hospitalized for further observation and management. His chest pain resolved by Friday, 9/10. His troponins fluctuated between 4.14-9.94. He was discharged in good condition with downtrending troponins on Saturday, 9/11. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------|---------------------------|---------------------------|---|
| HEADACHE | COVID19 VACCINE (COVID19) | 1694293-1 | Pain at injection site one hour after vaccine, bad headache, pain in arms and legs, 102 degree fever, periodic stomach cramps. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |
| HEADACHE | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1801169-1 | Hot flashes, severe headache, stuffy nose. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1835295-1 | Headache everyday; Nauseated; Sore throat; Tired; Dizzy; This is a spontaneous report from a non-contactable consumer, the patient. A 13-year-old non-pregnant female patient received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: 30130BA) via an unspecified route of administration in the left arm on 09Sep2021 at 12:15 (at the age of 13-years-old) as a single dose for COVID-19 immunisation. Medical history included asthma. The patient had no known allergies. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other medications within two weeks of vaccination. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. On 09Sep2021 at 19:00, the patient experienced headache everyday, nauseated, sore throat, tired and dizzy. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events headache everyday, nauseated, sore throat, tired and dizzy were resolving at the time of this report. No follow-up attempts are possible. No further information is expected. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1861272-1 | Vaccine yesterday. This morning about 9am, developed headache, blurry vision, abdominal pain, fatigue. |
| HEADACHE | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak-numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| HEART RATE | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIK); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| HEART RATE INCREASED | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------|---------------------------|---------------------------|--|
| HEART RATE INCREASED | COVID19 VACCINE (COVID19) | 1412447-1 | Labored breathing; chest pains; fast heart rate; This is a spontaneous report from a contactable consumer reported for himself. A 16-years-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration, administered in Arm Right on 13May2021 11:30 AM as unknown, single (at age of 15-years-old) for covid-19 immunisation. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. No other medications the patient received within 2 weeks of vaccination. Medical history included choanal atresia, tonsils and adenoids removed, ear tags. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant medications were none. On 04Jun2021 09:00, the patient experienced labored breathing, chest pains, fast heart rate. The adverse events resulted in emergency room/department or urgent care, hospitalization for 2 days. The adverse events received treatment included Aspirin, Ibuprofen. The patient underwent lab tests and procedures which included Nasal Swab: negative on 05Jun2021. Outcome of the event was not recovered. Information on the lot/batch number has been requested. |
| HEART RATE INCREASED | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging, constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| HEART RATE INCREASED | COVID19 VACCINE (COVID19) | 1546154-1 | Passed out and went into convulsions, woke up and couldn't breathe well until albuterol was administered |
| HEAVY MENSTRUAL BLEEDING | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| HEAVY MENSTRUAL BLEEDING | COVID19 VACCINE (COVID19) | 1466792-1 | 1. Intense bloody nose that bled for 35 minutes, very heavy flow and had a hard time stopping it. 2. Menstrual cycle started 13 days early with unusually heavy flow and cramping. |
| HEAVY MENSTRUAL BLEEDING | COVID19 VACCINE (COVID19) | 1675278-1 | Heavy and irregular menstrual cycle. Went from very light and every 3 months to heavy and much more frequent, with spotting and cramps on between. |
| HEAVY MENSTRUAL BLEEDING | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| HEAVY MENSTRUAL BLEEDING | COVID19 VACCINE (COVID19) | 1840949-1 | Patient received first dose 08/14/21, had symptoms of light headedness and diaphoresis 2 days later with menorrhagia. She was seen in the ER. She was found to be anemic. Was prescribed iron supplements. She received her second dose 3 weeks later and again had menorrhagia. She was seen in the ER a week later with menorrhagia and severe anemia. She came back the next day and required a blood transfusion and a D and C. She was in the hospital for 3 days. She has a history of heavy menstrual bleeding. |
| HERPES SIMPLEX TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| HERPES SIMPLEX TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| HERPES VIRUS TEST | COVID19 VACCINE (COVID19) | 1347910-1 | Severe vulvar ulcers (Lipschutz) |
| HIV ANTIBODY | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| HIV TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| HOT FLUSH | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------------|---------------------------|---------------------------|--|
| HOT FLUSH | COVID19 VACCINE (COVID19) | 1801169-1 | Hot flashes, severe headache, stuffy nose. |
| HUMAN HERPES VIRUS 6 SEROLOGY | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| HUMAN HERPES VIRUS 6 SEROLOGY | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| HUMAN HERPES VIRUS 6 SEROLOGY | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 0942502-1 | Patient described rapid onset sweating and flushing. Said he felt light headed as well. Gave Benadryl 25 mg with continued observation for 30 minutes and he said he felt mostly better, but still tired and weak. Followed up next day and his mother said he was doing better. |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1354950-1 | PATIENT EXPERIENCED BLURRY VISION, SWEATING, NAUSEA, AND HEADACHE. PATIENT WAS GIVEN WATER AND GUM. PATIENT WAS REQUESTED TO STAY FOR LONGER MONITORING. WAS DISMISSED ONCE THE BLURRY VISION, SWEATING, AND NAUSEA SUBSIDED. |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1470479-1 | Vasovagal reaction to vaccine, dizziness, diaphoresis, pale. Had client lie down and raised legs. Lasted 4-5 minutes. Completely recovered |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|---|
| HYPERHIDROSIS | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient's nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| HYPERVENTILATION | COVID19 VACCINE (COVID19) | 1466671-1 | Patient didn't have any side effects from his first dose. With his second, he felt fine for about 15 hours. Then his lips and eyes started to swell, his throat got itchy, & he started taking deep breaths. These are telltale signs of him starting to have an anaphylactic reaction. I gave him two Benadryl immediately, and monitored him. His breathing improved and I didn't have to inject him with his EpiPen or take him to the hospital. The swelling in his eyes and lips didn't subside, however, so I gave him routine doses of Benadryl for about 12 hours while monitoring him. He was fine again, for another 20 hours or so, and then his symptoms started to come back. Benadryl stopped it completely that time and I didn't have to give him anymore. |
| HYPOACUSIS | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |
| HYPOAESTHESIA | COVID19 VACCINE (COVID19) | 1344878-1 | 14 year old, accompanied by parents, got his first Pfizer vaccine. After 15 minute observation, the parents and child left the site. The parents returned within minutes from leaving and requested the child be checked out by EMS. The child was feeling numbness in the let arm, face, and neck. EMS responded and his vital were normal, but parents insisted EMS transport him to the hospital. |
| HYPOAESTHESIA | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |
| HYPOAESTHESIA | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| HYPOAESTHESIA | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak-numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| HYPOKALAEMIA | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| HYPOPNOEA | COVID19 VACCINE (COVID19) | 1388978-1 | My teenaged son experienced chest pain and shortness of breath following his second Pfizer COVID shot. He felt he could not get a deep breathe for multiple days. |
| HYPOPNOEA | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| HYPOTENSION | COVID19 VACCINE (COVID19) | 1178328-1 | PER PT, FEELING DIZZY AND AS IF SHE WAS FAINTING - PT WAS RESPONSIVE TO QUESTIONS AND HAD NORMAL BREATHING. PT GIVEN 1 DOSE OF ADULT EPI (LOT 0FM501, EXP 05/22). PER EMT (ARRIVED WITHIN 10 MIN OF CALL), PT HAD NORMAL FAINTING SYMPTOMS OF HYPOTENSION AND LOOKING PALE |
| HYPOTENSION | COVID19 VACCINE (COVID19) | 1325402-1 | Patient bopped her head back and then forward (fainted for about one second) after receiving vaccine. Reports of low blood pressure and dizziness |
| HYPOTENSION | COVID19 VACCINE (COVID19) | 1389049-1 | Dizzy, low blood pressure, tingling in hands and feet. Patient was placed in supine position, legs elevated. Oxygen was administered. BP slowly returned to normal, he was slowly transitioned from supine to sitting then standing and was able to walk out of office on his own. Event lasted about 1 hour. |
| HYPOTENSION | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| IMMATURE GRANULOCYTE COUNT INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| IMMEDIATE POST-INJECTION REACTION | COVID19 VACCINE (COVID19) | 1280705-1 | Within about 5 minutes of receiving her first Pfizer Covid19 vaccine, the patient passed out and hit her head on the floor. She regained consciousness quickly (within seconds) after I got to her. She stated she had felt nauseas and tingly before fainting. She has not experienced this before with other vaccines. Ambulance was dispatched due to her hitting her head. Parents and paramedics determined she was ok to go home. |
| IMMEDIATE POST-INJECTION REACTION | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| IMMEDIATE POST-INJECTION REACTION | COVID19 VACCINE (COVID19) | 1347797-1 | Seizure at the time of vaccination. Mother in the car and recorded. Known history of seizures and they will follow up with an epileptologist. They are comfortable going home as this happened after the nasal swab as well and they suspected this would happen today. No further information needed today. |
| IMMEDIATE POST-INJECTION REACTION | COVID19 VACCINE (COVID19) | 1416567-1 | She felt dizziness immediately and passed out as we were leaving the store. |
| IMMEDIATE POST-INJECTION REACTION | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| IMMUNOGLOBULIN THERAPY | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| IMMUNOGLOBULIN THERAPY | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| IMMUNOGLOBULIN THERAPY | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| IMMUNOGLOBULIN THERAPY | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1399491-1 | Patient received vaccination 8 days early. |
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1512947-1 | Pt received 2nd dose <21 day recommendation. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1523884-1 | The patient was brought to a popup clinic for his second Pfizer COVID19 vaccine by his mother 7/14/21, and a dose was administered that day. On July 23rd 2021 it was discovered during data entry that the patient had received his first Pfizer COVID19 vaccine dose 7/6/21, 8 days prior to dose 2. Both doses were recorded on the patient's vaccine card. NP, notified the patient's mother, who reported she brought her son in for dose 2 on 7/14 because she thought it was time. NP advised patient's mother per Dr and CDC guidelines that no further doses are recommended at this time, and to follow up with booster dose if and when it is recommended. in the future.. |
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1601961-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose; Received Moderna vaccine at 16 years of age; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Received Moderna vaccine at 16 years of age) and INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Received Moderna vaccine at 16 years of age). On an unknown date, the patient experienced INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose). On 22-Jan-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Received Moderna vaccine at 16 years of age) had resolved. At the time of the report, INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. No concomitant drug details was provided. No treatment drug was provided. This case was linked to MOD-2021-065366, MOD-2021-210740, MOD-2021-210713 (Patient Link).; Sender's Comments: This report refers to a case of product administered to patient of inappropriate age (16 year old) and Inappropriate schedule of vaccine administration for second dose for mRNA-1273 (lot number unknown) with no associated AEs. |
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1601977-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .; 14 years of age and received the Moderna vaccine; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (14 years of age and received the Moderna vaccine) and INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) in a 14-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (14 years of age and received the Moderna vaccine). On an unknown date, the patient experienced INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .). On 22-Jan-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (14 years of age and received the Moderna vaccine) had resolved. At the time of the report, INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. This report refers to a case of Product administered to patient of inappropriate age and Inappropriate schedule of product administration, for mRNA-1273, lot # unknown, with no associated AEs.; Sender's Comments: This report refers to a case of Product administered to patient of inappropriate age and Inappropriate schedule of product administration, for mRNA-1273, lot # unknown, with no associated AEs. |
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1622239-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .; Recieved Moderna vaccina at 16 years of age; This spontaneous case was reported by a consumer and describes the occurrence of INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved Moderna vaccina at 16 years of age) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved Moderna vaccina at 16 years of age). At the time of the report, INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved Moderna vaccina at 16 years of age) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. No concomitant medication reported No treatment information was provided This case was linked to MOD-2021-065366 (Patient Link). |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021;Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| INCOMPLETE COURSE OF VACCINATION | COVID19 VACCINE (COVID19) | 1358262-1 | "Patient verbalizes being fearful of ""shots""; this nurse attempted to explain getting the vaccine would be quick and fairly painless. After several minutes an attempt to give vaccine was noted. The patient did pull his arm away to stop needle. The needle was partially inserted into the arm causing a small amount of bleeding, no medication was injected. (this section completed)" |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1319477-1 | This writer was drawing up 2 doses of Pfizer for this patient and their sibling. For one of these patients, I had to open a new Pfizer vial, but accidentally drew up the whole vial without reconstituting with 1.8 mL of water. As a result, one of the two siblings received a dose that was supposed to be worth 6 doses of the Pfizer vaccine. I contacted the patients' father 15 minutes later, who stated that the patients were doing okay and reported no symptoms. I also reported this incident to a district manager. Per my manager, I informed the patients' father about what happened, asked him to monitor his children for symptoms, and report to the ED if the experience anything severe. I also told them that this dose would not be valid and they would have to return to the pharmacy to have their 1st dose dose again. He understood and accepted this information. Bottom line, there was no actual symptoms reported, but I am concerned about the higher dose either of these kids (12 year-old female & 15 year-old male) may have received and pray they will be okay. |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1427945-1 | COVID vaccine vial was inadvertently diluted with 0.8ml diluent instead of 1.8ml. Error was discovered when 3rd dose from vial was drawn up and it was found that there were no doses left in vial. |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1460091-1 | Medical assistant diluted vaccine with .18ml diluent rather than 1.8ml. Administered 0.3ml dose to patient, however does was more concentrated than should have been. Peds doctor of the day Dr. consulted. She spoke with infectious disease Dr. who said no additional concern for reaction or side effects, no additional monitoring or follow-up required. Patient should receive second dose as scheduled. Parent informed of extra concentrated dose given. |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1531992-1 | Pt received 0.5ml Pfizer vaccine when the correct dose is 0.3ml. No adverse symptoms reported by patient or family at this time |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1615619-1 | Administration Error (Invalid Dose); This spontaneous case was reported by a pharmacist and describes the occurrence of INCORRECT DOSE ADMINISTERED (Administration Error (Invalid Dose)) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 033C21A) for COVID-19 vaccination. No Medical History information was reported. On 11-May-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 11-May-2021, the patient experienced INCORRECT DOSE ADMINISTERED (Administration Error (Invalid Dose)). At the time of the report, INCORRECT DOSE ADMINISTERED (Administration Error (Invalid Dose)) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medication was reported. Treatment information not provided. |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1628353-1 | No adverse effects reported at this time. Patient received Pfizer COVID-19 vaccine with insufficient diluent, leading to multiple doses administered. Patient informed of error and advised to monitor for side effects per CDC guidance, and contact clinic if questions or concerns. |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1662839-1 | Vaccine was reconstituted incorrectly. 0.8ml instead of 1.8ml of diluent was used. 3 patients received the higher concentrated doses. patients were notified. No adverse reactions have been reported. |
| INCORRECT DOSE ADMINISTERED | COVID19 VACCINE (COVID19) | 1662847-1 | Vaccine was reconstituted incorrectly. 0.8ml instead of 1.8ml of diluent was used. 3 patients received the higher concentrated doses. patients were notified. No adverse reactions have been reported. |
| INJECTION SITE ERYTHEMA | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------|---------------------------|---------------------------|--|
| INJECTION SITE ERYTHEMA | COVID19 VACCINE (COVID19) | 1411305-1 | Injection site pain for a week with swelling and redness. The site (now 8 days later) is sill raised and red but not swollen. |
| INJECTION SITE ERYTHEMA | COVID19 VACCINE (COVID19) | 1499491-1 | redness and swelling at site of injection immediately after injecting, approx. 4 cm area of redness, 1 cm area of swelling centerally |
| INJECTION SITE HAEMORRHAGE | COVID19 VACCINE (COVID19) | 1358262-1 | "Patient verbalizes being fearful of ""shots""; this nurse attempted to explain getting the vaccine would be quick and fairly painless. After several minutes an attempt to give vaccine was noted. The patient did pull his arm away to stop needle. The needle was partially inserted into the arm causing a small amount of bleeding, no medication was injected. (this section completed)" |
| INJECTION SITE HYPOAESTHESIA | COVID19 VACCINE (COVID19) | 1231181-1 | Heart racing Dizziness Weakness Numbness at injection site |
| INJECTION SITE PAIN | COVID19 VACCINE (COVID19) | 1066849-1 | This form is to report that a vaccine shot was mistakenly administered to a person , info above) that was under the age of 18 y/o by me. There were no adverse reactions, allergic reactions, or any symptoms other than mild soreness at the injection site, confirmed with the individual receiving the vaccine. |
| INJECTION SITE PAIN | COVID19 VACCINE (COVID19) | 1073836-1 | This form is to report the second dose of the vaccine shot was mistakenly administered to a person (info above) that was under the age of 18 y/o by me on 02/02/2021. There were no adverse reactions, allergic reactions, or any symptoms other than mild soreness at the injection site, confirmed with the individual receiving the vaccine. I was advised to administer the 2nd dose to the same person by Vaccine POD supervisors. This action of administering 2nd dose to person under age 18 y/o was approved. Pt had no symptoms during 15 minute observation. |
| INJECTION SITE PAIN | COVID19 VACCINE (COVID19) | 1374083-1 | Site: Pain at Injection Site-Medium, Site: Redness at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Flushed / Sweating-Medium, Systemic: Numbness (specify: facial area, extremities)-Medium, Systemic: Weakness-Medium |
| INJECTION SITE PAIN | COVID19 VACCINE (COVID19) | 1382927-1 | 2nd dose was on Saturday at 10a. Felt body aches and headache that evening and the next day. Arm was sore at the injection site. Treated with ibuprofen (400 mg). Was able to go to school on Monday. Tuesday morning at 3a woke up not feeling well with chest pain and headache. Treated with ibuprofen. Still felt a little unwell in the morning, but by afternoon was feeling normal. |
| INJECTION SITE PAIN | COVID19 VACCINE (COVID19) | 1411305-1 | Injection site pain for a week with swelling and redness. The site (now 8 days later) is sill raised and red but not swollen. |
| INJECTION SITE PAIN | COVID19 VACCINE (COVID19) | 1694293-1 | Pain at injection site one hour after vaccine, bad headache, pain in arms and legs, 102 degree fever, periodic stomach cramps. |
| INJECTION SITE RASH | COVID19 VACCINE (COVID19) | 1390380-1 | "Large round rash around injection site. Left arm. Looks like ""Covid arm"" as seen online search." |
| INJECTION SITE REACTION | COVID19 VACCINE (COVID19) | 1704744-1 | Mom called 9/1/2021 stating that patient was experiencing hives and itching on his chest and back post COVID 1st dose. She said that at the time he had a bright red welt at vaccine site. |
| INJECTION SITE SWELLING | COVID19 VACCINE (COVID19) | 1411305-1 | Injection site pain for a week with swelling and redness. The site (now 8 days later) is sill raised and red but not swollen. |
| INJECTION SITE SWELLING | COVID19 VACCINE (COVID19) | 1499491-1 | redness and swelling at site of injection immediately after injecting, approx. 4 cm area of redness, 1 cm area of swelling centerally |
| INSOMNIA | COVID19 VACCINE (COVID19) | 1374485-1 | Body aches, nausea, lethargy, decreased appetite, possible fever, sleeping difficulties approx. 24 hours |
| INSOMNIA | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| INTENSIVE CARE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| INTENSIVE CARE | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| INTENSIVE CARE | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| INTENSIVE CARE | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| INTENSIVE CARE | COVID19 VACCINE (COVID19) | 1520184-1 | Pt presented with nausea and altered mental status, imaging confirmed a R pons ischemic stroke, later found to be due to basilar artery thrombosis |
| INTENSIVE CARE | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| INTERCHANGE OF VACCINE PRODUCTS | COVID19 VACCINE (COVID19) | 1230575-1 | 17 yo female returned for dose 2 of Pfizer but mistakenly received Moderna |
| INTERCHANGE OF VACCINE PRODUCTS | COVID19 VACCINE (COVID19) | 1307455-1 | This 17 year old who returned for Pfizer booster was given a Moderna COVID vaccine in error by a medical assistant student who was volunteering at vaccine clinic. No adverse reaction occurred during monitoring period. Error was not discovered until data entry staff where documenting vaccine and brought to my attention. |
| INTERCHANGE OF VACCINE PRODUCTS | COVID19 VACCINE (COVID19) | 1389162-1 | Moderna administered instead of Pfizer (Moderna not authorized for age group) |
| INTERCHANGE OF VACCINE PRODUCTS | COVID19 VACCINE (COVID19) | 1428799-1 | Patient was initially documented to have received the Moderna vaccine. However, when the vaccinator was questioned they clearly recalled giving the Pfizer vaccine. They stated that documentation for another family member who was in the same car was accidentally mixed up (other family member received Moderna). It is believed that this was an error of documentation only and that patient care was not affected. The error has since been corrected. |
| INTERCHANGE OF VACCINE PRODUCTS | COVID19 VACCINE (COVID19) | 1491244-1 | "Per Alert, this patient's first dose/vaccine was Pfizer on 3/27 and the 2nd dose/vaccine was Moderna on 4/18, Alert says ""NOT VALID"" for the Moderna vaccine." |
| INTERCHANGE OF VACCINE PRODUCTS | COVID19 VACCINE (COVID19) | 1679540-1 | Pt has received the first dose of Pfizer and was here for the second and the MA administered Moderna. |
| INTERMENSTRUAL BLEEDING | COVID19 VACCINE (COVID19) | 1675278-1 | Heavy and irregular menstrual cycle. Went from very light and every 3 months to heavy and much more frequent, with spotting and cramps on between. |
| INTERNATIONAL NORMALISED RATIO DECREASED | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| INTERNATIONAL NORMALISED RATIO INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| INTERNATIONAL NORMALISED RATIO NORMAL | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |
| INTERTRIGO | COVID19 VACCINE (COVID19) | 1386601-1 | He started taking Giferan gel - for acne - it dried out his skin - he started using this a week before the vaccine; on the 31st - rash around his mouth - it was getting red and crusty and looking abnormal - called the Intertrigo- bacterial infection. Put him on antibiotic cream - Mupirocin 2 % ointment. Five day treatment It's resolved now. Dermatologist: dermatology is where we went and he saw a PA. |
| ISCHAEMIC STROKE | COVID19 VACCINE (COVID19) | 1520184-1 | Pt presented with nausea and altered mental status, imaging confirmed a R pons ischemic stroke, later found to be due to basilar artery thrombosis |
| JOINT SWELLING | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| LABORATORY TEST | COVID19 VACCINE (COVID19) | 1376659-1 | syncope within minutes of vaccination with resultant left front incisor tooth fracture |
| LABORATORY TEST | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| LABORATORY TEST NORMAL | COVID19 VACCINE (COVID19) | 1412936-1 | Pericarditis |
| LETHARGY | COVID19 VACCINE (COVID19) | 1374485-1 | Body aches, nausea, lethargy, decreased appetite, possible fever, sleeping difficulties approx. 24 hours |

| Symptoms | COVID19 Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|---|
| LETHARGY | COVID19 VACCINE (COVID19) | 1399081-1 | Fever, lethargy, shortness of breath, chest pain, neck pain, swollen lymph nodes |
| LETHARGY | COVID19 VACCINE (COVID19) | 1518463-1 | Shortly after receiving the shot, the patient was was waiting the 15 minutes monitoring period in the store. She was standing/walking and told her parents that she was feeling dizzy and needed to urgently sit down to prevent herself from falling. I was notified that a patient was having an event. I encountered Pt who was sitting on the floor. She was conscience but seemed lethargic. I attempted a BP measurement with a machine x 2 with no result then obtained a manual pressure of 115/65. I obtained a radial pulse rate of 65. Forehead Temp was 97.4. We placed patient in a chair and encouraged water and bit of orange juice. I took a follow up vital set BP 115/61, HR 65, T 97.2. Patient recovered spontaneously and was observed for approximately 15 minutes and then left store with parents. I followed up with a phone call at 0915 on 7/31/21 and the parents reported a full recovery. |
| LEUKOCYTOSIS | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| LIMB DISCOMFORT | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did lighten up. |
| LIP ERYTHEMA | COVID19 VACCINE (COVID19) | 1346824-1 | Patient received above noted COVID19 Vaccine on Friday morning and reported symptoms starting Saturday morning. Symptoms include lip swelling, lip rash, and erythema only affected the lip area of the face. Symptoms have persisted for 3 days and that is when the pharmacy was contacted. Mother has given Benadryl to patient to help with itching/swelling. Pharmacist recommended close monitoring for worsening symptoms and to follow-up with primary care provider for further guidance. |
| LIP SWELLING | COVID19 VACCINE (COVID19) | 1346824-1 | Patient received above noted COVID19 Vaccine on Friday morning and reported symptoms starting Saturday morning. Symptoms include lip swelling, lip rash, and erythema only affected the lip area of the face. Symptoms have persisted for 3 days and that is when the pharmacy was contacted. Mother has given Benadryl to patient to help with itching/swelling. Pharmacist recommended close monitoring for worsening symptoms and to follow-up with primary care provider for further guidance. |
| LIP SWELLING | COVID19 VACCINE (COVID19) | 1466671-1 | Patient didn't have any side effects from his first dose. With his second, he felt fine for about 15 hours. Then his lips and eyes started to swell, his throat got itchy, & he started taking deep breaths. These are telltale signs of him starting to have an anaphylactic reaction. I gave him two Benadryl immediately, and monitored him. His breathing improved and I didn't have to inject him with his EpiPen or take him to the hospital. The swelling in his eyes and lips didn't subside, however, so I gave him routine doses of Benadryl for about 12 hours while monitoring him. He was fine again, for another 20 hours or so, and then his symptoms started to come back. Benadryl stopped it completely that time and I didn't have to give him anymore. |
| LIP SWELLING | COVID19 VACCINE (COVID19) | 1536269-1 | Developed reactions to cold in the form of hives, large welts, and swelling of the lips. First reaction was a softball size welt on June 25th after icing sore elbow. Now any contact with chilled or iced items produces welts, swelling, and itching. Contact with cold river water while rafting August 8 produced hives over entire body. Contact with ice cream on 8/7 produced swollen lips. Very concerned as my daughter is a competitive swimmer. While the first notable welt on elbow, was approximately 9 days after 2nd vaccine, she said she noticed an itchy sensation when exposed to cold at some point prior to this but never before 2nd vaccine. |
| LIP SWELLING | COVID19 VACCINE (COVID19) | 1791131-1 | Lip, chin, face swelling; Lip, chin, face swelling; Rash and hives all over entire body; Rash and hives all over entire body; This is a spontaneous report from a contactable consumer (patient). A 12-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number and expiration date were not reported) on the left arm on 03Sep2021 (15:00) as dose 1, single, with route of administration unspecified, for COVID-19 immunization at the physician's office. Medical history included sulfa meds allergy. The patient was not pregnant at the time of vaccination. There were no concomitant medications. The patient previously took amoxicillin, and had drug allergy. The patient did not receive other vaccines in four weeks. On 06Sep2021 (20:00), the patient had lip, chin, and face swelling, rash, and hives all over entire body. The events were reported to be serious (medically significant); and had resulted into a doctor or other healthcare professional office/clinic visit and emergency room/department or urgent care. The patient had received steroids, allergy medications and asthma medications as treatment for the events. The outcome of the events was not recovered. The patient did not have COVID-19 prior to vaccination, and has not been tested post-vaccination. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up. |
| LIPASE INCREASED | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------|---------------------------|---------------------------|--|
| LOCAL REACTION | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1182296-1 | "Patient felt lightheaded almost immediately after receiving vaccine. She was walking with her parents to the lobby and they reported pt ""jerking"" then becoming unconscious. She woke up right away. She was nauseous and pale for another 20 minutes or so. We called 911 and paramedics determined it to be a vasovagal response." |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1297599-1 | 16yoF was accompanied with an adult who was present for the vaccination. The COVID-19 Vaccine Pfizer-BioNTech 0.3mL administered IM in right deltoid while patient was sitting. Patient remained sitting for 10 minutes after administered dose. Patient reported feeling well after the injection. Patient stood up while we continued to talk, after 2 more minutes passed out while standing. Suddenly, patient began to go limp and her eyes crossed and rolled back. Patient fell backwards into the privacy curtain and into aisle 13 of the store. Patient's head bounced off the floor. Immunizer knelt next to patient. Patient was unresponsive until immunizer placed cold hand on back of neck and front of chest to check if she was breathing, immunizer calmly guided patient to breath, slow deep breaths into the belly and patient's eyes fluttered open. She said her head hurt really bad. Immunizer offered to the accompanying adult to call EMS because patient should be evaluated after hitting her head so hard. The accompanying adult denied EMS, then stating that patient had previously fainted while walking and said that she would be fine. Immunizer advised patient to remain laying down while immunizer got some ice. Ice was then placed on the back of the head. Patient slowly stood up after laying for 10 minutes and was walked over to a sitting area to put feet up and continue with ice for another 5 minutes before the accompanying adult wanted to leave. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1320442-1 | Systemic: Fainting / Unresponsive-Severe, Systemic: Nausea-Mild, Additional Details: Patient received injection and got up from chair. After standing for a few minutes he fainted and lost consciousness. His mom and I got him to the floor and he regained consciousness within a minute. He said he felt thirsty and nauseated. His mom gave him water. He laid on the floor for 20 minutes and then sat up for a few minutes. Then he walked out of the dressing room and left the store. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1388484-1 | Patient passed out while waiting (in lobby/waiting area) after the 2nd dose of vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
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| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1389274-1 | My daughter was receiving her second vaccine about 1230pm and while administered she immediately told me she felt ?dizzy and nauseous.? We sit down, she is not feeling better and within 3 minutes or so she said she felt? dizzy and feel like I?m going to throw up.? She then starts nodding off and on, not able to keep her eyes open. I waved over for help and by the time volunteers got to her she went limo and passes out. She was taken by wheelchair to medic room and they had her lay down. She came alert and said ? everything went black? and had no memory/recollection or awareness of where she was and how she got to the medic room. We gave her water and I asked for crackers and she felt better and was able to leave around 115pm. In addition, we saw a teenage male pass out prior to my daughter and was also taken by wheelchair. I spoke with a RN as I was leaving and was told multiple teens had had the same initial reaction today. She had no reactions or side effects with her first dose. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1403508-1 | pt fainted shortly after vaccination (within 5 minutes). Pt regained consciousness within few seconds. Pt lied down with feet higher on a chair. Pt was monitored for 30 minutes and recovered fully. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1416567-1 | She felt dizziness immediately and passed out as we were leaving the store. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1546154-1 | Passed out and went into convulsions, woke up and couldn?t breathe well until albuterol was administered |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |
| LOSS OF CONSCIOUSNESS | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient?s nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| LOSS OF PERSONAL INDEPENDENCE IN DAILY ACTIVITIES | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| LOWER URINARY TRACT SYMPTOMS | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| LUMBAR PUNCTURE | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak- numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| LUMBAR PUNCTURE NORMAL | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---------------------------------|---------------------------|---------------------------|--|
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lisons. She visited her pediatrician Tuesday, June 8th, 2021, and the lisons were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lisons are still present and painful, and continue to be treated. |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1399081-1 | Fever, lethargy, shortness of breath, chest pain, neck pain, swollen lymph nodes |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1461730-1 | Swollen lymph node- arm pit, lasted approximately 24 hours |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1651047-1 | Right shoulder after the 2nd shot started to swell up.; Arm pit is much more full and feels very sore.; Lymph nodes are swollen.; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old male patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EW0173) via an unspecified route of administration in the right arm on 08Apr2021 at 14:00 (at the age of 16-years-old) as a single dose for COVID-19 immunisation. The patients' medical history included a known allergy to fentanyl (MANUFACTURER UNKNOWN). Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any medication within two weeks of the COVID-19 vaccination. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EW0173) via an unspecified route of administration in the right arm an unknown date as a single dose for COVID-19 immunisation. On 30Apr2021 at 12:00, the patient reported that his right shoulder started to swell up after the second dose, the arm pit was much fuller and felt very sore. The patients' father who was a medical professional said that the lymph nodes were swollen. The events did not result in a visit to the doctors or other healthcare professional office/clinic visit, and emergency room/department or urgent care. It was unknown whether any therapeutic measures were taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events right shoulder started to swell up, arm pit was much fuller and felt very sore and lymph nodes were swollen were not resolved at the time of this report. No follow-up attempts are needed. No further information is expected. |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| LYMPHADENOPATHY | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| LYMPHOCYTE COUNT | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| LYMPHOCYTE PERCENTAGE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| LYMPHOPENIA | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| MAGNETIC RESONANCE IMAGING | COVID19 VACCINE (COVID19) | 1430330-1 | admitted 6/23 in status epilepticus. Found to have a basilar artery thrombus |
| MAGNETIC RESONANCE IMAGING | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak- numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| MAGNETIC RESONANCE IMAGING HEAD | COVID19 VACCINE (COVID19) | 1474052-1 | Polyneuropathy in bilateral legs, headache, and weakness 24 hours after first dose of Pfizer with worsening over subsequent 48 hours - currently being admitted to hospital for evaluation. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
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| MAGNETIC RESONANCE IMAGING HEAD ABNORMAL | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |
| MAGNETIC RESONANCE IMAGING HEAD NORMAL | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| MAGNETIC RESONANCE IMAGING HEART | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| MAGNETIC RESONANCE IMAGING SPINAL | COVID19 VACCINE (COVID19) | 1474052-1 | Polyneuropathy in bilateral legs, headache, and weakness 24 hours after first dose of Pfizer with worsening over subsequent 48 hours - currently being admitted to hospital for evaluation. |
| MALAISE | COVID19 VACCINE (COVID19) | 1358000-1 | Patient experienced fatigue, malaise and rash within 24 hours of second COVID vaccine. Then reported feeling short of breath with exertion while at wrestling practice on 5th day following COVID vaccine. |
| MALAISE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| MALAISE | COVID19 VACCINE (COVID19) | 1382927-1 | 2nd dose was on Saturday at 10a. Felt body aches and headache that evening and the next day. Arm was sore at the injection site. Treated with ibuprofen (400 mg). Was able to go to school on Monday. Tuesday morning at 3a woke up not feeling well with chest pain and headache. Treated with ibuprofen. Still felt a little unwell in the morning, but by afternoon was feeling normal. |
| MALAISE | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| MALAISE | COVID19 VACCINE (COVID19) | 1678879-1 | vomiting, malaise, headache |
| MALAISE | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient's nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| MEAN CELL HAEMOGLOBIN INCREASED | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------------|---------------------------|---------------------------|---|
| MEAN CELL VOLUME INCREASED | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| MEAN PLATELET VOLUME NORMAL | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| MECHANICAL URTICARIA | COVID19 VACCINE (COVID19) | 1788209-1 | Experienced urticaria and symptoms similar to dermatographism. Plan: order COVID test due to fever. Benadryl at night, Zyrtec during the day. Cortisone cream on rash. Providing Prednisone 10mg for severe urticaria. Advised to seek further medical care if feeling any swelling/tingling around mouth. |
| MEDICATION ERROR | COVID19 VACCINE (COVID19) | 1268644-1 | Not an adverse event; this report is a medication error. Patient inadvertently received Moderna off-label prior to his 18th birthday. |
| MENSTRUATION IRREGULAR | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| MENSTRUATION IRREGULAR | COVID19 VACCINE (COVID19) | 1466792-1 | 1. Intense bloody nose that bled for 35 minutes, very heavy flow and had a hard time stopping it. 2. Menstrual cycle started 13 days early with unusually heavy flow and cramping. |
| MENSTRUATION IRREGULAR | COVID19 VACCINE (COVID19) | 1675278-1 | Heavy and irregular menstrual cycle. Went from very light and every 3 months to heavy and much more frequent, with spotting and cramps on between. |
| MENTAL STATUS CHANGES | COVID19 VACCINE (COVID19) | 1520184-1 | Pt presented with nausea and altered mental status, imaging confirmed a R pons ischemic stroke, later found to be due to basilar artery thrombosis |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------|---------------------------|---------------------------|---|
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| METABOLIC FUNCTION TEST | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| MICTURITION URGENCY | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| MIGRAINE | COVID19 VACCINE (COVID19) | 1395996-1 | Medication resistant migraine that lasted 4 days |
| MOBILITY DECREASED | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did lighten up. |
| MUSCLE SPASMS | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| MUSCLE SPASMS | COVID19 VACCINE (COVID19) | 1675278-1 | Heavy and irregular menstrual cycle. Went from very light and every 3 months to heavy and much more frequent, with spotting and cramps on between. |
| MUSCLE TWITCHING | COVID19 VACCINE (COVID19) | 1322138-1 | Patient had what appeared to be absence seizures (facial twitching, unresponsive but moving eyes, fist clenching) for 30 seconds. This occurred 10 minutes post injection. Patient did not fall out of chair as her grandmother was right next to her. 911 was called, patient recovered immediately after and had no other incidence. patient taken to hospital. |
| MUSCLE TWITCHING | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| MUSCLE TWITCHING | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| MUSCULAR WEAKNESS | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---|---------------------------|---------------------------|--|
| MUSCULAR WEAKNESS | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| MUSCULAR WEAKNESS | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |
| MUSCULAR WEAKNESS | COVID19 VACCINE (COVID19) | 1722615-1 | Paresthesias, muscle weakness: Guillian Barre syndrome. Onset 12 days following first COVID vaccination. No other acute illness typically associated with GB. |
| MUSCULOSKELETAL STIFFNESS | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| MYALGIA | COVID19 VACCINE (COVID19) | 1322474-1 | Immediately after the shot she had a bad headache and approximately 30 to 35 minutes later dizziness, chills, and throat restriction (anaphylaxis), extreme muscle soreness(any sort of touch was extremely painful, and she couldn't move her neck, it hurt to move from side to side. Her legs began to feel extremely heavy and hard to move. These symptoms seemed to last for approx 30 minutes. Headache didn't subside until later in the day, it did lighten up. |
| MYALGIA | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| MYALGIA | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| MYCOBACTERIUM TUBERCULOSIS COMPLEX TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| MYCOBACTERIUM TUBERCULOSIS COMPLEX TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| MYOCARDIAL NECROSIS MARKER | COVID19 VACCINE (COVID19) | 1362007-1 | pericarditis |
| MYOCARDIAL NECROSIS MARKER NORMAL | COVID19 VACCINE (COVID19) | 1417707-1 | Chest pain 3 days after vaccine, evaluated 4 days after vaccine and found to have evidence of pericarditis without myocarditis. As no myocarditis and symptoms mild, was discharged with plan for cardiology follow up in 1 month. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1361977-1 | myocarditis - chest pain with elevated troponin requiring hospital admission. symptoms started 3 days after vaccination which was his second dose of the Pfizer vaccine. First dose was on 5/1/21. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1378760-1 | Myocarditis |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1394691-1 | Patient presented the emergency department with chest pain radiating to left arm on 6/12. Studies indicate myocarditis. Patient will be transferred to specialty hospital for cardiology. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---|---------------------------|---------------------------|---|
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1416452-1 | Myocarditis diagnosis |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1424392-1 | Myocarditis |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1441095-1 | Mom called PCP office 6/30/21 about 4:00 and reported Cainan had a headache and mild chest pain. She brought him into the ED that evening. Mom called 7/1/2021 in the morning and informed us that he had been admitted to BAH for heart swelling. myocarditis |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1463557-1 | Palpitations and chest pain Seen in ER on 7/8/21 and admitted overnight with rising troponin levels, improved by next day. Diagnosis of myocarditis related to COVID19 vaccine |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1533287-1 | Myocarditis - chest pain with significantly elevated troponin. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1632935-1 | Patient developed myocarditis with acute chest pain and peak troponin of 11. He required 2 nights of hospitalization. He symptomatically improved within 48 hours with troponin trending down to 6. He had normal echo. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1655967-1 | Patient developed chest pain approximately 3 days after second Pfizer COVID vaccine. Patient went to the ER and was admitted with acute myocarditis and elevated troponins. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1693635-1 | Acute myocarditis. Patient initially developed headache, chest pain, nausea and vomiting. All other symptoms resolved, but chest pain continued, so he presented to the ED 2 days after receiving the vaccine (Wed, 9/8). He was found to have elevated troponins at that time and was hospitalized for further observation and management. His chest pain resolved by Friday, 9/10. His troponins fluctuated between 4.14-9.94. He was discharged in good condition with downtrending troponins on Saturday, 9/11. |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1772257-1 | Acute myocarditis ~48 hours after vaccination with shortness of breath and chest pain, TPN elevation |
| MYOCARDITIS | COVID19 VACCINE (COVID19) | 1826456-1 | chest pain, shortness of breath, likely myocarditis |
| N-TERMINAL PROHORMONE BRAIN NATRIURETIC PEPTIDE | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| N-TERMINAL PROHORMONE BRAIN NATRIURETIC PEPTIDE INCREASED | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| NASAL CONGESTION | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| NASAL CONGESTION | COVID19 VACCINE (COVID19) | 1327017-1 | Sore throat and nasal congestion |
| NASAL CONGESTION | COVID19 VACCINE (COVID19) | 1369033-1 | tired, body aches, restricted breathing, upset stomach, vomiting, congestion |
| NASAL CONGESTION | COVID19 VACCINE (COVID19) | 1801169-1 | Hot flashes, severe headache, stuffy nose. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|--|
| NAUSEA | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| NAUSEA | COVID19 VACCINE (COVID19) | 1182296-1 | "Patient felt lightheaded almost immediately after receiving vaccine. She was walking with her parents to the lobby and they reported pt ""jerking"" then becoming unconscious. She woke up right away. She was nauseous and pale for another 20 minutes or so. We called 911 and paramedics determined it to be a vasovagal response." |
| NAUSEA | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1280705-1 | Within about 5 minutes of receiving her first Pfizer Covid19 vaccine, the patient passed out and hit her head on the floor. She regained consciousness quickly (within seconds) after I got to her. She stated she had felt nauseas and tingly before fainting. She has not experienced this before with other vaccines. Ambulance was dispatched due to her hitting her head. Parents and paramedics determined she was ok to go home. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1320442-1 | Systemic: Fainting / Unresponsive-Severe, Systemic: Nausea-Mild, Additional Details: Patient received injection and got up from chair. After standing for a few minutes he fainted and lost consciousness. His mom and I got him to the floor and he regained consciousness within a minute. He said he felt thirsty and nauseated. His mom gave him water. He laid on the floor for 20 minutes and then sat up for a few minutes. Then he walked out of the dressing room and left the store. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1342017-1 | Received her first dose of the Pfizer COVID-19 vaccine on Sunday May 16,2021 at around 2:50 pm. At around 7:20 pm on May 16,2021 she stood up to walk to the bathroom. She began feeling nauseous when she stood up. While she was washing her hands, after going to the bathroom, she began to have difficulty with her vision. She describes white and blue dots obstructing her vision in both eyes. She also began to experience loud tinnitus. She described hearing multiple frequencies. The problem with her vision and the tinnitus continued as she walked through our house to a couch where she laid down. The vision problem and tinnitus continued while she laid on the couch. Her breathing was rapid but she thinks this may have been due to the stress caused by her other symptoms. This episode lasted for several minutes and then the vision problem resolved. The tinnitus continued for several minutes after the vision problem resolved. The intensity of the tinnitus slowly decreased until it finally stopped. The following evening, she experienced tinnitus for a few minutes but it was less intense than it was the previous evening. She very rarely has experienced tinnitus in the past. She has very infrequently experienced brief episodes of orthostatic hypotension when she was dehydrated. When this event occurred, she felt like she was well hydrated. This event lasted much longer and she has never experienced this problem with her vision in the past. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1354950-1 | PATIENT EXPERIENCED BLURRY VISION, SWEATING, NAUSEA, AND HEADACHE. PATIENT WAS GIVEN WATER AND GUM. PATIENT WAS REQUESTED TO STAY FOR LONGER MONITORING. WAS DISMISSED ONCE THE BLURRY VISION, SWEATING, AND NAUSEA SUBSIDED. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| NAUSEA | COVID19 VACCINE (COVID19) | 1374485-1 | Body aches, nausea, lethargy, decreased appetite, possible fever, sleeping difficulties approx. 24 hours |
| NAUSEA | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |
| NAUSEA | COVID19 VACCINE (COVID19) | 1389274-1 | My daughter was receiving her second vaccine about 1230pm and while administered she immediately told me she felt ?dizzy and nauseous.? We sit down, she is not feeling better and within 3 minutes or so she said she felt? dizzy and feel like I?m going to throw up.? She then starts nodding off and on, not able to keep her eyes open. I waved over for help and by the time volunteers got to her she went limo and passes out. She was taken by wheelchair to medic room and they had her lay down. She came alert and said ? everything went black? and had no memory/recollection or awareness of where she was and how she got to the medic room. We gave her water and I asked for crackers and she felt better and was able to leave around 115pm. In addition, we saw a teenage male pass out prior to my daughter and was also taken by wheelchair. I spoke with a RN as I was leaving and was told multiple teens had had the same initial reaction today. She had no reactions or side effects with her first dose. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------|---------------------------|---------------------------|--|
| NAUSEA | COVID19 VACCINE (COVID19) | 1392614-1 | reported Fever, body aches. chills, Nausea, Severe headache which made me take her to Emergency Room on 6/11/21. Severe headache possibly from Covid Vaccine. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| NAUSEA | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1501053-1 | Warm flushing on right side of face near the ear, then eventually on the left side of face. Nausea. Throat felt it was swollen. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1520184-1 | Pt presented with nausea and altered mental status, imaging confirmed a R pons ischemic stroke, later found to be due to basilar artery thrombosis |
| NAUSEA | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1592988-1 | Pt presented with guardian at point of sale to report fainting spell in the bathroom with guardian. Reported feeling clammy and nauseous after shot but attributed to anxiousness. Guardian said the the patient started tunnel vision while walking to the bathroom then collapsed onto guardian. She did not loose consciousness. Had the patient sit back down in the waiting room. Her pulse was 80bpm regular rate and rhythm. Pale paler with clammy feel. Pt was alert and followed directions but did not speak for herself. Blood Pressure was taken 110/81 79BPM. Vaccine was given about 12:30 with reporting to point of sale at 12:56pm Monitored patient for 5 more minutes. She was feeling better and able to stand with out any faintness. Sent on her way to call if any reoccurrence. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1693635-1 | Acute myocarditis. Patient initially developed headache, chest pain, nausea and vomiting. All other symptoms resolved, but chest pain continued, so he presented to the ED 2 days after receiving the vaccine (Wed, 9/8). He was found to have elevated troponins at that time and was hospitalized for further observation and management. His chest pain resolved by Friday, 9/10. His troponins fluctuated between 4.14-9.94. He was discharged in good condition with downtrending troponins on Saturday, 9/11. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1724302-1 | Within five minutes from receiving vaccine, patient reported feeling lightheaded, nauseous, and was pale. He was offered water and blood pressure was taken around 7:10pm, showing 61/43 mmHg. Upon patient's mother's consent, emergency services was called where he had his vitals re-checked. After ten minutes, his vitals are normal and blood pressure was back up to normal range. Patient was able to stand without dizziness. His mother was given the option to go to the hospital for further monitoring or leave on their own, in which she decided they were to leave on their own and monitor at home. |
| NAUSEA | COVID19 VACCINE (COVID19) | 1835295-1 | Headache everyday; Nauseated; Sore throat; Tired; Dizzy; This is a spontaneous report from a non-contactable consumer, the patient. A 13-year-old non-pregnant female patient received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: 30130BA) via an unspecified route of administration in the left arm on 09Sep2021 at 12:15 (at the age of 13-years-old) as a single dose for COVID-19 immunisation. Medical history included asthma. The patient had no known allergies. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other medications within two weeks of vaccination. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. On 09Sep2021 at 19:00, the patient experienced headache everyday, nauseated, sore throat, tired and dizzy. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events headache everyday, nauseated, sore throat, tired and dizzy were resolving at the time of this report. No follow-up attempts are possible. No further information is expected. |
| NECK MASS | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------------------|---------------------------|---------------------------|--|
| NECK PAIN | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| NECK PAIN | COVID19 VACCINE (COVID19) | 1399081-1 | Fever, lethargy, shortness of breath, chest pain, neck pain, swollen lymph nodes |
| NECK PAIN | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| NECK PAIN | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| NECK PAIN | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |
| NEEDLE ISSUE | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| NERVE CONDUCTION STUDIES | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak-numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| NEUROLOGICAL EXAMINATION | COVID19 VACCINE (COVID19) | 1861272-1 | Vaccine yesterday. This morning about 9am, developed headache, blurry vision, abdominal pain, fatigue. |
| NEUROLOGICAL EXAMINATION ABNORMAL | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |
| NEUTROPHIL COUNT | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued interimittently, and are associated w/fatigue. |
| NEUTROPHIL COUNT DECREASED | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| NEUTROPHIL COUNT INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| NEUTROPHIL PERCENTAGE DECREASED | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| NITRITE URINE ABSENT | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 0959694-1 | Patient is 16 years old. Patient did not have side effects after vaccine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 0965790-1 | minor age 15 received COVID vaccine. no adverse reaction |
| NO ADVERSE EVENT | COVID19 VACCINE | 0975739-1 | Minor age 17 received Moderna vaccine. no adverse effects reported. |

| Symptoms | COVID19 Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|--|
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 0975794-1 | Minor age 13 received Moderna vaccine. No ill effects reported |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1030730-1 | The patient was administered the Moderna vaccine before the age of 18, which is off-label use according to the. She was told to vaccinate by her PCP due to multiple chronic conditions and had a doctor's note, but it should not have been administered at age 17. The patient and her parent reported no adverse reactions to the actual vaccination. The VAERS report is being filed because it was an administration error for dose #1. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1030803-1 | Patient received the vaccine as a result of a medication error; he was only 17 at the time of administration, and should have been 18 to receive Moderna. Spoke with the patient on 2/8/21 and he reported no adverse reactions (local or systemic) to vaccination. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1030817-1 | Patient was administered the first Pfizer vaccine as a medication error; he was not yet 16, the approved age. The patient is doing well and reported no local or systemic side effects after the first dose. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1031690-1 | Patient was inadvertently administered the Moderna vaccine before the age of 18. Patient and parent did not report any adverse effects following vaccination. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1034376-1 | Patient's age inappropriate for vaccine. Minimum age is 18. No reaction found. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1049871-1 | Reporting a vaccine administration error: unauthorized age group. Vaccinated while not yet 18 years of age. No adverse event. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1073222-1 | Too young to receive vaccine Received 2nd dose on 2/13/21 Lot EL3246 of Pfizer vaccine also in R deltoid, IM |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1073247-1 | no known adverse event. Too young to receive the vaccine. received on on 1/23/2021 and 2nd on 2/11/2021 |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1097034-1 | Vaccine was administered to patient under the age indicated of 18 years and up. Patient was 17 years old and reports no symptoms at this time or any adverse side effects. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1103176-1 | This patient is under the age limit for Moderna vaccine and received his first dose 3/9/2021 at a mass vaccination event held by the clinic. No physical adverse reaction occurred with patient but a med error occurred due to the patient's age. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1123250-1 | This is a 17 year old male that received the Janssen vaccine, which is approved for 18 years and older. VAERS being completed to document an administration error (wrong age). In this case, a Home Health nurse was administering the Janssen vaccine to a homebound patient per our program to vaccinate those high-risk seniors that are homebound, as well as their in-home caregivers. During a visit to vaccinate the homebound senior, this 17 year old was also vaccinated without detected the wrong-age error. Following administration, the vaccine information was being input into ALERT and the age error was detected and reported. No adverse effects noted for the patient. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1152792-1 | No adverse events reported. Vaccine accidentally administered to 16 year old patient. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1156417-1 | Received the moderna vaccine at a young age, no side effects or adverse reaction noted |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1170207-1 | Gave Moderna to a 17 year old patient-did not realize they were under 18 until after vaccinating-patient is doing fine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1172538-1 | Patient was inadvertently vaccinated at age 17. No adverse effects during monitoring. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1174123-1 | Patient was underage. No reaction has occurred. Patient is 17, moderna is only approved for pts >18 years old. Patient confirmed that he wanted to receive moderna. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1174163-1 | Patient received a dose of Moderna COVID-19 at age 17. At the time of this report, he had not reported any adverse effects. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1183338-1 | Patient said he was of age to receive the vaccine but after clinic was over, it was verified that he was actually 17 and under the approved age to receive the Janssen covid vaccine. no side effects were reported from the vaccine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1208018-1 | We sent out an email to store associates over 18 years of old to have prefilled out VAR for an offsite clinic. Pt showed up to get vaccine, consent form signed, was screened down the list and the vaccine was administered. Staff returned to bill the vaccine on 4/9/21 and our system on halted it due to pt age. I was made aware of the error on 4/12/21 when I returned from the weekend. We then looked deeper into the VAR to find it had been signed by the father for consent to give the vaccine to his daughter. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1209659-1 | Patient is not with in recommended age group, Patient has not reported any adverse events at this moment. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1220195-1 | NO ADVERSE SYMPTOMS. MODERNA IS ONLY RECOMMENDED FOR 18 YEARS AND OLDER. PATIENT IS 17 YEARS OLD . |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1230085-1 | Youth was administered the Covid19 Moderna vaccine and he is 17 years old. No adverse side effects post vaccine and mistake was noticed on 4/15/2021 |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1230110-1 | Moderna vaccine inadvertently given to pt 17 years of age. Pt was contacted on 4/19/2021 and reports no adverse reactions to vaccination. She is given option of receiving second dose of Moderna as well with off label use per CDC recommendations |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|---|
| | | | and would like to receive second dose as scheduled. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1231966-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1232066-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1234240-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1234274-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1238978-1 | Administration error: J&J vaccine dose was administered to a 17 year old. No immediate harm noted during observation period, no chart documentation of harm after discharge (as of review 11 days later). Contributing factors for administration error: (1) vaccine clinic was previously giving Pfizer vaccine while J&J shipments delayed. Change to J&J led to confusion by scheduling (patient was not screened as contraindicated for the Pfizer vaccine). Not detected onsite due to knowledge gaps given different approved age ranges. Taking action in scheduling and onsite registration to prevent similar errors moving forward. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1247424-1 | Administration error: Pfizer administered to a 15 year old patient. Patient was registered with a birthday of date (showing an age of 16 years upon vaccine clinic check-in). ID was not checked to confirm birthdate prior to vaccination. Following vaccination, ID confirmed actual birthdate was date (making the patient 15 years old). No adverse effects noted following administration. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1268566-1 | Not an adverse effect. Patient received 2nd dose of Moderna off-label per new CDC Guidance, after getting the first one as a medication error on 1/23/2021. Patient suffered no ill effects after vaccination. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1268580-1 | No adverse event. Patient was given Dose #2 of Moderna off-label before the 18th birthday after the 1st was inadvertently given underage. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1268605-1 | No adverse event; medication error. Moderna was inadvertently administered off-label to a youth before the 18th birthday. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1268616-1 | No adverse event. Pt received second dose of Moderna off-label after inadvertently receiving her first dose prior to the 18th birthday. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1268635-1 | No adverse event. This was a medication error: patient inadvertently received Moderna off-label prior to her 18th birthday |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1268644-1 | Not an adverse event; this report is a medication error. Patient inadvertently received Moderna off-label prior to his 18th birthday. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1270902-1 | None; reported as a medication error. Patient was inadvertently administered Moderna prior to the 18th birthday. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1271368-1 | No adverse reaction, Moderna COVID vaccine accidentally given to 17 year old. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1271607-1 | Not an adverse event, but a medication error. Pfizer vaccine was administered off-label to this 13 year old patient. However, the parent that completed her paperwork incorrectly listed her age as 16 and her DOB. When the vaccine was entered into system, we verified her actual DOB by cross checking with her pediatrician's EHR. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1297007-1 | Pfizer given to 15yo by immunizer |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1297015-1 | Pfizer given to 15yo |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1297024-1 | Pfizer given to 11 yo |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1307455-1 | This 17 year old who returned for Pfizer booster was given a Moderna COVID vaccine in error by a medical assistant student who was volunteering at vaccine clinic. No adverse reaction occurred during monitoring period. Error was not discovered until data entry staff where documenting vaccine and brought to my attention. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1317505-1 | Patient's age is less than acceptable (<18). No symptoms or adverse reactions reported during visit. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------|---------------------------|---------------------------|---|
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1321394-1 | No signs or symptoms noted |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1334017-1 | "PATIENT'S MOTHER CALLED MY OFFICE TO SET UP AN APPOINTMENT. DURING THIS CALL, THE MOTHER INFORMED ME THAT WHEN the patient WAS WITH HER FATHER LAST WEEKEND HE ""allegedly"" TOOK HER TO A pharmacy AND LIED TO THE PHARMACIST ABOUT HER BIRTHDAY SO SHE COULD GET A COVID VACCINE SO HE COULD GO ON VACATION. PARENTS ARE DIVORCED AND MOM HAS SOLE CUSTODY AND FATHER IS NOT ALLOWED TO MAKE MEDICAL DECISIONS WITHOUT HER CONSENT. HE ALSO LIED TO THE PHARMACIST AGAIN WHEN THEY WERE CONFIRMING THE BIRTHDAY AND FALSIFIED MEDICAL DOCUMENTS TO MAKE IT APPEAR THAT the patient WAS ELIGIBLE FOR THE PFIZER COVID VACCINE." |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1340798-1 | 17 year old patient received their first dose of Moderna at mass vaccination site the previous month. Patient presented at mass vaccination site for second dose. Guidance dictates that if patient has received first dose of Moderna, they should still receive second dose. Second dose was administered with no problems/adverse outcome. The only reason for submitting this VAERS report is due to a 17 y.o. patient receiving a Moderna dose. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1357963-1 | Pfizer Vaccine administered to individual under 12 years old; vaccine is only authorized for 12+. No adverse event/outcomes noted. Parents of children misrepresented their age when making the children appointments to get the vaccine. Registration noticed the children were under 12 years old when they were looking at second dose scheduling and noticed duplicate accounts with same info but different ages. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1357984-1 | Pfizer Vaccine administered to individual under 12 years old; vaccine is only authorized for 12+. No adverse event/outcomes noted. Parents of children misrepresented their age when making the children appointments to get the vaccine. Registration noticed the children were under 12 years old when they were looking at second dose scheduling and noticed duplicate accounts with same info but different ages. Per CDC and OHA guidance, second dose will not be administered. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1361218-1 | "Patient administered before vaccine before she is eligible. She is 11. Patient's father took her to get vaccine and, according to her mother, ""lied about her age"". Patient subsequently administered 1st dose of Covid-19 vaccine before meeting age eligibility requirements. Patient has NOT suffered any physical S/S and/or other side-effects of vaccine." |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1385221-1 | The patient is 15 years old and received the Moderna vaccine which is approved for EUA for ages 18 and above. The patient had no symptoms post shot. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1386356-1 | No adverse reactions occurred. Patient was given the vaccine too early at age 11 years old. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1389772-1 | This is the 2nd dose of moderna covid vaccine for this patient. The patient is 16 years old and received moderna vaccine which is not indicated for her age. she is not experiencing any adverse events. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1417998-1 | Mother was explain that moderna vaccine was not indicated for patients age group. She understands the CDC guideliness and agrees to proceed with second covid vaccine. No adverse reaction reported |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1454545-1 | Administration Error: This patient was 17 years old and received a Moderna vaccine (approved for 18 years and older). Patient was seen by PCP in clinic for annual wellness exam. Covid vaccine was offered and he agreed. PCP placed an order in chart for Moderna. No alert generated. Moderna was administered and no adverse effects were noted. Patient will proceed to get Moderna for dose #2 later this month. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1478551-1 | Administration Error: 17 year old patient received a 1st dose Moderna (indicated at this time for 18 years and older). No adverse effects were noted in the immediate observation phase. Patient has not yet received dose #2, but we will recommended a second dose with Moderna per current recommendations. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1526196-1 | Client's father requested Pfizer 0.3 mL first dose. Client received Moderna 0.5 first dose instead. Client was observed for 30 minutes by RN. Client did not present with any signs or symptoms of an untoward response or reaction to the Moderna first dose. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1531992-1 | Pt received 0.5ml Pfizer vaccine when the correct dose is 0.3ml. No adverse symptoms reported by patient or family at this time |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1532242-1 | Atregistration for this drive-through event in Oregon, site lead and employee identified the patient as being under 18 years of age. The patient's mother, was therefore provided with paperwork to fill out for her son, to receive the first dose of the Pfizer COVID-19 vaccine. At the vaccination station, RN, spoke with Pt mother about vaccine side effects, answered several questions, and reviewed pt health history. She was drawing up the Pfizer vaccine when another nurse came over and told her that the patient's mother wanted him to have the Janssen vaccine. (see continuation page for additional details) |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1537423-1 | Patient age of 15 got Moderna shot. Patient did not have any adverse reactions after the shot |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1549627-1 | NO ADVERSE EVENT OR REACTION. SHOT GIVEN OUTSIDE OF APPROVED PROTOCOL DUE TO FATHER LYING ON ADMINISTRATION FORM AND TO ADMINISTERING PHARMACIST REGARDING HIS DAUGHTERS BIRTHDAY. HE CLAIMED SHE WAS 12 WHEN IN REALITY SHE IS 10. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1578351-1 | vaccinated a 16-year-old at a Moderna Vx site. No adverse outcomes at this time. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1578661-1 | Medication error, Pt 13 years old, was given Moderna vaccine instead of Pfizer vaccine. Pt has no adverse reaction to the Moderna vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------------|---------------------------|---------------------------|---|
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1628353-1 | No adverse effects reported at this time. Patient received Pfizer COVID-19 vaccine with insufficient diluent, leading to multiple doses administered. Patient informed of error and advised to monitor for side effects per CDC guidance, and contact clinic if questions or concerns. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1662839-1 | Vaccine was reconstituted incorrectly. 0.8ml instead of 1.8ml of diluent was used. 3 patients received the higher concentrated doses. patients were notified. No adverse reactions have been reported. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1662847-1 | Vaccine was reconstituted incorrectly. 0.8ml instead of 1.8ml of diluent was used. 3 patients received the higher concentrated doses. patients were notified. No adverse reactions have been reported. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1662850-1 | Vaccine reconstituted incorrectly. 0.8mL instead of 1.8mL of diluent used. 3 patients received the higher concentrated doses. Patients notified. No adverse reactions reported. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1674810-1 | Patient was administered the Moderna vaccine. patient is 15 years of age and should have received Pfizer vaccine. No adverse events or symptoms reported by patient. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1715690-1 | No adverse event noted. Patient too young to receive Janssen and RN administered in error. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1719444-1 | Not 18 yet. No adverse event |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1779358-1 | no adverse events the only issue is vaccine given at a not recommended age, patient age at the time 17 yrs old and vaccine age recommended at 18 yrs old. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1779385-1 | no adverse event, vaccine given at a not recommended age. patient 17yrs old when vaccine is recommended at 18yrs old. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1782485-1 | no adverse events, patient 17yrs old and moderna vaccine recommended at 18yrs old. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1782534-1 | no adverse event, pt was 17yrs old when moderna vaccine is recommended at 18yrs old. |
| NO ADVERSE EVENT | COVID19 VACCINE (COVID19) | 1782619-1 | No adverse events, pt was 17yrs old, when moderna is recommended for 18yrs old. |
| NODAL RHYTHM | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| OBSESSIVE-COMPULSIVE DISORDER | COVID19 VACCINE (COVID19) | 1409006-1 | Child developed a massive PANDAS OCD Flare and possibly cytokine storm. He ended up in the hospital asking to die because OCD thoughts became over whelming. Child has had PANDAS for 6 years and never had an incident like this. |
| OBSESSIVE-COMPULSIVE SYMPTOM | COVID19 VACCINE (COVID19) | 1716780-1 | Worsening anxiety, OCD tendencies, and breast pain |
| OCULAR HYPERAEMIA | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| OEDEMA PERIPHERAL | COVID19 VACCINE (COVID19) | 1411094-1 | Hives and edema on bilateral hands/arms |
| OEDEMA PERIPHERAL | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1268566-1 | Not an adverse effect. Patient received 2nd dose of Moderna off-label per new CDC Guidance, after getting the first one as a medication error on 1/23/2021. Patient suffered no ill effects after vaccination. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1268580-1 | No adverse event. Patient was given Dose #2 of Moderna off-label before the 18th birthday after the 1st was inadvertently given underage. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1268616-1 | No adverse event. Pt received second dose of Moderna off-label after inadvertently receiving her first dose prior to the 18th birthday. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1268644-1 | Not an adverse event; this report is a medication error. Patient inadvertently received Moderna off-label prior to his 18th birthday. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1294133-1 | The person received the first Moderna vaccine by accident. Per the CDC guidance, the second Moderna was provided as off-label use. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1294177-1 | Person is under the age 18 years of age for Moderna, but they were provided the first dose by accident. Second dose was provided as an using the CDC guidance as an off-label. |
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1510710-1 | Patient under the age of 18 was inadvertently administered 1st dose of Modena at pharmacy; per patient and CDC card. 2nd dose of Moderna was given toda as off-label use. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------|---------------------------|---------------------------|---|
| OFF LABEL USE | COVID19 VACCINE (COVID19) | 1743489-1 | OFF LABEL USE; VACCINE ADMINISTERED TO A MINOR; This spontaneous report received from a pharmacist concerned a 12 year old male. The patient's weight was 280 pounds, and height was 74 inches. No past medical history or concurrent conditions were reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 202A21A, expiry: UNKNOWN) dose was not reported, administered on 17-SEP-2021 for prophylactic vaccination. No concomitant medications were reported. On 17-SEP-2021, the patient experienced off label use. On 17-SEP-2021, the patient experienced vaccine administered to a minor. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome of the off label use and vaccine administered to a minor was not reported. This report was non-serious. |
| OLIGOMENORRHOEA | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1327017-1 | Sore throat and nasal congestion |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1403744-1 | 15 yo old boy c/o difficultly sore throat approximately twenty minutes after receiving the second dose of the Pfizer vaccine. He appears well and has a normal voice. Auscultation of his larynx did not reveal stridor. No rash, wheezing, or other associated signs or symptoms. He was treated with 25 mg of oral diphenhydramine with a resolution of symptoms after an extended monitoring period. Per MD Clinical Lead |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| OROPHARYNGEAL PAIN | COVID19 VACCINE (COVID19) | 1835295-1 | Headache everyday; Nauseated; Sore throat; Tired; Dizzy; This is a spontaneous report from a non-contactable consumer, the patient. A 13-year-old non-pregnant female patient received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: 30130BA) via an unspecified route of administration in the left arm on 09Sep2021 at 12:15 (at the age of 13-years-old) as a single dose for COVID-19 immunisation. Medical history included asthma. The patient had no known allergies. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other medications within two weeks of vaccination. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. On 09Sep2021 at 19:00, the patient experienced headache everyday, nauseated, sore throat, tired and dizzy. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events headache everyday, nauseated, sore throat, tired and dizzy were resolving at the time of this report. No follow-up attempts are possible. No further information is expected. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| OVERDOSE | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| PAEDIATRIC AUTOIMMUNE NEUROPSYCHIATRIC DISORDERS ASSOCIATED WITH STREPTOCOCCAL INFECTION | COVID19 VACCINE (COVID19) | 1409006-1 | Child developed a massive PANDAS OCD Flare and possibly cytokine storm. He ended up in the hospital asking to die because OCD thoughts became over whelming. Child has had PANDAS for 6 years and never had an incident like this. |
| PAIN | COVID19 VACCINE (COVID19) | 1369033-1 | tired, body aches, restricted breathing, upset stomach, vomiting, congestion |
| PAIN | COVID19 VACCINE (COVID19) | 1374485-1 | Body aches, nausea, lethargy, decreased appetite, possible fever, sleeping difficulties approx. 24 hours |
| PAIN | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| PAIN | COVID19 VACCINE (COVID19) | 1382927-1 | 2nd dose was on Saturday at 10a. Felt body aches and headache that evening and the next day. Arm was sore at the injection site. Treated with ibuprofen (400 mg). Was able to go to school on Monday. Tuesday morning at 3a woke up not feeling well with chest pain and headache. Treated with ibuprofen. Still felt a little unwell in the morning, but by afternoon was feeling normal. |
| PAIN | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|---|
| PAIN | COVID19 VACCINE (COVID19) | 1392614-1 | reported Fever, body aches. chills, Nausea, Severe headache which made me take her to Emergency Room on 6/11/21. Severe headache possibly from Covid Vaccine. |
| PAIN | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lisons. She visited her pediatrician Tuesday, June 8th, 2021, and the lisons were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lisons are still present and painful, and continue to be treated. |
| PAIN | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| PAIN | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIC); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| PAIN | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021;Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| PAIN | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| PAIN | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak- numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------|---------------------------|---------------------------|---|
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1031002-1 | Patient was vaccinated before the 18th birthday with Moderna vaccine, a medication administration error parent reported that child had a sore arm following vaccination, but no other adverse effects |
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1394615-1 | Sore arm and fever |
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging, constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021;Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1694293-1 | Pain at injection site one hour after vaccine, bad headache, pain in arms and legs, 102 degree fever, periodic stomach cramps. |
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------|---------------------------|---------------------------|--|
| PAIN IN EXTREMITY | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| PALLOR | COVID19 VACCINE (COVID19) | 1178328-1 | PER PT, FEELING DIZZY AND AS IF SHE WAS FAINTING - PT WAS RESPONSIVE TO QUESTIONS AND HAD NORMAL BREATHING. PT GIVEN 1 DOSE OF ADULT EPI (LOT OFM501, EXP 05/22). PER EMT (ARRIVED WITHIN 10 MIN OF CALL), PT HAD NORMAL FAINTING SYMPTOMS OF HYPOTENSION AND LOOKING PALE |
| PALLOR | COVID19 VACCINE (COVID19) | 1182296-1 | "Patient felt lightheaded almost immediately after receiving vaccine. She was walking with her parents to the lobby and they reported pt ""jerking"" then becoming unconscious. She woke up right away. She was nauseous and pale for another 20 minutes or so. We called 911 and paramedics determined it to be a vasovagal response." |
| PALLOR | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| PALLOR | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| PALLOR | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| PALLOR | COVID19 VACCINE (COVID19) | 1397729-1 | The morning after the 1st COVID vaccine, patient experienced a sudden onset of feeling clammy, pale and narrowing vision. Near syncopal episode. Resolved after lying down and resting for about 10 minutes. |
| PALLOR | COVID19 VACCINE (COVID19) | 1470479-1 | Vasovagal reaction to vaccine, dizziness, diaphoresis, pale. Had client lie down and raised legs. Lasted 4-5 minutes. Completely recovered |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------|---------------------------|---------------------------|--|
| PALLOR | COVID19 VACCINE (COVID19) | 1512712-1 | "SUBJECTIVE: Pt. is a 15 year old male here vaccinated at our community vaccine event at high school last evening and received the Pfizer vaccine Approx 10 min after receiving the vaccine the patient reported: weakness and lightheadedness At approx 10 min post vaccination he was still sitting in the chair he was vaccinated in. When I came to him he was clammy and pale and felt weak and lightheaded. He also c/o of feeling tremulous This Hx of was obtained by pt and pt's mother who was with pt at the vaccine event. Pt was feeling anxious but well prior to the vaccine. He last ate approx 5 hrs prior to vaccine and had hamburger and root beer. He had no significant activity during the day prior to the event. He did wake up approx 4 hrs earlier then his usual time on day of event because of school orientation he had that day. Pt and mom denied any prior hx of similar reactions after vaccines Pt reported it ""feels like just got a shot"" No nausea, itching or resp distress No PMHx -Per pt. has been on IEP for adhd No current medications NKDA SoChx: pt denied any recent drug or etoh use Sudden onset of symptoms/signs: yes Rapid progression of symptoms/signs: Rapid progression that quickly improved OBJECTIVE: General appearance: pale and clammy Skin:no rashes Resp: CTA bilat CV: RRR Vitals Vaccine given at 5:58 pm 6:05 pm BP 87/50, P 83, pox 98%- pt was given water 6:08 pm BP 134/84, - coloring in face improved and pt began to feel better- pt was alert and oriented x 3 at this point 6:13pm BP 130/66- pt was given granola bar and 2nd bottle of water BS: 118 DISPOSITION: After sitting in chair for approx 35 min, drinking two bottles of water and two granola bars pt was feeling better, appeared better with normal coloring and not clammy and had normal vitals signs. He and his mom felt comfortable going home to rest. I reviewed warning signs with mom to call or go to ED for I called the next day (7/29) and spoke with his mom and she stated pt was doing better after eating dinner and was feeling well this. She plans to call pt's pediatrician to coordinate his 2nd dose in their office or affiliated clinic." |
| PALLOR | COVID19 VACCINE (COVID19) | 1592988-1 | Pt presented with guardian at point of sale to report fainting spell in the bathroom with guardian. Reported feeling clammy and nauseous after shot but attributed to anxiousness. Guardian said the the patient started tunnel vision while walking to the bathroom then collapsed onto guardian. She did not loose consciousness. Had the patient sit back down in the waiting room. Her pulse was 80bpm regular rate and rhythm. Pale paler with clammy feel. Pt was alert and followed directions but did not speak for herself. Blood Pressure was taken 110/81 79BPM. Vaccine was given about 12:30 with reporting to point of sale at 12:56pm Monitored patient for 5 more minutes. She was feeling better and able to stand with out any faintness. Sent on her way to call if any reoccurrence. |
| PALLOR | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| PALLOR | COVID19 VACCINE (COVID19) | 1674476-1 | She woke up the next morning was barely conscious, couldn't breathe, lips and face extremely pale , almost stopped breathing |
| PALLOR | COVID19 VACCINE (COVID19) | 1724302-1 | Within five minutes from receiving vaccine, patient reported feeling lightheaded, nauseous, and was pale. He was offered water and blood pressure was taken around 7:10pm, showing 61/43 mmHg. Upon patient's mother's consent, emergency services was called where he had his vitals re-checked. After ten minutes, his vitals are normal and blood pressure was back up to normal range. Patient was able to stand without dizziness. His mother was given the option to go to the hospital for further monitoring or leave on their own, in which she decided they were to leave on their own and monitor at home. |
| PALLOR | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient's nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| PALPITATIONS | COVID19 VACCINE (COVID19) | 1231181-1 | Heart racing Dizziness Weakness Numbness at injection site |
| PALPITATIONS | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------|---------------------------|---------------------------|--|
| PALPITATIONS | COVID19 VACCINE (COVID19) | 1463557-1 | Palpitations and chest pain Seen in ER on 7/8/21 and admitted overnight with rising troponin levels, improved by next day. Diagnosis of myocarditis related to COVID19 vaccine |
| PANCYTOPENIA | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| PANIC ATTACK | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1280705-1 | Within about 5 minutes of receiving her first Pfizer Covid19 vaccine, the patient passed out and hit her head on the floor. She regained consciousness quickly (within seconds) after I got to her. She stated she had felt nauseas and tingly before fainting. She has not experienced this before with other vaccines. Ambulance was dispatched due to her hitting her head. Parents and paramedics determined she was ok to go home. |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1350803-1 | She developed 3 isolated episodes of 30-90 minutes where she has tingling and burning in bilateral hands, worse in right, and worst in the thumb. No symptoms in feet. |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1389049-1 | Dizzy, low blood pressure, tingling in hands and feet. Patient was placed in supine position, legs elevated. Oxygen was administered. BP slowly returned to normal, he was slowly transitioned from supine to sitting then standing and was able to walk out of office on his own. Event lasted about 1 hour. |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1427431-1 | "pins and needles sensations that came and went in the fingers and toes, mostly the fingers. getting better, but was ""constant"" and now a couple times a day." |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1638255-1 | Paresthesia of distal upper and lower extremities as well as waist |
| PARAESTHESIA | COVID19 VACCINE (COVID19) | 1722615-1 | Paresthesias, muscle weakness: Guillian Barre syndrome. Onset 12 days following first COVID vaccination. No other acute illness typically associated with GB. |
| PARAESTHESIA ORAL | COVID19 VACCINE (COVID19) | 1378245-1 | Patient complained of facial flushing, tingling lips, and his throat feeling like it was tightening. Nurse administered 25mg IM Benadryl per clinic protocol. The reaction resolved after administration of IM Benadryl. |
| PARONYCHIA | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------|---------------------------|---------------------------|---|
| PARVOVIRUS B19 TEST | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| PARVOVIRUS B19 TEST | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| PARVOVIRUS B19 TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| PATHOLOGY TEST | COVID19 VACCINE (COVID19) | 1634192-1 | My son got his first dose of the Pfizer Covid-19 Vaccine and five days later he had sharp pains in his side followed by vomiting three times and being in pain all night. I took him to pediatrician in morning and was told to go to the ER where they did an emergency appendectomy on the Tuesday following his vaccine. I am not quite sure if it is a direct result of the vaccine but I did research on the website as well as the University and it states a 1/2500 chance through their testing. |
| PERICARDIAL EFFUSION | COVID19 VACCINE (COVID19) | 1342146-1 | Suspect pericarditis, elevated CRP, very very slight pericardial effusion, classic story, few EKG findings |
| PERICARDIAL EFFUSION | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1341490-1 | Pericarditis, temp 100, chest pain |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1342146-1 | Suspect pericarditis, elevated CRP, very very slight pericardial effusion, classic story, few EKG findings |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1362007-1 | pericarditis |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1386138-1 | Patient developed chest pain 2 days after vaccination. EKG consistent with pericarditis. He had chest pain 2 days after vaccination and briefly on the 3rd day. |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1412936-1 | Pericarditis |
| PERICARDITIS | COVID19 VACCINE (COVID19) | 1417707-1 | Chest pain 3 days after vaccine, evaluated 4 days after vaccine and found to have evidence of pericarditis without myocarditis. As no myocarditis and symptoms mild, was discharged with plan for cardiology follow up in 1 month. |
| PERIORBITAL OEDEMA | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------------|---------------------------|---------------------------|---|
| PERIPHERAL SWELLING | COVID19 VACCINE (COVID19) | 1347006-1 | swelling and rash started on arm 2 days after vaccine then spread to face, slight itching |
| PERIPHERAL SWELLING | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| PERIPHERAL SWELLING | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| PETECHIAE | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| PETIT MAL EPILEPSY | COVID19 VACCINE (COVID19) | 1322138-1 | Patient had what appeared to be absence seizures (facial twitching, unresponsive but moving eyes, fist clenching) for 30 seconds. This occurred 10 minutes post injection. Patient did not fall out of chair as her grandmother was right next to her. 911 was called, patient recovered immediately after and had no other incidence. patient taken to hospital. |
| PHARYNGEAL SWELLING | COVID19 VACCINE (COVID19) | 1501053-1 | Warm flushing on right side of face near the ear, then eventually on the left side of face. Nausea. Throat felt it was swollen. |
| PLATELET COUNT | COVID19 VACCINE (COVID19) | 1466792-1 | 1. Intense bloody nose that bled for 35 minutes, very heavy flow and had a hard time stopping it. 2. Menstrual cycle started 13 days early with unusually heavy flow and cramping. |
| PLATELET COUNT DECREASED | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| PLATELET COUNT DECREASED | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| PLATELET COUNT INCREASED | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| PLATELET COUNT NORMAL | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| PLATELET DISORDER | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| PLEURITIC PAIN | COVID19 VACCINE (COVID19) | 1412936-1 | Pericarditis |
| PLEURITIC PAIN | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| POLYNEUROPATHY | COVID19 VACCINE (COVID19) | 1474052-1 | Polyneuropathy in bilateral legs, headache, and weakness 24 hours after first dose of Pfizer with worsening over subsequent 48 hours - currently being admitted to hospital for evaluation. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------|---------------------------|---------------------------|---|
| POSTURE ABNORMAL | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| POSTURE ABNORMAL | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| POSTURE ABNORMAL | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| POSTURE ABNORMAL | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient's nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| PREGNANCY TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| PRESYNCOPE | COVID19 VACCINE (COVID19) | 1182296-1 | "Patient felt lightheaded almost immediately after receiving vaccine. She was walking with her parents to the lobby and they reported pt ""jerking"" then becoming unconscious. She woke up right away. She was nauseous and pale for another 20 minutes or so. We called 911 and paramedics determined it to be a vasovagal response." |
| PRESYNCOPE | COVID19 VACCINE (COVID19) | 1260022-1 | Patient presents with a potential reaction to the COVID19 vaccine. I was called to the patient's vehicle just outside the vaccination area. The patient appeared to having a moderate to severe vasovagal episode without total syncope. There did appear to be slight pseudoseizure activity present, however, there was no LOC or loss of bowel or bladder tone. The patient was placed in a supine position and moved to the monitoring area. With positional changes and aggressive hydration, he rapidly improved to baseline. He did endorse that he has had similar episodes with blood draws, etc. He was returned home with his mother as the driver and with preventative instructions for his second dose. |
| PRESYNCOPE | COVID19 VACCINE (COVID19) | 1397729-1 | The morning after the 1st COVID vaccine, patient experienced a sudden onset of feeling clammy, pale and narrowing vision. Near syncopal episode. Resolved after lying down and resting for about 10 minutes. |
| PRESYNCOPE | COVID19 VACCINE (COVID19) | 1470479-1 | Vasovagal reaction to vaccine, dizziness, diaphoresis, pale. Had client lie down and raised legs. Lasted 4-5 minutes. Completely recovered |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PROCALCITONIN INCREASED | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| PROCALCITONIN INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0935866-1 | Vaccination inadvertently given to patient outside of ACIP approved ages |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0957001-1 | minor received vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0959694-1 | Patient is 16 years old. Patient did not have side effects after vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0965144-1 | Too young of age to administer the vaccine . |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0965790-1 | minor age 15 received COVID vaccine. no adverse reaction |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0966425-1 | minor of 15 years received COVID vaccination |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0966517-1 | minor of 15 years old received COVID vaccination |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0974279-1 | Patient under age indication per vaccine recommendation (patient 16, vaccine for 18+) |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0975739-1 | Minor age 17 received Moderna vaccine. no adverse effects reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0975794-1 | Minor age 13 received Moderna vaccine. No ill effects reported |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0975820-1 | Minor age 16 received Moderna vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0975848-1 | Minor age 16 received Moderna vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0979740-1 | During a drive-thru Covid-19 vaccination clinic, this 12 year old incidentally received the Moderna vaccine which is only EUA approved for individuals 18 years and older. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 0991701-1 | Error: Too Young for Vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1003324-1 | Patient was only 17, should not have received the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1007093-1 | This patient was vaccinated with the Moderna vaccine despite being <16 years of age. A voicemail message was left for her, she was asked to return the call, and her employer's HR office was notified because the vaccination was given at her place of employment. No adverse events were noted and she waited the full 15 minutes under RN monitoring. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1014389-1 | Medication administration error. This healthcare worker is a minor. Per our standing orders for clinic vaccination we are only able to provide immunizations to adults. This healthcare worker's age was missed by our registration and vaccination stations. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1017689-1 | This nurse was told by the pt's caregiver that they were advised by the health department that they were eligible to receive the vaccine at the time of a visit to Schools in order to vaccinate school teachers as well as the general public who were elderly or those caring for someone with special needs. Due to the fact that they were told by the health department they were good to get the vaccine I went ahead and vaccinated the pt as well as her mother and caregiver. However, Moderna vaccine has not been approved for patients under 18 years of age at this time. I notified the health department and the told me to fill out this VAERS form so as to make sure it is documented that the patient received the moderna vaccine at this time. There has been no adverse effect of the vaccine as of this time. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1018111-1 | 15 year old minor received first and second doses of Pfizer vaccine. No adverse effects |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1020649-1 | Person under 18 years old got a Moderna Covid-19 Vaccine. Moderna is not approved for folks under 18 years of age. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1030730-1 | The patient was administered the Moderna vaccine before the age of 18, which is off-label use according to the. She was told to vaccinate by her PCP due to multiple chronic conditions and had a doctor's note, but it should not have been administered at age 17. The patient and her parent reported no adverse reactions to the actual vaccination. The VAERS report is being filed because it was an administration error for dose #1. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1030803-1 | Patient received the vaccine as a result of a medication error; he was only 17 at the time of administration, and should have been 18 to receive Moderna. Spoke with the patient on 2/8/21 and he reported no adverse reactions (local or systemic) to vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1030817-1 | Patient was administered the first Pfizer vaccine as a medication error; he was not yet 16, the approved age. The patient is doing well and reported no local or systemic side effects after the first dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1030931-1 | Patient was inadvertently administered the Pfizer vaccine before the age of 16. She reported no adverse effects after vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1030970-1 | Patient was inadvertently administered the Moderna vaccine before his 18th birthday. A headache was the only adverse effect that the patient reported having post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031002-1 | Patient was vaccinated before the 18th birthday with Moderna vaccine, a medication administration error parent reported that child had a sore arm following vaccination, but no other adverse effects |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031533-1 | Patient received the Moderna vaccine before her 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031617-1 | Patient was inadvertently administered the Moderna vaccine before the age of 18. Patient and parent did not report any adverse effects following vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031639-1 | Patient was inadvertently administered the Moderna vaccine before her 18th birthday. She and her parent reported no adverse reactions following vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031690-1 | Patient was inadvertently administered the Moderna vaccine before the age of 18. Patient and parent did not report any adverse effects following vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031859-1 | Patient was administered the Moderna vaccine prior to her 18th birthday |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031875-1 | Patient was administered the Moderna vaccine prior to her 18th birthday |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031890-1 | Patient was administered the Moderna vaccine prior to her 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031923-1 | Patient was administered the Moderna vaccine prior to her 18th birthday |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031941-1 | Patient was administered the Moderna vaccine prior to her 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031950-1 | Patient was administered the Moderna vaccine prior to her 18th birthday. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1031958-1 | Patient was administered the Moderna vaccine prior to his 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1033993-1 | Error: Patient Too Young for Vaccine Administered |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1034236-1 | Patient was erroneously administered the COVID Vaccine at one of our mass vaccination clinics, and she does not meet the minimum age requirement per the EAU guideline. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1034245-1 | Patient was given the COVID vaccine though he does not meet the age requirement per the EAU guidelines. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1034376-1 | Patient's age inappropriate for vaccine. Minimum age is 18. No reaction found. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1036968-1 | Patient was administered the Moderna vaccine, instead of the Pfizer Vaccine. The Moderna vaccine is not indicated for her age group. Her DOB was clearly written on her consent form, entered online when she made her appointment, and verified on her drivers license. She also selected Pfizer when asked which vaccine she would prefer. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1049871-1 | Reporting a vaccine administration error: unauthorized age group. Vaccinated while not yet 18 years of age. No adverse event. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1063056-1 | Patient was under the age of 18 and should not have been given the vaccine. No adverse effects noted during administration or the observation period. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1063086-1 | Patient received both doses of Moderna Vaccine and he is under 18 (17 years 8 months), |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1066849-1 | This form is to report that a vaccine shot was mistakenly administered to a person , info above) that was under the age of 18 y/o by me. There were no adverse reactions, allergic reactions, or any symptoms other than mild soreness at the injection site, confirmed with the individual receiving the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1067234-1 | 12 year old received vaccine not approved for her age. Mother reports no side affects |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1067246-1 | Child too young for the vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1067295-1 | Parent deliberately wrote date of birth as 07/18/2002 to ensure child would receive 2nd dose of vaccine. This led to an underage child receiving the Moderna vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1068482-1 | Under-age patient was vaccinated. Patient was discovered to be under the minimum approved age for this vaccine after the injection was given. No signs or symptoms of adverse effect were detected during the 15 minute post-injection observation period. Our Covid vaccination clinic screens patients for qualifying and disqualifying factors, including age, immediately before they receive a vaccination. Screeners are responsible for this. Patients who pass screening are then sent to a vaccinator. Vaccinators do not re-screen patients in the course of administering the injection. This event occurred because a mistake was made during the screening process. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1071923-1 | Gave vaccine to minor. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1073007-1 | Found out later that the person who received the vaccine was a minor (17 years, 4 months old). Our physician advisor approved the administration of the follow up (2nd) dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1073222-1 | Too young to receive vaccine Received 2nd dose on 2/13/21 Lot EL3246 of Pfizer vaccine also in R deltoid, IM |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1073247-1 | no known adverse event. Too young to receive the vaccine. received on on 1/23/2021 and 2nd on 2/11/2021 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1073260-1 | No known adverse event. vaccine given to someone who was too young to receive (age 15) |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1073329-1 | Too young to receive vaccine. The year of birth on screening form was 2003 both for the first dose(lot EL9261) on 1/21/2021 and for the second dose (lot EL9269)on 2/11/21. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1073836-1 | This form is to report the second dose of the vaccine shot was mistakenly administered to a person (info above) that was under the age of 18 y/o by me on 02/02/2021. There were no adverse reactions, allergic reactions, or any symptoms other than mild soreness at the injection site, confirmed with the individual receiving the vaccine. I was advised to administer the 2nd dose to the same person by Vaccine POD supervisors. This action of administering 2nd dose to person under age 18 y/o was approved. Pt had no symptoms during 15 minute observation. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1076990-1 | A minor got through the screening process at a vaccine clinic I was working at in county and I administered the Moderna vaccine to this minor unaware of his age. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1077054-1 | None - Pt. under the age of 18 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1077604-1 | Pt received Moderna COVID19 vaccine at age 17 which is outside the EUA accepted use range. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1080023-1 | Administered Moderna to <18 Y/O male |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1080058-1 | Administered Moderna to <18 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1080064-1 | Administered Vaccine to < 18. Dr Ok'd second dose |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1080080-1 | Administered Moderna to <18. Dr. ok'd second dose |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1080226-1 | Administred Moderna to <18. Dr. Ok'd dose 2 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1080239-1 | Administered Moderna to <18 male Dr. ok'd second dose |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1089766-1 | Janssen covid vaccination given to individual younger than approved age. Unknown is any ADE's manifested. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1097034-1 | Vaccine was administered to patient under the age indicated of 18 years and up. Patient was 17 years old and reports no symptoms at this time or any adverse side effects. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1103176-1 | This patient is under the age limit for Moderna vaccine and received his first dose 3/9/2021 at a mass vaccination event held by the clinic. No physical adverse reaction occurred with patient but a med error occurred due to the patient's age. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1103184-1 | This patient had the moderna vaccine administered during a mass vaccination event. The patient is under age, sustained no physical adverse events, and has been alerted that he will not be receiving his second dose until he reaches age 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1108655-1 | 16 year old received Moderna vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1109911-1 | On 3-15-2021, Pharmacist administered Janssen COVID-19 vaccine to patient (16 yrs) who is under the approved age of 18. No symptoms or ADE for patient and guardian signed off |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1118609-1 | Patient underage for vaccine. Minimum age is 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1123250-1 | This is a 17 year old male that received the Janssen vaccine, which is approved for 18 years and older. VAERS being completed to document an administration error (wrong age). In this case, a Home Health nurse was administering the Janssen vaccine to a homebound patient per our program to vaccinate those high-risk seniors that are homebound, as well as their in-home caregivers. During a visit to vaccinate the homebound senior, this 17 year old was also vaccinated without detected the wrong-age error. Following administration, the vaccine information was being input into ALERT and the age error was detected and reported. No adverse effects noted for the patient. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1123340-1 | This patient, despite being contacted after receiving the first Moderna vaccine in error under the age of 18, returned to a mass vaccination clinic site and was administered the second dose. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1123378-1 | The patient and her mother returned to the clinic and misrepresented the patient's age on the VAR in order for her to receive the second dose of Moderna vaccine below the approved age. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1124153-1 | Medication administration error. Patient was given the Moderna vaccine before the 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1127670-1 | Patient was under the age of 18 when she received the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1128089-1 | patient was under 18 years old and pharmacist from a clinic gave a johnson and johnson vaccine to patient. not sure of any reactions but since patient is under age we were instructed to report to VAERS |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1131437-1 | Patient is 16 years of age and should have not received the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1138780-1 | Moderna vaccine was inadvertently administered to an unauthorized age group |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1138810-1 | Moderna vaccine inadvertently administered to an unauthorized age group |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1147521-1 | parent consent to vaccine but patient was under 18 years old. Technician gave the shot not knowing the age requirement. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1152792-1 | No adverse events reported. Vaccine accidentally administered to 16 year old patient. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1156417-1 | Received the moderna vaccine at a young age, no side effects or adverse reaction noted |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1159634-1 | Pt was 15 at the time of vaccination, which is below the recommend age of 16 for the EUA. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1170090-1 | PATIENT WAS ADMINSTERED THE MODERNA VACCINE AT AGE 16 YEARS OLD WHEN IT IS NOT YET APPROVED FOR THIS AGE. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1170207-1 | Gave Moderna to a 17 year old patient-did not realize they were under 18 until after vaccinating-patient is doing fine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1171405-1 | Vaccine given to a 16 year old female patient. Patient was not at the age to receive vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1172492-1 | patient is 16 years old. Johnson and Johnson COVID vaccine approved for people over 18 years of age |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1172538-1 | Patient was inadvertently vaccinated at age 17. No adverse effects during monitoring. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1173061-1 | Patient received Moderna vaccine and is under 18, no immediate adverse events occurred. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1173098-1 | Patient was given Moderna Vaccine and under 18 years old. No immediate adverse reactions occurred. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1173122-1 | Patient was inadvertently given the Janssen covid vaccine at age 17. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1173945-1 | PATIENT IS 17. UNDERAGE FOR THE VACCINE. VACCINE APPROVED FOR 18 AND ABOVE |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1174123-1 | Patient was underage. No reaction has occurred. Patient is 17, moderna is only approved for pts >18 years old. Patient confirmed that he wanted to receive moderna. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1174163-1 | Patient received a dose of Moderna COVID-19 at age 17. At the time of this report, he had not reported any adverse effects. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1175498-1 | This client was inadvertently administered a Moderna covid vaccine 1 and 2 at a mass vaccine site by a volunteer vaccinator, client is 13 years of age. Client had been referred by the shelter. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1175969-1 | Given COVID19 vaccine out of approved age range; patient is only 16 and approved age is 18 and above. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1175997-1 | Given COVID19 vaccine out of age range; patient is 17, and vaccine approved for 18 and above. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1177356-1 | Medication error--vaccine administered prior to 18th birthday. Pt had no adverse effects following vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1182958-1 | patient will turn 18 in june 2021 but was given the moderna vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1182983-1 | Patient was under the age of 16 , and was given pfizer vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1183338-1 | Patient said he was of age to receive the vaccine but after clinic was over, it was verified that he was actually 17 and under the approved age to receive the Janssen covid vaccine. no side effects were reported from the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1185307-1 | Patient is 17 years old and received a Janssen COVID vaccine, which is not currently approved by the FDA in this age group. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1185462-1 | Vaccine indicated for 18 years of age and older patient 2 months short of age requirement |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1186962-1 | Patient was a minor and received a vaccination approved for only 18 and over. According to guardian, patient has had no side effects relating to vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1188238-1 | After vaccination I realized the patient was not old enough for this vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1197289-1 | Patient is a 16 year old patient that received vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1208018-1 | We sent out an email to store associates over 18 years of old to have prefilled out VAR for an offsite clinic. Pt showed up to get vaccine, consent form signed, was screened down the list and the vaccine was administered. Staff returned to bill the vaccine on 4/9/21 and our system on halted it due to pt age. I was made aware of the error on 4/12/21 when I returned from the weekend. We then looked deeper into the VAR to find it had been signed by the father for consent to give the vaccine to his daughter. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209068-1 | PHARMACIST PERFORMED AN OUTSIDE CLINIC AND GAVE A DOSE TO PATIENT WHO WAS ONLY 16 YEARS OF AGE. SHE WAS AN EXTRA DOSE . |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209344-1 | Patient less than 18 years of age at time of Moderna vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209370-1 | Patient less than 18 years of age at time of Moderna vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209381-1 | Patient less than 18 years of age at time of Moderna vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209562-1 | Patient less than 18 years of age at time of Moderna vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209578-1 | Patient less than 18 years of age at time of Janssen vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209597-1 | Patient less than 18 years of age at time of Moderna vaccination. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209636-1 | Patient less than 18 years of age at time of Moderna vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209655-1 | Patient less than 18 years of age at time of Moderna vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1209659-1 | Patient is not with in recommended age group, Patient has not reported any adverse events at this moment. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1210839-1 | Doctor provided this 15-year-old patient with the Pfizer vaccine at the Clinic on 04/12/21. Upon processing paperwork on 04/14/21, pharmacy manager, discovered the incident, and WAS NOT able to contact the patient because the phone number was not provided on the consent form ** |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1211332-1 | PATIENT WAS 17 YEARS OLD AT THE TIME OF RECEIVING MODERNA COVID19 VACCINE INDICATED FOR 18 AND ABOVE. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1219016-1 | No adverse events noted. Moderna vaccine (approved for 18+) inadvertently administered to 17 year old patient. Per CDC guidelines, will proceed with 2nd dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1220195-1 | NO ADVERSE SYMPTOMS. MODERNA IS ONLY RECOMMENDED FOR 18 YEARS AND OLDER. PATIENT IS 17 YEARS OLD . |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1230085-1 | Youth was administered the Covid19 Moderna vaccine and he is 17 years old. No adverse side effects post vaccine and mistake was noticed on 4/15/2021 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1230110-1 | Moderna vaccine inadvertently given to pt 17 years of age. Pt was contacted on 4/19/2021 and reports no adverse reactions to vaccination. She is given option of receiving second dose of Moderna as well with off label use per CDC recommendations and would like to receive second dose as scheduled. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1230575-1 | 17 yo female returned for dose 2 of Pfizer but mistakenly received Moderna |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1230953-1 | 15 year old minor received Pfizer vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1230998-1 | 17 year old minor received Moderna Covid Vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1231966-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1232036-1 | Our health department conducted a mass vaccination event on 4/13/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 1 17 yo patient who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1232066-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1233780-1 | Patient 17, no reaction during waiting period |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234205-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234218-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234240-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234249-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234265-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234274-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1234289-1 | Our health department conducted a mass vaccination event on 4/3/21 where more than 1,000 people were vaccinated. Over the course of the 8 hr event there were 10 16&17 yo patients who received a first dose of Moderna vaccine. We have reported this to Moderna and they recommended we fill out a VAERS for each patient. We have spoken with the parents of each patient. There were no reported adverse effects and all of them are planning on getting their second shot of Moderna Vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1235469-1 | Patient is underage (17 years old) |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1238978-1 | Administration error: J&J vaccine dose was administered to a 17 year old. No immediate harm noted during observation period, no chart documentation of harm after discharge (as of review 11 days later). Contributing factors for administration error: (1) vaccine clinic was previously giving Pfizer vaccine while J&J shipments delayed. Change to J&J led to confusion by scheduling (patient was not screened as contraindicated for the Pfizer vaccine). Not detected onsite due to knowledge gaps given different approved age ranges. Taking action in scheduling and onsite registration to prevent similar errors moving forward. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1239034-1 | Covid Moderna vaccine given to patient under the age of 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1247424-1 | Administration error: Pfizer administered to a 15 year old patient. Patient was registered with a birthday of date (showing an age of 16 years upon vaccine clinic check-in). ID was not checked to confirm birthdate prior to vaccination. Following vaccination, ID confirmed actual birthdate was date (making the patient 15 years old). No adverse effects noted following administration. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1249045-1 | AT OFFSITE MASS VACCINATION CLINIC, PATIENT WAS GIVEN PFIZER COVID VACCINE WHEN HE WAS NOT YET 16 YEARS OLD (JUST 4 DAYS SHY OF BIRTHDAY). DISCOVERED THE WEEK AFTER WHEN PHARMACY WAS PROCESSING THE CLINIC PAPERWORK. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1264637-1 | Moderna vaccine is not approved for under the age of 18. Patient does not turn 18 until 7/17/2021. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1264897-1 | Pt given vaccine under age |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1265450-1 | Gave vaccine to underage child |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1266716-1 | Person did not meet the FDA age criteria to receive the Pfizer vaccine. Person is 15 years of age and needed to be 16. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1267346-1 | Medication error; Dose given prior to 18th birthday. Patient tolerated well. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1268580-1 | No adverse event. Patient was given Dose #2 of Moderna off-label before the 18th birthday after the 1st was inadvertently given underage. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1268605-1 | No adverse event; medication error. Moderna was inadvertently administered off-label to a youth before the 18th birthday. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1268616-1 | No adverse event. Pt received second dose of Moderna off-label after inadvertently receiving her first dose prior to the 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1268635-1 | No adverse event. This was a medication error: patient inadvertently received Moderna off-label prior to her 18th birthday |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1268644-1 | Not an adverse event; this report is a medication error. Patient inadvertently received Moderna off-label prior to his 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1269565-1 | PHARMACIST ADMINISTERED MODERNA VACCINE TO 17 YR OLD. PHARMACIST CONTACTED PATIENT LATER THAT DAY TO DISCUSS COMPLETING THE SERIES IN 28 DAYS. PATIENT IS AWARE THAT MODERNA WAS NOT TO BE ADMINISTERED TO THOSE UNDER 18 YEARS. SHE IS TURNING 18 YEARS OLD BEFORE THE SECOND DOSE IS TO BE ADMINISTERED. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1270730-1 | Given at age 17, patient lied when asked and the age was calculated correctly after administration. Pt is tolerating vaccine well and no other side effects or concerns were present. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1270902-1 | None; reported as a medication error. Patient was inadvertently administered Moderna prior to the 18th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1271026-1 | No adverse event, but this was a medication error in which Pfizer was inadvertently administered to a patient under the age of 16. HOWEVER, the parents falsified the Vaccine Administration Record, stating that he was born in 2004 and was 16 years old, in order for him to receive the vaccine. This was discovered when entering data. His actual DOB was verified in two separate medical records. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1271096-1 | None; this was a medication error. Patient was given Pfizer vaccine 1 month prior to 16th birthday. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1271122-1 | None-this was a medication error. Patient was inadvertently administered the Pfizer vaccine prior to her 16th birthday. HOWEVER, parent falsified the VAR in order for child to receive the vaccine (age was recorded as 16, year of birth as 2005). Correct DOB was determined from 2 independent medical records when vaccine entered into system. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1271368-1 | No adverse reaction, Moderna COVID vaccine accidentally given to 17 year old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1271607-1 | Not an adverse event, but a medication error. Pfizer vaccine was administered off-label to this 13 year old patient. However, the parent that completed her paperwork incorrectly listed her age as 16 and her DOB. When the vaccine was entered into system, we verified her actual DOB by cross checking with her pediatrician's EHR. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1273590-1 | No adverse symptoms, patient was under 18 when the vaccine was given him. Patient scheduled on line so he was checked in online and it was not until we had logged the information that we became aware that he was under 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1274228-1 | PT ONLY 17 AT TIME OF VACCINE |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1274231-1 | Patient is 16 years old and received a Moderna vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1274252-1 | Patient is a 17 year old who received a Moderna vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1282800-1 | Patient received 1st dose of Moderna at age 16 through a clinic provider office. No adverse outcome. No side effects. Patient missed her 2nd dose appointment and called the clinic main Vaccine Clinic to reschedule. Case discussed with clinic CMO and per CDC guidelines patient will be offered 2nd dose of Moderna to complete series. Will be considered as off label use. Patient will be counselled on events prior to 2nd dose administration. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283364-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with Infectious Disease Medical Director, the patient was provided a second dose of Moderna vaccine off-label. The patient conferenced with our leadership at the site before the second vaccination to discuss the recommendation before proceeding. Patient is doing well post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283380-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with medical director, the patient was provided a second dose of Moderna vaccine off-label. The patient conferenced with our leadership at the site before the second vaccination to discuss the recommendation before proceeding. Patient is doing well post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283393-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with facility direction, the patient was consulted to let him know that a second dose of Moderna vaccine off-label would be the recommended second dose. The patient following discussion with his PCP has determined that he will not receive a second dose of COVID-19 vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283422-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with medical director, the patient has been counseled that a second dose of Moderna vaccine off-label is the recommended second dose. Patient is doing well post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283440-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with Medical Director, the patient was provided a second dose of Moderna vaccine off-label. The patient conferenced with our leadership at the site before the second vaccination to discuss the recommendation before proceeding. Patient is doing well post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283452-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with facility medical direction, the patient was provided a second dose of Moderna vaccine off-label. The patient conferenced with our leadership at the site before the second vaccination to discuss the recommendation before proceeding. Patient is doing well post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283459-1 | The screening and consent form had the wrong date of birth. The person wrote they were born in a specific year, when they were born in a different year. They did not meet the age eligibility per FDA to receive this vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283466-1 | Patient is under the age of 18 and was provided Moderna vaccine. Per CDC guidance and in consultation with Infectious Disease Medical Director, the patient was provided a second dose of Moderna vaccine off-label. The patient conferenced with our leadership at the site before the second vaccination to discuss the recommendation before proceeding. Patient is doing well post vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1283739-1 | The person does not meet the age criteria per FDA. When been vaccinated by the POD clinic, the age was not caught until data entry. Person was accidently vaccinated. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1286104-1 | 17 year old minor received Moderna vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1286598-1 | 17 yo patient received Moderna Vaccine 1/23/21. Pt also received dose 2 Moderna 2/20/21. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1286740-1 | 17 yo patient received Moderna dose 1 1/30/21. Received Moderna dose 2 2/27/21 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1286759-1 | 16yo patient received Moderna vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1289339-1 | vaccine given to a 15 yo by nurse |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1289495-1 | Not recommended for patient age/Patient underage |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1289559-1 | Pfizer given to 15 yo by staff |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1289672-1 | Patient received her second dose of Pfizer as scheduled. She was not 16 yrs of age. Paperwork reflected she was 16 yrs old. Confirmed with mother/legal guardian over the phone that the birthdate was incorrect and she was underage to receive the Pfizer vaccine per the CDC guidelines and to verify the encounter/error with her pediatrician. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1290099-1 | PFIZER GIVEN TO 14 YEARS OLD BY RN AT THE VACCINATION CLNIC |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1292449-1 | under age approved for vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1293376-1 | N/A |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1293398-1 | N/A |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1293644-1 | Patient is not experinced any adverse event. she is 16 yrs and 2 months and received the moderna covid vaccine which is for 18 yrs and above |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1294133-1 | The person received the first Moderna vaccine by accident. Per the CDC guidance, the second Moderna was provided as off-label use. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1294177-1 | Person is under the age 18 years of age for Moderna, but they were provided the first dose by accident. Second dose was provided as an using the CDC guidance as an off-label. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1297007-1 | Pfizer given to 15yo by immunizer |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1297015-1 | Pfizer given to 15yo |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1297024-1 | Pfizer given to 11 yo |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1303866-1 | pfizer given to 15yo, unauthorized age |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1307455-1 | This 17 year old who returned for Pfizer booster was given a Moderna COVID vaccine in error by a medical assistant student who was volunteering at vaccine clinic. No adverse reaction occurred during monitoring period. Error was not discovered until data entry staff where documenting vaccine and brought to my attention. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1307833-1 | Patient presents to discuss a medication error. The patient was given dose 1 of MODERNA on 4/11/21 at PDX at age 15. This error was not logged at the time, and clinic staff were not made aware of this, representing multiple system failures. The patient returned today at 28 days for his 2nd dose of MODERNA. We reviewed the error with the patient and his parents in detail. A detailed risk/benefit discussion was had between family, patient, clinical site lead, pharmacy, and site lead. Of note, the patient's father is a physician. In a review of all available options, the choice was made to give the 2nd dose of MODERNA today. The patient is healthy near 16 years old of healthy weight, and it was felt the risk of COVID19 outweighed any risk related to vaccination. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1311145-1 | Covid Moderna vaccine given to patient under the age of 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1311698-1 | pfizer given to unauthorized age |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1311712-1 | pfizer given to unauthorized age |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1317505-1 | Patient's age is less than acceptable (<18). No symptoms or adverse reactions reported during visit. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1317652-1 | No signs or symptoms |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1317803-1 | Administration Error: this is a 16 year old that received the J&J vaccine (approved for ages 18 and over only). In this event, the patient attended a vaccine clinic with a family member and was added on to the schedule as a 'walk-in' appointment at the parent's request. The patient received the vaccination before they were processed in the computer. After administration during the electronic documentation, the patient's age was flagged and the error discovered. The parent and patient were advised of the age-related error, and the patient had no adverse effects in the immediate observation period. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1318943-1 | THIS VACCINE IS ONLY FOR 18 YEARS OR OLDER. HOWEVER, THIS PATIENT IS ONLY 16 AND GOT THIS SHOT ON 04/05 |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1321394-1 | No signs or symptoms noted |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1322307-1 | The person lied about their birthdate, making them eligible to receive the vaccine. They put down they were DOB was a specific date and their actual DOB is different. At the time the person was not eligible to receive the vaccine based on FDA guidance. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1322311-1 | The person lied about their birthdate, making them eligible to receive the vaccine. They put down they were DOB was one date and their actual DOB is different. At the time the person was not eligible to receive the vaccine based on FDA guidance. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1322327-1 | The person lied about their birthdate, making them eligible to receive the vaccine. They put down they were DOB was a specific date and their actual DOB is different. At the time the person was not eligible to receive the vaccine based on FDA guidance. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1322333-1 | The person lied about their birthdate, making them eligible to receive the vaccine. They put down they were DOB was a specific date and their actual DOB is different. At the time the person was not eligible to receive the vaccine based on FDA guidance. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1322336-1 | The person lied about their birthdate, making them eligible to receive the vaccine. They put down they were DOB was a specific date and their actual DOB is different At the time the person was not eligible to receive the vaccine based on FDA guidance. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1322362-1 | Person does not meet the FDA age eligibility for the Moderna vaccine. Person received the first Moderna vaccine at the age of 16. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1323756-1 | Pt was 11 years old at time of vaccination. Her mother falsified her age information on the consent form. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1324315-1 | pharmacist accidently administered MODERNA COVID 19 vaccine to patient 16 years old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1324761-1 | Patient is 16 years old, and Janssen/Johnson and Johnson covid-19 vaccine is not approved unless you are 18 years or older. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1326518-1 | Pharmacist, administered Moderna vaccine to underage (16 year old) girl at a COVID vaccine clinic. ALERT iis shows no other COVID vaccines administered. Circumstances unknwn. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1334017-1 | "PATIENT'S MOTHER CALLED MY OFFICE TO SET UP AN APPOINTMENT. DURING THIS CALL, THE MOTHER INFORMED ME THAT WHEN the patient WAS WITH HER FATHER LAST WEEKEND HE ""allegedly"" TOOK HER TO A pharmacy AND LIED TO THE PHARMACIST ABOUT HER BIRTHDAY SO SHE COULD GET A COVID VACCINE SO HE COULD GO ON VACATION. PARENTS ARE DIVORCED AND MOM HAS SOLE CUSTODY AND FATHER IS NOT ALLOWED TO MAKE MEDICAL DECISIONS WITHOUT HER CONSENT. HE ALSO LIED TO THE PHARMACIST AGAIN WHEN THEY WERE CONFIRMING THE BIRTHDAY AND FALSIFIED MEDICAL DOCUMENTS TO MAKE IT APPEAR THAT the patient WAS ELIGIBLE FOR THE PFIZER COVID VACCINE." |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1334539-1 | Moderna COVID?19 Vaccine EUA Vaccine given to pt at 16 years of age. Pt had already received first dose one month prior, and was counseled re use of vaccine outside of approved age range but within reccomendations of CDC for pt already having received first dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1340798-1 | 17 year old patient received their first dose of Moderna at mass vaccination site the previous month. Patient presented at mass vaccination site for second dose. Guidance dictates that if patient has received first dose of Moderna, they should still receive second dose. Second dose was administered with no problems/adverse outcome. The only reason for submitting this VAERS report is due to a 17 y.o. patient receiving a Moderna dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1343643-1 | The EMT gave a dose of the Moderna vaccine to an individual who is 16. The age restriction is 18 and older. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1344172-1 | Patient is 17 years of age received a first dose of the Moderna vaccine in error at a different facility. Per CDC guidance he was provided a second dose of the Moderna vaccine today to complete the two dose series. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1344633-1 | The patient was under the FDA approved age to receive this vaccine. Patient DOB was not verified and vaccine was provided. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1347071-1 | No symptoms, reporting vaccine of under 18 year old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351265-1 | Patient does not meet minimum age to receive pfizer vaccine, but received it anyway. No adverse events noted during 15 minute waiting period. Registrar acknowledged patient was 11 and EMR did not let registrar check patient in due to age requirement, but registrar sent through anyway. Vaccinator did not notice patient was underage when vaccinated. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351643-1 | Patient too young, family aware and will follow up with Peds for further guidance on second dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351655-1 | too young to get Moderna, family aware and will follow up with peds for guidance on second dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351665-1 | Too young for Moderna, family aware and peds to decide about guidance on second dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351709-1 | Given Moderna vaccine too young, peds to confirm her second dose guidance. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351718-1 | Patient received Moderna when he was too young, peds to follow up for next dose guidance. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
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| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1351728-1 | Patient too young for Pfizer, DOB incorrect. Family/patient updated, follow up with peds on guidance for second dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1357963-1 | Pfizer Vaccine administered to individual under 12 years old; vaccine is only authorized for 12+. No adverse event/outcomes noted. Parents of children misrepresented their age when making the children appointments to get the vaccine. Registration noticed the children were under 12 years old when they were looking at second dose scheduling and noticed duplicate accounts with same info but different ages. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1357984-1 | Pfizer Vaccine administered to individual under 12 years old; vaccine is only authorized for 12+. No adverse event/outcomes noted. Parents of children misrepresented their age when making the children appointments to get the vaccine. Registration noticed the children were under 12 years old when they were looking at second dose scheduling and noticed duplicate accounts with same info but different ages. Per CDC and OHA guidance, second dose will not be administered. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1361218-1 | "Patient administered before vaccine before she is eligible. She is 11. Patient's father took her to get vaccine and, according to her mother, ""lied about her age"". Patient subsequently administered 1st dose of Covid-19 vaccine before meeting age eligibility requirements. Patient has NOT suffered any physical S/S and/or other side-effects of vaccine." |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1365022-1 | The patient did not meet the age requirement per agency. The patient is 17 years old and not 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1365124-1 | Parent and Patient put down on the consent form that the patient's birthday was date, making them 12 years old. The immunization records show the patient's birthday is date, making them 11 years old. The new FDA age limit for the Pfizer vaccine is 12 years old. The patient does not meet the age limit per the FDA. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1365138-1 | The parent put down on the patient's form that the child's birthdate was date, making the child 12 years old. The immunization records show the child's birthdate is date, making the child 11 years old and not meeting the age limit per the FDA. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1365158-1 | Pt is 15 years old at time of 1st dose of vaccination. Moderna vaccine to give to those older than 18 years old. Per CDC website okay to proceed with 2nd dose of Moderna, must notify VAERS and PT's parents. Both complete. New methods implented in clinic to insure this does not occur again. MA |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1367920-1 | Error: Patient Too Young for Vaccine Administered |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1368495-1 | Second dose given with Peds approval for Moderna despite under age for use. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1371990-1 | Patient was given the Janssen Vaccine, and is only 16 years old. This vaccine has only been given Emergency Use Authorization for individuals 18yr and older. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1374683-1 | MEDICATION ERROR NOTE 5/30/2021 Patient is a 17 y.o. the young man who on 5/03/21 per chart review received the Moderna vaccine, despite being 17 years old. I was notified by the site lead and pharmacist lead that this patient would receive the second dose of Moderna today, given that he has already had one dose, he does not have low weight, and is almost 18 years old. I concur with this decision. The mother agreed with the decision. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1378804-1 | Mother of the parent provided incorrect date of birth. Patient not eligible to receive the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1378816-1 | The mother of the child wrote down on the consent and screening form that the child's date of birth was 11/3/2008. This would make the child 12 years of age and eligible to receive the vaccine. The immunization record system has that the child's date of birth is 11/3/2021, making the child 10 years old and not eligible to receive the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1378822-1 | The mother of the child wrote on the consent form that the date of birth for the child was 11/3/2008, which would make the child 12 years old and eligible to receive the vaccine. The immunization records show the date of birth is 11/3/2010, making the child 10 years of age and not eligible to receive the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1382323-1 | JANSSEN SHOT WAS GIVEN TO 15YO |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1385221-1 | The patient is 15 years old and received the Moderna vaccine which is approved for EUA for ages 18 and above. The patient had no symptoms post shot. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1385240-1 | The patient is 17 years old and received the Moderna vaccine, which is only authorized for patients 18 years and above. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1386143-1 | It was unknown by staff at the time of incident that patient is only 16, not the eligible age of 18. |
| PRODUCT ADMINISTERED TO PATIENT OF | COVID19 VACCINE (COVID19) | 1386212-1 | Pt was too young to receive the Moderna vaccine |

| INAPPROPRIATE AGE Symptoms | COVID19 Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1386356-1 | No adverse reactions occurred. Patient was given the vaccine too early at age 11 years old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1388081-1 | patient inadvertently given Moderna vaccine at age less than 18 years |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1389162-1 | Moderna administered instead of Pfizer (Moderna not authorized for age group) |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1389772-1 | This is the 2nd dose of moderna covid vaccine for this patient. The patient is 16 years old and received moderna vaccine which is not indicated for her age. she is not experiencing any adverse events. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1392780-1 | Vaccine given to patient under 18 years old |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1392823-1 | The patient was 16 years old when they received their first Moderna vaccine. Because they had received their first dose, we used the off label direction from CDC to provide the second dose of Moderna. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1396561-1 | The patient is younger than the EUA approved age of 18. Patient is 17 years old and should not have received the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1400231-1 | Patient's parent put the wrong date of birth on the form. When billed to the insurance we were informed this was incorrect, and the patient's actual birthday is different than listed on the form, which is under the recommendation for Pfizer. We will contact the primary care physician with this information to inform of the discrepancy and proceed with their recommendations for further action. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1408650-1 | PATIENT IS UNDERAGE. LOOKED UP RECOMMENDATION ON CDC WEBSITE. PATIENT STILL ADVISED TO GET 2ND DOSE OF MODERNA. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1417998-1 | Mother was explain that moderna vaccine was not indicated for patients age group. She understands the CDC guideliness and agrees to proceed with second covid vaccine. No adverse reaction reported |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1423455-1 | Pt got 1st dose of Moderna COVID-19 vaccine on 5/19/21. When she came in the DOB 5/19/21 was listed as 10/28/2001. When she came in for her 2nd dose appt. Our technician found her actual DOB was 10/28/2004. Pt too young for Moderna vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1424088-1 | presented for Pfizer Covid vaccine, mother wrote on patient paperwork patients DOB, after administering vaccine it was realized that this was incorrect, making patient too young to receive Covid vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1431129-1 | She was 16 years old and received a Moderna dose on 1/22/21. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1431179-1 | "Both Moderna doses were given at age 17. Per Alert, first Moderna dose was given on 1/22/21 and second Moderna dose was given on 2/24/21 and states ""Not Valid"" for both." |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1443480-1 | The vaccine was given to a 16 year old. Moderna is for 18 years and older. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1454154-1 | Patient came with mom for COVID 19 vaccination. Mom and daughter both gave patient's age, patient reported age as 12., but actual making her eleven years old at age of vaccination. This was discovered through audit of medical records. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1454545-1 | Administration Error: This patient was 17 years old and received a Moderna vaccine (approved for 18 years and older). Patient was seen by PCP in clinic for annual wellness exam. Covid vaccine was offered and he agreed. PCP placed an order in chart for Moderna. No alert generated. Moderna was administered and no adverse effects were noted. Patient will proceed to get Moderna for dose #2 later this month. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1454584-1 | Administration error: 1st dose Moderna vaccine given to a 17 year old during annual wellness exam in clinic (not yet approved for use under 18 years). No adverse effects noted and per CDC guidance, will proceed with Moderna for dose #2. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1455758-1 | Patient less than approved age of 12 yo. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1455760-1 | Patient less than approved age of 18. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1470382-1 | "First dose was given too early/too young, states "" Not Valid"". On paperwork person wrote DOB 05-16-2009, but was found DOB 06-16-2009." |

| INAPPROPRIATE AGE Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1470405-1 | RN Vaccinator did not note patients birthdate which indicated she was 17 years and not eligible to receive the Jansen vaccine. There were no adverse after effects noted. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1478551-1 | Administration Error: 17 year old patient received a 1st dose Moderna (indicated at this time for 18 years and older). No adverse effects were noted in the immediate observation phase. Patient has not yet received dose #2, but we will recommended a second dose with Moderna per current recommendations. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1487311-1 | Client's guardian reported wrong date of birth on two separate occasions, 6/17 and 7/15. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1499504-1 | Vaccine was administered. It appears that the parent may have intentionally given the wrong DOB in order to obtain a vaccine for their 11 year old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1502753-1 | Pt Mother provided wrong date of birth for pt. she is currently 11 years old and has received both doses of Pfizer vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1519611-1 | patient parent informed vaccinating staff that pt DOB was 1/23/2009 which would have made her 12 years old and eligible to receive Pfizer Covid-19 vaccine. upon reviewing Alert iis- pt DOB is 1/23/2010 pt was 11 when given the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1519983-1 | No adverse event. Mother brought in patient and told us his date of birth was 10/11/2008. Administering pharmacist then went to confirm with Mom patient's age because he appeared young, had no insurance and no immunization history in the state. Mom confirmed patient's DOB was 10/11/2008 and that he was 12 years old. She was informed it was only approved for down to age 12 and she confirmed that patient met requirement. After administration we found an immunization history in the ALERT Registry for the patient with same name and same address, but a DOB of 10/11/2010 and learned that patient is very likely only 10 years old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1526196-1 | Client's father requested Pfizer 0.3 mL first dose. Client received Moderna 0.5 first dose instead. Client was observed for 30 minutes by RN. Client did not present with any signs or symptoms of an untoward response or reaction to the Moderna first dose. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1528832-1 | Parent/guardian lied about the age of the child in order to get the child vaccinated against COVID-19. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1528850-1 | Person received their first dose of Moderna by another provider. We used the off label guidance from CDC to complete the series even though they were under approved age. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1528853-1 | Parent/guardian lied about the child's age on both the first and second dose. Child was not approved per the guidance. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1531844-1 | The patient was vaccinated 1 day after the EUA was approved for use in 12 to 15 year olds, however the pharmacy corporate team had yet to update our our protocol hence requiring submission of this report. Patient was vaccinated at a pharmacy. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1532242-1 | Atregistration for this drive-through event in Oregon, site lead and employee identified the patient as being under 18 years of age. The patient's mother, was therefore provided with paperwork to fill out for her son, to receive the first dose of the Pfizer COVID-19 vaccine. At the vaccination station, RN, spoke with Pt mother about vaccine side effects, answered several questions, and reviewed pt health history. She was drawing up the Pfizer vaccine when another nurse came over and told her that the patient's mother wanted him to have the Jansen vaccine. (see continuation page for additional details) |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1537423-1 | Patient age of 15 got Moderna shot. Patient did not have any adverse reactions after the shot |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1549627-1 | NO ADVERSE EVENT OR REACTION. SHOT GIVEN OUTSIDE OF APPROVED PROTOCOL DUE TO FATHER LYING ON ADMINISTRATION FORM AND TO ADMINISTERING PHARMACIST REGARDING HIS DAUGHTERS BIRTHDAY. HE CLAIMED SHE WAS 12 WHEN IN REALITY SHE IS 10. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1569307-1 | Patient/Father lied about DOB and consequently the pharmacist to an 11 year old when pfizer is only approved for 12 and up. Patient reports no adverse effects from vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1578351-1 | vaccinated a 16-year-old at a Moderna Vx site. No adverse outcomes at this time. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1578661-1 | Medication error, Pt 13 years old, was given Moderna vaccine instead of Pfizer vaccine. Pt has no adverse reaction to the Moderna vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1587228-1 | Too young to receive the vaccine |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1587345-1 | Moderna vaccine was unnoticeable given to the 17 years old patient |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1599194-1 | administration to 17 year old patient; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administration to 17 year old patient) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 008B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history.). On 24-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 24-Mar-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administration to 17 year old patient). On 24-Mar-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administration to 17 year old patient) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No treatment information was provided.; Sender's Comments: This report refers to a case of product administered to patient of inappropriate age (17 year old male) for mRNA-1273 (lot number 008B1A) with no associated AEs reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1600860-1 | received first dose at seventeen years of age; concerned and freaked out; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (received first dose at seventeen years of age) and FEELING ABNORMAL (concerned and freaked out) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for an unknown indication. The patient's past medical history included No adverse event (No medical history reported). On 30-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 30-Mar-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (received first dose at seventeen years of age) and FEELING ABNORMAL (concerned and freaked out). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (received first dose at seventeen years of age) and FEELING ABNORMAL (concerned and freaked out) outcome was unknown. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. Concomitant medication history not reported by reporter. Treatment information is not provided |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1601148-1 | 17 year old daughter received the first dose of the vaccine; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 year old daughter received the first dose of the vaccine) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. Concomitant products included IBUPROFEN for an unknown indication. On 26-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 26-Mar-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 year old daughter received the first dose of the vaccine). On 26-Mar-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 year old daughter received the first dose of the vaccine) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. No treatment information was provided.; Sender's Comments: This report refers to a case of product administered to patient of inappropriate age (17 year old female) for mRNA-1273 (lot number 016B21A) with no associated AEs reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1601961-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose; Received Moderna vaccine at 16 years of age; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Received Moderna vaccine at 16 years of age) and INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Received Moderna vaccine at 16 years of age). On an unknown date, the patient experienced INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose). On 22-Jan-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Received Moderna vaccine at 16 years of age) had resolved. At the time of the report, INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. No concomitant drug details was provided. No treatment drug was provided. This case was linked to MOD-2021-065366, MOD-2021-210740, MOD-2021-210713 (Patient Link).; Sender's Comments: This report refers to a case of product administered to patient of inappropriate age (16 year old) and Inappropriate schedule of vaccine administration for second dose for mRNA-1273 (lot number unknown) with no associated AEs. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1601977-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .; 14 years of age and received the Moderna vaccine; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (14 years of age and received the Moderna vaccine) and INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) in a 14-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (14 years of age and received the Moderna vaccine). On an unknown date, the patient experienced INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .). On 22-Jan-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (14 years of age and received the Moderna vaccine) had resolved. At the time of the report, INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. This report refers to a case of Product administered to patient of inappropriate age and Inappropriate schedule of product administration, for mRNA-1273, lot # unknown, with no associated AEs.; Sender's Comments: This report refers to a case of Product administered to patient of inappropriate age and Inappropriate schedule of product administration, for mRNA-1273, lot # unknown, with no associated AEs. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1603526-1 | 17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. No Medical History information was reported. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. The patient did not experience any adverse event symptoms and no treatment was administered. This report refers to a case of product administered to patient of inappropriate age, for mRNA-1273, lot: 016B21A, with no associated adverse events. This case was linked to US-MODERNATX, INC.-MOD-2021-067217, US-MODERNATX, INC.-MOD-2021-067645, US-MODERNATX, INC.-MOD-2021-067250, US-MODERNATX, INC.-MOD-2021-067547 (E2B Linked Report). Most recent FOLLOW-UP information incorporated above includes: On 17-May-2021: Patient was not Pregnant during vaccination, No adverse event deleted as relevant history.; Sender's Comments: This report refers to a case of product administered to patient of inappropriate age, for mRNA-1273, lot: 016B21A, with no associated adverse events. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1603543-1 | Seventeen year old received vaccine; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Seventeen year old received vaccine) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event (No medical history reported.). On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Seventeen year old received vaccine). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Seventeen year old received vaccine) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant product use was provided. Treatment information was not available.; Sender's Comments: This report refers to a case of Product administered to patient of inappropriate age, for mRNA-1273, lot #: 016B21A , with no associated AEs. US-MODERNATX, INC.-MOD-2021-067250:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067510:Cross link, same reporter US-MODERNATX, INC.-MOD-2021-067198:Crosslinked cases |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1603572-1 | 17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. The patient did not experience any adverse event symptoms and no treatment was administered. This report refers to a case of product administered to patient of inappropriate age, for mRNA-1273, lot #: 016B21A, with no associated AEs. This case was linked to US-MODERNATX, INC.-MOD-2021-067510, US-MODERNATX, INC.-MOD-2021-067198, US-MODERNATX, INC.-MOD-2021-067547, US-MODERNATX, INC.-MOD-2021-067645, US-MODERNATX, INC.-MOD-2021-067217 (E2B Linked Report).; Sender's Comments: This report refers to a case of product administered to patient of inappropriate age, for mRNA-1273, lot #: 016B21A, with no associated AEs. US-MODERNATX, INC.-MOD-2021-067510:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067198:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067547:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067645:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067217:Crosslinked cases |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1603784-1 | 17-year-old patient was inadvertently administered Moderna Covid-19 vaccine; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17-year-old patient was inadvertently administered Moderna Covid-19 vaccine) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. No Medical History information was reported. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17-year-old patient was inadvertently administered Moderna Covid-19 vaccine). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17-year-old patient was inadvertently administered Moderna Covid-19 vaccine) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. Treatment medications were not provided. This case was linked to US-MODERNATX, INC.-MOD-2021-067198, US-MODERNATX, INC.-MOD-2021-067250, US-MODERNATX, INC.-MOD-2021-067645, US-MODERNATX, INC.-MOD-2021-067217, US-MODERNATX, INC.-MOD-2021-067547 (E2B Linked Report).; Sender's Comments: US-MODERNATX, INC.-MOD-2021-067198:Cross link, same reporter US-MODERNATX, INC.-MOD-2021-067250:Cross link, same reporter US-MODERNATX, INC.-MOD-2021-067645:Cross link, same reporter US-MODERNATX, INC.-MOD-2021-067217:Cross link, same reporter US-MODERNATX, INC.-MOD-2021-067547:Cross link, same reporter |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1603841-1 | 17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine) in a 16-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. No Medical History information was reported. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. No treatment information was provided. This case was linked to US-MODERNATX, INC.-MOD-2021-067198, US-MODERNATX, INC.-MOD-2021-067510, US-MODERNATX, INC.-MOD-2021-067250 (E2B Linked Report).; Sender's Comments: US-MODERNATX, INC.-MOD-2021-067198:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067250:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067510:Cross link, same reporter |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1603927-1 | inappropriate age at vaccine administration; This spontaneous case was reported by a physician and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (inappropriate age at vaccine administration) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (inappropriate age at vaccine administration). Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. This case was linked to MOD21-069804, MOD21-069810, MOD21-069811, MOD21-069812, MOD21-069813, US-MODERNATX, INC.-MOD-2021-067198, US-MODERNATX, INC.-MOD-2021-067250 (E2B Linked Report).; Sender's Comments: MOD21-069804: MOD21-069810: MOD21-069811: MOD21-069812: MOD21-069813: US-MODERNATX, INC.-MOD-2021-067198:Crosslinked cases US-MODERNATX, INC.-MOD-2021-067250:Crosslinked cases |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1604125-1 | This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Vaccine inadvertently administered to patient <18yrs of age) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) at an unspecified dose. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Vaccine inadvertently administered to patient <18yrs of age). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medications were provided to the patient. No treatment details were provided. This case was linked to MOD21-070436, MOD21-069812, MOD21-069804, MOD21-069810, MOD21-069811, MOD21-069813, MOD21-069814, MOD21-070440, US-MODERNATX, INC.-MOD-2021-072886. Sender's Comments: MOD21-070436: MOD21-069812: MOD21-069804: MOD21-069810: MOD21-069811: MOD21-069813: MOD21-069814: MOD21-070440: US-MODERNATX, INC MOD-2021-072886. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1604208-1 | Deviation from recommended age group; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. No Medical History information was reported. On 01-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group) had resolved. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No relevant concomitant medications were reported. No treatment information was provided. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1604431-1 | 17 years of age, were inadvertently administered the Moderna COVID-19 vaccine; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 vaccine) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 vaccine). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 years of age, were inadvertently administered the Moderna COVID-19 vaccine) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. no concomitant medications reported. no treatment details reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1604446-1 | Deviation from recommended age group; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group) in a 16-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. No Medical History information was reported. On 01-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. This case was linked to MOD21-069812, MOD21-069804, MOD21-069810, MOD21-069811, MOD21-069813, MOD21-069814, MOD21-070440 (E2B Linked Report).; Sender's Comments: MOD21-069812: MOD21-069804: MOD21-069810: MOD21-069811: MOD21-069813: MOD21-069814: MOD21-070440: |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1604536-1 | injection to pediatric patient; This spontaneous case was reported by a nurse and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (injection to pediatric patient) in a 16-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 037A21B) for COVID-19 vaccination. No Medical History information was reported. On 06-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (injection to pediatric patient). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (injection to pediatric patient) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. In events they reported as updated contact information. No concomitant medication were provided. No treatment details were provided. Most recent FOLLOW-UP information incorporated above includes: On 13-Jul-2021: follow up received , updated contact information |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1605868-1 | Deviation from recommended age group; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 016B21A) for COVID-19 vaccination. The patient's past medical history included No adverse event. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group). On 03-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Deviation from recommended age group) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. 17 years of age, were inadvertently administered the Moderna COVID-19 Vaccine due to the change to the eligibility criteria announced by the authority This case was linked to MOD21-069804, MOD-2021-068273, MOD21-069810 (E2B Linked Report).; Sender's Comments: MOD21-069804:Crossed linked MOD-2021-068273:Crossed linked MOD21-069810:Crossed linked |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1608090-1 | 17 yr old patient received first dose; This spontaneous case was reported by a physician and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 yr old patient received first dose) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 027B21A) for COVID-19 vaccination. No Medical History information was reported. On 13-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 13-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 yr old patient received first dose). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17 yr old patient received first dose) outcome was unknown. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1613495-1 | 17year old received Moderna COVID-19 vaccine; This spontaneous case was reported by a physician and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17year old received Moderna COVID-19 vaccine) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 007C21A and 016B21A) for COVID-19 vaccination. No Medical History information was reported. On 03-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 01-May-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 01-May-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17year old received Moderna COVID-19 vaccine). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (17year old received Moderna COVID-19 vaccine) had resolved. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant Medications were not provided by the reporter. Treatment Information was not provided by the reporter. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1613701-1 | First dose given at 17 years of age; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (First dose given at 17 years of age) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 003B21A) for COVID-19 vaccination. Concomitant products included FLUTICASONE PROPIONATE (FLOVENT) for Asthma. On 13-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 13-Apr-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (First dose given at 17 years of age). On 13-Apr-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (First dose given at 17 years of age) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. No treatment medications provided |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1613757-1 | 16 year old received the first dose vaccine; This spontaneous case was reported by a physician (subsequently medically confirmed) and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (16 year old received the first dose vaccine) in a 16-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 041B21A) for COVID-19 vaccination. No Medical History information was reported. On 04-May-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 04-May-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (16 year old received the first dose vaccine). On 04-May-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (16 year old received the first dose vaccine) outcome was unknown. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medication were reported. No treatment medication were reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1614221-1 | First dose administered to a 17 yr old Pediatric patient; This spontaneous case was reported by a physician and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (First dose administered to a 17 yr old Pediatric patient) in a 17-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse reaction. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (First dose administered to a 17 yr old Pediatric patient). At the time of the report, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (First dose administered to a 17 yr old Pediatric patient) outcome was unknown. Not Provided The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1622239-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .; Recieved Moderna vaccina at 16 years of age; This spontaneous case was reported by a consumer and describes the occurrence of INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved Moderna vaccina at 16 years of age) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved Moderna vaccina at 16 years of age). At the time of the report, INAPPROPRIATE SCHEDULE OF PRODUCT ADMINISTRATION (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved Moderna vaccina at 16 years of age) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. No concomitant medication reported No treatment information was provided This case was linked to MOD-2021-065366 (Patient Link). |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1622240-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .; Recieved moderna vaccine at 16 years of age; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT DOSE OMISSION ISSUE (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved moderna vaccine at 16 years of age) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced PRODUCT DOSE OMISSION ISSUE (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved moderna vaccine at 16 years of age). On 22-Jan-2021, PRODUCT DOSE OMISSION ISSUE (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recieved moderna vaccine at 16 years of age) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. No concomitant medications were reported. No treatment medications were reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1623048-1 | Error: Patient Too Young for Vaccine Administered- |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1628565-1 | none |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1633796-1 | Mom lied to us about daughters age. Pfizer covid is only approved for 12 and older. Mom lied saying daughter was 12, but we figured out daughter was only 11 years old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1643330-1 | Pounding headache; Underage received vaccine; This spontaneous case was reported by a nurse and describes the occurrence of HEADACHE (Pounding headache) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Underage received vaccine) in a 17-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 007C21A) for COVID-19 vaccination. No medical history was provided by the reporter. Concomitant products included ETHINYLESTRADIOL, NORGESTIMATE (SPRINTEC) for Birth control. On 25-May-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 25-May-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Underage received vaccine). On 26-May-2021, the patient experienced HEADACHE (Pounding headache). The patient was treated with IBUPROFEN for Headache, at an unspecified dose and frequency. On 25-May-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Underage received vaccine) outcome was unknown. At the time of the report, HEADACHE (Pounding headache) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1674810-1 | Patient was administered the Moderna vaccine. patient is 15 years of age and should have received Pfizer vaccine. No adverse events or symptoms reported by patient. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1676794-1 | Patient under age |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1679755-1 | Pt gave birthdate a year later than birthdate given in the medical record. Possibility exists pt was 11 instead of 12 years when given first dose of Pfizer. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1683215-1 | Patient DOB on form was incorrect and patient was underage. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|---|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1691939-1 | A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use; This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use) in a 15-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 025C21A) for COVID-19 vaccination. No Medical History information was reported. On 04-Aug-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) .5 milliliter. On 04-Aug-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use). On 04-Aug-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medications were reported No treatment medications were reported. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1707043-1 | This spontaneous case was reported by a pharmacist and describes the occurrence of VACCINATION SITE PAIN (sore arm) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administered first shot to a 16-year-old) in a 16-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 058E21A) for COVID-19 vaccination. No Medical History information was reported. On 27-Aug-2021 at 2:30 PM, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. In August 2021, the patient experienced VACCINATION SITE PAIN (sore arm). On 27-Aug-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administered first shot to a 16-year-old). On 27-Aug-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administered first shot to a 16-year-old) had resolved. At the time of the report, VACCINATION SITE PAIN (sore arm) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medications was reported. No treatment drug details was reported. Most recent FOLLOW-UP information incorporated above includes: On 08-Sep-2021: Follow up received on 08-sep-2021 and contains no new information. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1715690-1 | No adverse event noted. Patient too young to receive Janssen and RN administered in error. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1715700-1 | Patient not eligible for Janssen based on age. RN vaccinated not knowing age restrictions. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1716101-1 | "Patient wrote ""19"" on his immunization consent form and upon billing, we realized it was not ""19"" but ""15"". He had already received his dose." |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1719444-1 | Not 18 yet. No adverse event |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1743489-1 | OFF LABEL USE; VACCINE ADMINISTERED TO A MINOR; This spontaneous report received from a pharmacist concerned a 12 year old male. The patient's weight was 280 pounds, and height was 74 inches. No past medical history or concurrent conditions were reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 202A21A, expiry: UNKNOWN) dose was not reported, administered on 17-SEP-2021 for prophylactic vaccination. No concomitant medications were reported. On 17-SEP-2021, the patient experienced off label use. On 17-SEP-2021, the patient experienced vaccine administered to a minor. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome of the off label use and vaccine administered to a minor was not reported. This report was non-serious. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1753781-1 | Patient was underage when received the vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1768947-1 | Patient was only 16 years old when she received Moderna vaccine |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1775320-1 | The patient, who is 16 years of age, was given Moderna vaccine in error. She should have received the Pfizer vaccine. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1777025-1 | Patient was administered prior to age verification. Janssen vaccine is not indicated for this patients <18. Pharmacy didnt realize this until entering medication into EHR and the alert send the reminder. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1779358-1 | no adverse events the only issue is vaccine given at a not recommended age, patient age at the time 17 yrs old and vaccine age recommended at 18 yrs old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1779385-1 | no adverse event, vaccine given at a not recommended age. patient 17yrs old when vaccine is recommended at 18yrs old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1782461-1 | no adverse events, patient only received vaccine at a not recommended age, pt was 17yrs old and moderna is recommended at 18 yrs old. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1782485-1 | no adverse events, patient 17yrs old and moderna vaccine recommended at 18yrs old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1782534-1 | no adverse event, pt was 17yrs old when moderna vaccine is recommended at 18yrs old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1782619-1 | No adverse events, pt was 17yrs old, when moderna is recommended for 18yrs old. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1783790-1 | THE PARENTS LIED ABOUT THE DAUGHTER AGE REAL DOB IS 7/6/2010 BUT STATED ON CONSENT FORM AS OF 7/6/2009. Pt RECEIVED BOTH DOSES OF PFIZER COVID VACCINE. Local COUNTY PUBLIC HEALTH INFORMED US ABOUT THE PATIENT AGE. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1815181-1 | We gave a Moderna shot to a 12 years old who is not eligible for the shot. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1829440-1 | Client is 17. No standing order for giving under 18 years old |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1837431-1 | This patient was given a booster dose when he is not 18 years of age, he was 17 at the time of immunization. Not immunocompromised per screening paper. |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1848345-1 | A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use; This case was received via an unknown source (no reference has been entered for a health authority or license partner) on 28-Oct-2021 and was forwarded to Moderna on 29-Oct-2021. This spontaneous case was reported by a pharmacist and describes the occurrence of PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use) in a 15-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 051C21A) for COVID-19 vaccination. The patient's past medical history included Painful ankle and Drug use disorder (History of Drug Use). Concurrent medical conditions included Drug allergy (Tylenol) and Obesity (on 15-02-2020 the weight was 102.4kg on 04-08-2021 the weight was 133.4kg). On 02-Sep-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 02-Sep-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use). On 02-Sep-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (A 15 year old patient was administered 1st dose of Moderna vaccine/Off-label use) had resolved. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 08-Apr-2021, Blood pressure measurement: elevated (High) ELEVATED BLOOD PRESSURE. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant and treatment medications was not reported. This case was linked to MOD-2021-303426 (Patient Link). |
| PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE | COVID19 VACCINE (COVID19) | 1854938-1 | Pt was under 18 and was given Moderna covid vaccine |
| PRODUCT ADMINISTRATION ERROR | COVID19 VACCINE (COVID19) | 1030730-1 | The patient was administered the Moderna vaccine before the age of 18, which is off-label use according to the. She was told to vaccinate by her PCP due to multiple chronic conditions and had a doctor's note, but it should not have been administered at age 17. The patient and her parent reported no adverse reactions to the actual vaccination. The VAERS report is being filed because it was an administration error for dose #1. |
| PRODUCT ADMINISTRATION ERROR | COVID19 VACCINE (COVID19) | 1123250-1 | This is a 17 year old male that received the Janssen vaccine, which is approved for 18 years and older. VAERS being completed to document an administration error (wrong age). In this case, a Home Health nurse was administering the Janssen vaccine to a homebound patient per our program to vaccinate those high-risk seniors that are homebound, as well as their in-home caregivers. During a visit to vaccinate the homebound senior, this 17 year old was also vaccinated without detected the wrong-age error. Following administration, the vaccine information was being input into ALERT and the age error was detected and reported. No adverse effects noted for the patient. |
| PRODUCT ADMINISTRATION ERROR | COVID19 VACCINE (COVID19) | 1317803-1 | Administration Error: this is a 16 year old that received the J&J vaccine (approved for ages 18 and over only). In this event, the patient attended a vaccine clinic with a family member and was added on to the schedule as a 'walk-in' appointment at the parent's request. The patient received the vaccination before they were processed in the computer. After administration during the electronic documentation, the patient's age was flagged and the error discovered. The parent and patient were advised of the age-related error, and the patient had no adverse effects in the immediate observation period. |
| PRODUCT ADMINISTRATION ERROR | COVID19 VACCINE (COVID19) | 1328538-1 | This was an administration error rather than adverse event. RN who provided the patient the vaccine first poked patient with empty syringe, then had to draw up an actual dose and re-administer. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------------|---------------------------|---------------------------|--|
| PRODUCT DOSE OMISSION ISSUE | COVID19 VACCINE (COVID19) | 1622240-1 | missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .; Recived moderna vaccine at 16 years of age; This spontaneous case was reported by a consumer and describes the occurrence of PRODUCT DOSE OMISSION ISSUE (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recived moderna vaccine at 16 years of age) in a 16-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Jan-2021, the patient experienced PRODUCT DOSE OMISSION ISSUE (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recived moderna vaccine at 16 years of age). On 22-Jan-2021, PRODUCT DOSE OMISSION ISSUE (missed 2nd dose,its almost 9 weeks and 2 days passed after the 1st dose .) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (Recived moderna vaccine at 16 years of age) had resolved. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. No concomitant medications were reported. No treatment medications were reported. |
| PRODUCT PREPARATION ERROR | COVID19 VACCINE (COVID19) | 1291889-1 | Error: Diluent Administered Instead of Vaccine |
| PRODUCT PREPARATION ERROR | COVID19 VACCINE (COVID19) | 1427945-1 | COVID vaccine vial was inadvertently diluted with 0.8ml diluent instead of 1.8ml. Error was discovered when 3rd dose from vial was drawn up and it was found that there were no doses left in vial. |
| PRODUCT PREPARATION ERROR | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1319477-1 | This writer was drawing up 2 doses of Pfizer for this patient and their sibling. For one of these patients, I had to open a new Pfizer vial, but accidentally drew up the whole vial without reconstituting with 1.8 mL of water. As a result, one of the two siblings received a dose that was supposed to be worth 6 doses of the Pfizer vaccine. I contacted the patients' father 15 minutes later, who stated that the patients were doing okay and reported no symptoms. I also reported this incident to a district manager. Per my manager, I informed the patients' father about what happened, asked him to monitor his children for symptoms, and report to the ED if the experience anything severe. I also told them that this dose would not be valid and they would have to return to the pharmacy to have their 1st dose dose again. He understood and accepted this information. Bottom line, there was no actual symptoms reported, but I am concerned about the higher dose either of these kids (12 year-old female & 15 year-old male) may have received and pray they will be okay. |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1319593-1 | This writer was drawing up 2 doses of Pfizer for this patient and their sibling. For one of these patients, I had to open a new Pfizer vial, but accidentally drew up the whole vial without reconstituting with 1.8 mL of water. As a result, one of the two siblings received a dose that was supposed to be worth 6 doses of the Pfizer vaccine. I contacted the patients' father 15 minutes later, who stated that the patients were doing okay and reported no symptoms. I also reported this incident to a district manager. Per my manager, I informed the patients' father about what happened, asked him to monitor his children for symptoms, and report to the ED if the experience anything severe. I also told them that this dose would not be valid and they would have to return to the pharmacy to have their 1st dose dose again. He understood and accepted this information. Bottom line, there was no actual symptoms reported, but I am concerned about the higher dose either of these kids (12 year-old female & 15 year-old male) may have received and pray they will be okay. |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1427906-1 | COVID vaccine vial inadvertently mixed with only 0.8ml diluent instead of 1.8ml. full 0.3ml given as injection. This was discovered after patient had left the clinic. Error discovered after 3 doses given that there was not enough in vial to provide 3 more doses. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------------|---------------------------|---------------------------|--|
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1459993-1 | Patient received dose of vaccine that was not diluted properly, diluted with .18ml diluent rather than 1.8ml. Administered 0.3ml dose to patient, however dose was more concentrated than should have been. Peds doctor of the day Dr. consulted. She spoke with Peds infectious disease Dr. who said no additional concern for reaction or side effects, no additional monitoring or follow-up required. Patient should receive second dose as scheduled. Parent informed of extra concentrated dose given. No adverse effects or reaction noted. |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1509887-1 | Administered a vaccine that was diluted incorrectly |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1509908-1 | Pfizer covid-19 vaccine diluted incorrectly and administered to patient |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1628353-1 | No adverse effects reported at this time. Patient received Pfizer COVID-19 vaccine with insufficient diluent, leading to multiple doses administered. Patient informed of error and advised to monitor for side effects per CDC guidance, and contact clinic if questions or concerns. |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1662839-1 | Vaccine was reconstituted incorrectly. 0.8ml instead of 1.8ml of diluent was used. 3 patients received the higher concentrated doses. patients were notified. No adverse reactions have been reported. |
| PRODUCT PREPARATION ISSUE | COVID19 VACCINE (COVID19) | 1662847-1 | Vaccine was reconstituted incorrectly. 0.8ml instead of 1.8ml of diluent was used. 3 patients received the higher concentrated doses. patients were notified. No adverse reactions have been reported. |
| PROTEIN TOTAL INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo was done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| PROTHROMBIN TIME PROLONGED | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| PROTHROMBIN TIME PROLONGED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| PRURITUS | COVID19 VACCINE (COVID19) | 1346824-1 | Patient received above noted COVID19 Vaccine on Friday morning and reported symptoms starting Saturday morning. Symptoms include lip swelling, lip rash, and erythema only affected the lip area of the face. Symptoms have persisted for 3 days and that is when the pharmacy was contacted. Mother has given Benadryl to patient to help with itching/swelling. Pharmacist recommended close monitoring for worsening symptoms and to follow-up with primary care provider for further guidance. |
| PRURITUS | COVID19 VACCINE (COVID19) | 1371771-1 | small dots on skin that look a bit like Petechiae. This is on her left mid-thigh. She also had very itchy nose and ears. |
| PRURITUS | COVID19 VACCINE (COVID19) | 1415425-1 | My child began feeling tired and ran a temperature about a degree warmer than usual for the first three days after his second COVID vaccine on Sunday 13 June. (So Monday, Tuesday, Wednesday). Thursday he was extra tired and began to complain of itching under the chin in the evening. Friday morning he woke up and had what he described as itchy/painful raised, red patches of skin on his right collarbone, under his chin, across his face (right cheek, temple). His temperature was about 100* and he was, quite frankly, pretty miserable. These weren't little skin irritations, they were giant patches of inflamed tissue covering the better part of each cheek, his temple, under the chin and then in smaller spots on his collarbones and back. Saturday the rash moved to cover the left side of his face, and the left collarbone. (And no, for the record, I did not switch laundry detergents, change his diet or anything like that.) As of today, 6/21 condition has improved but not fully resolved. |
| PRURITUS | COVID19 VACCINE (COVID19) | 1536269-1 | Developed reactions to cold in the form of hives, large welts, and swelling of the lips. First reaction was a softball size welt on June 25th after icing sore elbow. Now any contact with chilled or iced items produces welts, swelling, and itching. Contact with cold river water while rafting August 8 produced hives over entire body. Contact with ice cream on 8/7 produced swollen lips. Very concerned as my daughter is a competitive swimmer. While the first notable welt on elbow, was approximately 9 days after 2nd vaccine, she said she noticed an itchy sensation when exposed to cold at some point prior to this but never before 2nd vaccine. |
| PRURITUS | COVID19 VACCINE (COVID19) | 1704744-1 | Mom called 9/1/2021 stating that patient was experiencing hives and itching on his chest and back post COVID 1st dose. She said that at the time he had a bright red welt at vaccine site. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---------------------|---------------------------|---------------------------|---|
| PSYCHOGENIC SEIZURE | COVID19 VACCINE (COVID19) | 1260022-1 | Patient presents with a potential reaction to the COVID19 vaccine. I was called to the patient's vehicle just outside the vaccination area. The patient appeared to having a moderate to severe vasovagal episode without total syncope. There did appear to be slight pseudoseizure activity present, however, there was no LOC or loss of bowel or bladder tone. The patient was placed in a supine position and moved to the monitoring area. With positional changes and aggressive hydration, he rapidly improved to baseline. He did endorse that he has had similar episodes with blood draws, etc. He was returned home with his mother as the driver and with preventative instructions for his second dose. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1221560-1 | Day 1-- shot, nosebleed 8 hours later Day 2-- feels gross, sore throat, 2 more nosebleeds, stays home from school, fatigue, chills around 7 pm, complains of nausea Day 3-- feels grosser, stays home from school again, another nosebleed, fever 99.2, fatigue, still sore throat, weak muscles, gets winded if he has to walk gave him advil, vitamins, lots of water, emergen-c, ice packs, hot water bottle, tylenol, room humidifier, tea w/ lemon & honey, cough syrup for throat, afrin to clear up nose when it was stuffed closed (after the nosebleeds, afrin did not cause them) Nothing has helped him, he felt worse with each passing day. Tomorrow is day 4. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| PYREXIA | COVID19 VACCINE (COVID19) | 1357951-1 | My son developed a fever, brain fog, and his legs felt like they were burning. More worrisome was the heart pain he woke up with in the middle of the night and throughout the day on 5/20. He complained of a sharp stabbing pain on left side of his chest and said it was hard to take a deep breath. I gave him ibuprofen and he rested. I called his doctor and they said not to worry, these side effects were normal. I'm a bit nervous for him to get the second vaccine since he had the chest pain side effects as to why I'm reporting this. I'm surprised they give the same dose to a 80lb child, they do to a 200 lb grown man. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1374485-1 | Body aches, nausea, lethargy, decreased appetite, possible fever, sleeping difficulties approx. 24 hours |
| PYREXIA | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| PYREXIA | COVID19 VACCINE (COVID19) | 1378523-1 | Headache, Nausea, hot cold flashes, fever, dizziness, foggy thought and trouble concentrating |
| PYREXIA | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. Epipen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| PYREXIA | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1392614-1 | reported Fever, body aches. chills, Nausea, Severe headache which made me take her to Emergency Room on 6/11/21. Severe headache possibly from Covid Vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|--|
| PYREXIA | COVID19 VACCINE (COVID19) | 1392915-1 | Patient received her second dose of the Pfizer COVID-19 vaccine Friday, June 4th, 2021. One day after the second Pfizer Covid 19 shot, (Saturday, June 5th, 2021), Patient experienced fever, fatigue, weakness and swollen lymph nodes. Two days after the second Pfizer Covid 19 shot, (Sunday, June 6th, 2021), Patient still had those symptoms in addition to the break out of several painful genital lesions. She visited her pediatrician Tuesday, June 8th, 2021, and the lesions were tested for the herpes virus. Patient was also prescribed oral antiviral medication, and topical steroid creams. The results for the herpes test came out negative. Today, June 11th 2021, the lesions are still present and painful, and continue to be treated. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1394615-1 | Sore arm and fever |
| PYREXIA | COVID19 VACCINE (COVID19) | 1399081-1 | Fever, lethargy, shortness of breath, chest pain, neck pain, swollen lymph nodes |
| PYREXIA | COVID19 VACCINE (COVID19) | 1407186-1 | Patient developed a fever, chills, headache. Fever and chills lasted for 1.5 days, headache persisted for 3 days. He has never had adverse reactions to any childhood vaccines prior to this. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procalcitonin elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| PYREXIA | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging, constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| PYREXIA | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| PYREXIA | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|---|
| PYREXIA | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIC); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021; Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1694293-1 | Pain at injection site one hour after vaccine, bad headache, pain in arms and legs, 102 degree fever, periodic stomach cramps. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| PYREXIA | COVID19 VACCINE (COVID19) | 1769070-1 | Sore arm that moved up into neck area and down under arm below the arm pit area, feverish, chills, lump in neck area the size of a jelly bean, very tired, headaches. Went into the doctor's office on Monday...starting to feel better but lump was still there. Dr said everything looked okay and to just keep watch that lump didn't grow or move. As of today, still has the lump but no pain |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------|---------------------------|---------------------------|--|
| PYREXIA | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1788209-1 | Experienced urticaria and symptoms similar to dermatographism. Plan: order COVID test due to fever. Benadryl at night, Zyrtec during the day. Cortisone cream on rash. Providing Prednisone 10mg for severe urticaria. Advised to seek further medical care if feeling any swelling/tingling around mouth. |
| PYREXIA | COVID19 VACCINE (COVID19) | 1812932-1 | fever 99-100 via forehead /low fever 99-100 now 7 days post vaccination; fever of 102-103 taken via forehead; This is a spontaneous report from a contactable Other Healthcare Professional reporting for a patient. A 15-years-old male patient received bnt162b2 (COMIRNATY, PFIZER-BIONTECH COVID-19 VACCINE, Formulation: Solution for injection, Batch No: Not reported/Lot Number: EW0180) via intramuscular route on 08Jun2021 (at the age of 15-years-old) as dose 2, single for covid-19 immunization. The patient medical history included known allergy to peanut and concomitant medications were not reported. The historical vaccine included patient received bnt162b2 (COMIRNATY, PFIZER-BIONTECH COVID-19 VACCINE, Formulation: Solution for injection, Batch No: Not reported/Lot Number: EW0185) via an intramuscular route on 18May2021 (at the age of 15-years-old) as dose 1, single for covid-19 immunization. Patient had no covid prior vaccination and was not tested post vaccination. It was unknown if other vaccine taken within four weeks. Patient did not receive his vaccination at reporter clinic. On 09Jun2021, Mom of patient called to report a fever of 102-103 taken via forehead and asked if ok to give Tylenol and the PCP said it was ok to give. On 14Jun2021, Mom of patient called again and said that the patient was still having fever 99-100 via forehead and had no other symptoms otherwise he was feeling fine. Patient had virtual appointment with provider on 15Jun2021 and reported that, the patient was still having low fever 99- 100 now 7 days post vaccination and no other symptoms at this time. The patient underwent lab tests and procedures which included body temperature taken via forehead on 09Jun2021 which results as 102-103, on 14Jun2021 body temperature via forehead was measured as 99-100, and on 15Jun2021 body temperature was measured still having low fever 99-100 now 7 days post vaccination. The therapeutic measure taken as a result of event was Unknown. The outcome of the events was unknown. Follow-up attempts are completed. No further information is expected. |
| RASH | COVID19 VACCINE (COVID19) | 1281968-1 | Pt has had a rash on neck and face X 3 days. She reports its slightly itchy, swollen and red. Not painful. It started on neck and spread to face. No fever, no trouble breathing. Very slight tight feeling in her throat yesterday with mild difficult in swallowing, but otherwise no issues swallowing/breathing today. Had first dose of covid pfizer vaccine 10 days ago. Has tried benadryl and hydrocortisone (one dose/application each) with no significant improvement. |
| RASH | COVID19 VACCINE (COVID19) | 1347006-1 | swelling and rash started on arm 2 days after vaccine then spread to face, slight itching |
| RASH | COVID19 VACCINE (COVID19) | 1358000-1 | Patient experienced fatigue, malaise and rash within 24 hours of second COVID vaccine. Then reported feeling short of breath with exertion while at wrestling practice on 5th day following COVID vaccine. |
| RASH | COVID19 VACCINE (COVID19) | 1386601-1 | He started taking Giferan gel - for acne - it dried out his skin - he started using this a week before the vaccine; on the 31st - rash around his mouth - it was getting red and crusty and looking abnormal - called the Intertrigo- bacterial infection. Put him on antibiotic cream - Mupirocin 2 % ointment. Five day treatment It's resolved now. Dermatologist: dermatology is where we went and he saw a PA. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------|---------------------------|---------------------------|---|
| RASH | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| RASH | COVID19 VACCINE (COVID19) | 1415425-1 | My child began feeling tired and ran a temperature about a degree warmer than usual for the first three days after his second COVID vaccine on Sunday 13 June. (So Monday, Tuesday, Wednesday). Thursday he was extra tired and began to complain of itching under the chin in the evening. Friday morning he woke up and had what he described as itchy/painful raised, red patches of skin on his right collarbone, under his chin, across his face (right cheek, temple). His temperature was about 100* and he was, quite frankly, pretty miserable. These weren't little skin irritations, they were giant patches of inflamed tissue covering the better part of each cheek, his temple, under the chin and then in smaller spots on his collarbones and back. Saturday the rash moved to cover the left side of his face, and the left collarbone. (And no, for the record, I did not switch laundry detergents, change his diet or anything like that.) As of today, 6/21 condition has improved but not fully resolved. |
| RASH | COVID19 VACCINE (COVID19) | 1420763-1 | Approximately one week after 1st dose of Pfizer covid19 vaccine, patient developed a rash all over torso. Today, 3 weeks post vax#1, rash is still present. It is pruritic, covers entire torso (ant/post) from base of neck to pelvis/buttocks. Lesions are variable from small (5mm diam) raised, erythemic lesions to large (2-3cm diam) hives. Lesions on the back are coalescing to cover entire back. Pt's mother stated the individual lesions are coming together-rash worsening over past 2 weeks. OTC Topical cortisone helping with itch, but not with lesion resolution. Enc pt to reach out to PCP-Pediatrician and discuss possible systemic treatment such as PO anti-histamine or steroid taper. Pt rescheduled for dose #2 which will continue to be delayed until rash is completely resolved. Suggested 30 minute observation at next vaccine appointment. |
| RASH | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| RASH | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| RASH | COVID19 VACCINE (COVID19) | 1789491-1 | Received dose on 9/3/2021. Had some mild headache, lightheadedness days following. But early October, developed petechiae of lower extremities that eventually progressed to nose bleeds and heavy period. Was evaluated officially on 10/13 when patient showed her mom the lower extremity rash. Platelet count noted to be 2. Given course of steroids and rechecked on 10/15 with improvement to 3, but with improvement in heavy period as well as nose bleed. I am now admitting her for IVIG after discussion with pediatric hematology. Improving with admission platelet of 6. |
| RASH | COVID19 VACCINE (COVID19) | 1791131-1 | Lip, chin, face swelling; Lip, chin, face swelling; Rash and hives all over entire body; Rash and hives all over entire body; This is a spontaneous report from a contactable consumer (patient). A 12-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number and expiration date were not reported) on the left arm on 03Sep2021 (15:00) as dose 1, single, with route of administration unspecified, for COVID-19 immunization at the physician's office. Medical history included sulfa meds allergy. The patient was not pregnant at the time of vaccination. There were no concomitant medications. The patient previously took amoxicillin, and had drug allergy. The patient did not receive other vaccines in four weeks. On 06Sep2021 (20:00), the patient had lip, chin, and face swelling, rash, and hives all over entire body. The events were reported to be serious (medically significant); and had resulted into a doctor or other healthcare professional office/clinic visit and emergency room/department or urgent care. The patient had received steroids, allergy medications and asthma medications as treatment for the events. The outcome of the events was not recovered. The patient did not have COVID-19 prior to vaccination, and has not been tested post-vaccination. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up. |
| RASH | COVID19 VACCINE (COVID19) | 1812861-1 | Rash covering the torso, front and back. Not noticed until 6/5/21; This is a spontaneous report from a contactable consumer or other non-HCP (patient himself). A 12-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot Number: EW0191) via an unspecified route of administration, administered in left arm on 02Jun2021 at 09:45 AM, as DOSE 2, SINGLE (at the age of 12-year-old) for COVID-19 immunization. The patient medical history reported as none. The concomitant medications were not reported. Patient had no known allergies. Historical vaccine includes BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot Number: EW0172) via an unspecified route of administration in left arm on 12May2021 at 12:00 PM, as DOSE 1, SINGLE (at the age of 12 years-old) for COVID-19 immunization. No other vaccine in four weeks. No covid prior vaccination and not tested for covid post vaccination. The patient experienced rash covering the torso, front and back, not noticed until 6/5/21 on 05Jun2021. No treatment received for the events. The outcome of the event was resolving at the time of this report. Follow-up attempts are completed. No further information is expected. |
| RASH ERYTHEMATOUS | COVID19 VACCINE (COVID19) | 1386601-1 | He started taking Giferan gel - for acne - it dried out his skin - he started using this a week before the vaccine; on the 31st - rash around his mouth - it was getting red and crusty and looking abnormal - called the Intertrigo- bacterial infection. Put him on antibiotic cream - Mupirocin 2 % ointment. Five day treatment It's resolved now. Dermatologist: dermatology is where we went and he saw a PA. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------------------|---------------------------|---------------------------|--|
| RASH ERYTHEMATOUS | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| RASH ERYTHEMATOUS | COVID19 VACCINE (COVID19) | 1420763-1 | Approximately one week after 1st dose of Pfizer covid19 vaccine, patient developed a rash all over torso. Today, 3 weeks post vax#1, rash is still present. It is pruritic, covers entire torso (ant/post) from base of neck to pelvis/buttocks. Lesions are variable from small (5mm diam) raised, erythemic lesions to large (2-3cm diam) hives. Lesions on the back are coalescing to cover entire back. Pt's mother stated the individual lesions are coming together-rash worsening over past 2 weeks. OTC Topical cortisone helping with itch, but not with lesion resolution. Enc pt to reach out to PCP-Pediatrician and discuss possible systemic treatment such as PO anti-histamine or steroid taper. Pt rescheduled for dose #2 which will continue to be delayed until rash is completely resolved. Suggested 30 minute observation at next vaccine appointment. |
| RASH MACULAR | COVID19 VACCINE (COVID19) | 1371771-1 | small dots on skin that look a bit like Petechiae. This is on her left mid-thigh. She also had very itchy nose and ears. |
| RASH MACULAR | COVID19 VACCINE (COVID19) | 1415425-1 | My child began feeling tired and ran a temperature about a degree warmer than usual for the first three days after his second COVID vaccine on Sunday 13 June. (So Monday, Tuesday, Wednesday). Thursday he was extra tired and began to complain of itching under the chin in the evening. Friday morning he woke up and had what he described as itchy/painful raised, red patches of skin on his right collarbone, under his chin, across his face (right cheek, temple). His temperature was about 100* and he was, quite frankly, pretty miserable. These weren't little skin irritations, they were giant patches of inflamed tissue covering the better part of each cheek, his temple, under the chin and then in smaller spots on his collarbones and back. Saturday the rash moved to cover the left side of his face, and the left collarbone. (And no, for the record, I did not switch laundry detergents, change his diet or anything like that.) As of today, 6/21 condition has improved but not fully resolved. |
| RASH PAPULAR | COVID19 VACCINE (COVID19) | 1420763-1 | Approximately one week after 1st dose of Pfizer covid19 vaccine, patient developed a rash all over torso. Today, 3 weeks post vax#1, rash is still present. It is pruritic, covers entire torso (ant/post) from base of neck to pelvis/buttocks. Lesions are variable from small (5mm diam) raised, erythemic lesions to large (2-3cm diam) hives. Lesions on the back are coalescing to cover entire back. Pt's mother stated the individual lesions are coming together-rash worsening over past 2 weeks. OTC Topical cortisone helping with itch, but not with lesion resolution. Enc pt to reach out to PCP-Pediatrician and discuss possible systemic treatment such as PO anti-histamine or steroid taper. Pt rescheduled for dose #2 which will continue to be delayed until rash is completely resolved. Suggested 30 minute observation at next vaccine appointment. |
| RASH PRURITIC | COVID19 VACCINE (COVID19) | 1281968-1 | Pt has had a rash on neck and face X 3 days. She reports its slightly itchy, swollen and red. Not painful. It started on neck and spread to face. No fever, no trouble breathing. Very slight tight feeling in her throat yesterday with mild difficult in swallowing, but otherwise no issues swallowing/breathing today. Had first dose of covid pfizer vaccine 10 days ago. Has tried benadryl and hydrocortisone (one dose/application each) with no significant improvement. |
| RASH PRURITIC | COVID19 VACCINE (COVID19) | 1347006-1 | swelling and rash started on arm 2 days after vaccine then spread to face, slight itching |
| RASH PRURITIC | COVID19 VACCINE (COVID19) | 1420763-1 | Approximately one week after 1st dose of Pfizer covid19 vaccine, patient developed a rash all over torso. Today, 3 weeks post vax#1, rash is still present. It is pruritic, covers entire torso (ant/post) from base of neck to pelvis/buttocks. Lesions are variable from small (5mm diam) raised, erythemic lesions to large (2-3cm diam) hives. Lesions on the back are coalescing to cover entire back. Pt's mother stated the individual lesions are coming together-rash worsening over past 2 weeks. OTC Topical cortisone helping with itch, but not with lesion resolution. Enc pt to reach out to PCP-Pediatrician and discuss possible systemic treatment such as PO anti-histamine or steroid taper. Pt rescheduled for dose #2 which will continue to be delayed until rash is completely resolved. Suggested 30 minute observation at next vaccine appointment. |
| RED BLOOD CELL SEDIMENTATION RATE | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---|---------------------------|---------------------------|--|
| RED BLOOD CELL SEDIMENTATION RATE | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--|---------------------------|---------------------------|--|
| RED BLOOD CELL SEDIMENTATION RATE NORMAL | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| RED CELL DISTRIBUTION WIDTH NORMAL | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| RESPIRATORY ARREST | COVID19 VACCINE (COVID19) | 1351900-1 | Patient received c19 vaccine Pfizer - lot EW0178 at 1437 on 5/26/021 At 1443, patient was given 0.15mg Epi in left thigh due to reaction. BP 104/68 P: 63 O2: 97% RA (laying) BP 101/70 P: 88 O2: 98% RA (laying) Patient was seen with her head back in her chair, then sliding down the chair with her eyes rolled and unable to breath. RN assisted Patient mother at side Lab Mgr present Patient was kept on the floor until 911 arrived for EMS transport to Hospital. |
| RESPIRATORY RATE INCREASED | COVID19 VACCINE (COVID19) | 1342017-1 | Received her first dose of the Pfizer COVID-19 vaccine on Sunday May 16,2021 at around 2:50 pm. At around 7:20 pm on May 16,2021 she stood up to walk to the bathroom. She began feeling nauseous when she stood up. While she was washing her hands, after going to the bathroom, she began to have difficulty with her vision. She describes white and blue dots obstructing her vision in both eyes. She also began to experience loud tinnitus. She described hearing multiple frequencies. The problem with her vision and the tinnitus continued as she walked through our house to a couch where she laid down. The vision problem and tinnitus continued while she laid on the couch. Her breathing was rapid but she thinks this may have been due to the stress caused by her other symptoms. This episode lasted for several minutes and then the vision problem resolved. The tinnitus continued for several minutes after the vision problem resolved. The intensity of the tinnitus slowly decreased until it finally stopped. The following evening, she experienced tinnitus for a few minutes but it was less intense than it was the previous evening. She very rarely has experienced tinnitus in the past. She has very infrequently experienced brief episodes of orthostatic hypotension when she was dehydrated. When this event occurred, she felt like she was well hydrated. This event lasted much longer and she has never experienced this problem with her vision in the past. |
| RESPIRATORY RATE INCREASED | COVID19 VACCINE (COVID19) | 1502004-1 | Approximately 3 minutes after injection, pt. reported that her vision had gone black, her ears were ringing, and she felt faint. I notified the nurse immediately. Within another minute her breathing became rapid and faint. She was given water and coached to breath slowly and deeply. The nurse checked her blood pressure with a result of 67/22. A second BP check resulted in 70/27. The nurses transferred her to the ER. In the ER, a third BP check 20 minutes after injection resulted in a normal reading of approximately 110/70. She continued to take oral fluids for approximately one hour before being released. The medical staff reported to us that this is a completely normal reaction for many people to all vaccinations, and suggested that she should get the second dose of Pfizer vaccine in 3-4 weeks. However, when we check the CDC website we find that these are anaphylactic symptoms and should not get the 2nd dose of Pfizer, so we are greatly concerned and decided to report the event. |
| RESPIRATORY RATE INCREASED | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| RESPIRATORY VIRAL PANEL | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| RESPIRATORY VIRAL PANEL | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| RHINORRHOEA | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| SARS-COV-2 ANTIBODY TEST | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------------------|---------------------------|---------------------------|---|
| SARS-COV-2 ANTIBODY TEST POSITIVE | COVID19 VACCINE (COVID19) | 1334617-1 | Cardiac function. Currently hospitalized in PICU 4d following vaccine administration. Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| SARS-COV-2 ANTIBODY TEST POSITIVE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| SARS-COV-2 ANTIBODY TEST POSITIVE | COVID19 VACCINE (COVID19) | 1430330-1 | admitted 6/23 in status epilepticus. Found to have a basilar artery thrombus |
| SARS-COV-2 ANTIBODY TEST POSITIVE | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| SARS-COV-2 ANTIBODY TEST POSITIVE | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| SARS-COV-2 TEST | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1423523-1 | Patient had the vaccine Friday morning (6/4/21). He had typical side effects that afternoon (tired, achy arm). He woke up the next morning, 6/5/21, complaining that his chest hurt (with a stinging, constant pain), his heart was beating rapidly, 102.5 degree fever, and he said it was hard to breathe. I gave him 200mg Ibuprofen and he rested. Symptoms resolved in about 2-3 hours and did not return. I contacted the advice line at, and they set up a video appointment for mid afternoon on that same day, Saturday 6/5. By the time of the visit, symptoms were completely gone. PA recommended he have a Covid test as it was possible those symptoms were from having Covid (coincidentally and simultaneously). The test was negative. |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| SARS-COV-2 TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1715365-1 | Angiderma to head, lips, eyes, throat and hives on torso and extremities. |
| SARS-COV-2 TEST POSITIVE | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------------|---------------------------|---------------------------|---|
| SARS-COV-2 TEST POSITIVE | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| SCREAMING | COVID19 VACCINE (COVID19) | 1657447-1 | 3-4 hours of severe physical tics accompanied by non-stop coprolalia, head banging and screaming. Complaining of ringing in ears and aural sensitivity. Episode receded, but significant tics occurred the next day as well. |
| SEIZURE | COVID19 VACCINE (COVID19) | 1347797-1 | Seizure at the time of vaccination. Mother in the car and recorded. Known history of seizures and they will follow up with an epileptologist. They are comfortable going home as this happened after the nasal swab as well and they suspected this would happen today. No further information needed today. |
| SEIZURE | COVID19 VACCINE (COVID19) | 1546154-1 | Passed out and went into convulsions, woke up and couldn't breathe well until albuterol was administered |
| SEIZURE | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| SEIZURE | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| SEIZURE | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| SENSORY LOSS | COVID19 VACCINE (COVID19) | 1716776-1 | right sided stroke with left sided arm weakness |
| SERUM FERRITIN INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| SERUM FERRITIN NORMAL | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| SINUS PAIN | COVID19 VACCINE (COVID19) | 1674339-1 | Body aches; Painful sinuses; Fatigue; Arm pain; Fever; Chills; Headache; Dose 1: 27Apr2021;Dose 2: 11May2021; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old non-pregnant female patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 11May2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. Medical history included shellfish allergy and latex allergy. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the COVID vaccine. Concomitant medications included iron (MANUFACTURER UNKNOWN) from an unknown date for unspecified indication. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN) via an unspecified route of administration in the left arm on 27Apr2021 at 11:00 (at the age of 16-years-old), as a single dose for COVID-19 immunisation. On 11May2021 at 23:00, the patient experienced fever, chills, body aches, headache, fatigue, painful sinuses and arm pain. The events did not result in doctor or other healthcare professional office/clinic, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events fever, chills, body aches, headache, fatigue, painful sinuses and arm pain were resolving at the time of this report. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------------|---------------------------|---------------------------|---|
| SKIN DISCOLOURATION | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| SKIN DISCOLOURATION | COVID19 VACCINE (COVID19) | 1519828-1 | patient felt faint, skin color turned white. patient complained she could not see or hear anything and she felt weak. we assisted patient back into our immunization, placed her on the floor, elevated her feet, and placed a pillow under her head. called 911. within 5 minutes the patient's color was returning to her face and she was able to see and hear again. it appears the patient had an anxiety attack as a result of the immunization. |
| SKIN DISCOLOURATION | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |
| SKIN WARM | COVID19 VACCINE (COVID19) | 1745666-1 | 18:50 Patient receives vaccine 18:51 Patient arrives in the observation area accompanied by her mother and the nurse assigned to the observation area who explains to both the patient and her mother that the patient will be observed for fifteen minutes and explains the common side effects and what to do should any of them occur in the next 24-48 hours. Both the patient and the mother verbalized understanding. 18:53 Patient signs for and receives incentive, also gets a pack of fruit snacks. 18:57 - Patient states she does not feel well and looks pale, patient was also diaphoretic. LPN monitoring the observation area approaches the young lady and she immediately slumps to the right in her chair and appears to lose consciousness.. LPN and another nurse transfer the patient from the chair to the stretcher and use a capsule of spirit of ammonia that is broken and waved under the patient's nose and she immediately responds. 18:58 Vital signs are taken: BP-90/58, P-80, R-18, O2 sat-99-100%. Patient is verbally responsive and able to state her name and recognize her mother. Patient denies difficulty swallowing, breathing or feeling itchy. On physical observation patient does not have any redness or rash appearing on her face, neck, upper extremities or torso. Her upper extremities are warm and dry to touch. 19:03 Patient placed in an upright/seated position, denies feeling dizzy or lightheaded and is offered some water. Able to follow commands and swallow without difficulty. Monitoring continues by RN on site. Patient offered a granola bar and is able to eat without difficulty 19:06- VS taken: BP-100/60, P-101, O2 sat 100%. Monitoring continued in the observation area by RN. Patient is alert and oriented, denying any discomfort/difficulties. 19:23 ? Patient leaves the observation area/clinic accompanied by her mother after informing and instructing the mother of s/s to observe for throughout the night and when to call 911 or seek medical attention. The mother and daughter verbalize understanding the information. Patient was able to ambulate without difficulty or assistance. |
| SKIN WARM | COVID19 VACCINE (COVID19) | 1804124-1 | He woke up the next morning from shoulder to wrist was red and hot to touch. I gave me Tylenol. I called the doctor office spoke with a triage nurse. The nurse recommended Tylenol and Motrin and Benadryl and cold compresses and if he were to get worse to bring him in. That evening it started improving. |
| SLOW RESPONSE TO STIMULI | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. EpiPen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |
| SPEECH DISORDER | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| STATUS EPILEPTICUS | COVID19 VACCINE (COVID19) | 1430330-1 | admitted 6/23 in status epilepticus. Found to have a basilar artery thrombus |
| STERILE PYURIA | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| STOOL ANALYSIS | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------|---------------------------|---------------------------|--|
| STREPTOCOCCUS TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| STREPTOCOCCUS TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| SUICIDAL IDEATION | COVID19 VACCINE (COVID19) | 1409006-1 | Child developed a massive PANDAS OCD Flare and possibly cytokine storm. He ended up in the hospital asking to die because OCD thoughts became over whelming. Child has had PANDAS for 6 years and never had an incident like this. |
| SUPRAVENTRICULAR TACHYCARDIA | COVID19 VACCINE (COVID19) | 1275018-1 | on the same day as first dose of covid vaccine, several hours later, patient had first episode of supraventricular tachycardia. Required vagal maneuvers in ambulance to resolve. No longterm sequelae. |
| SWELLING | COVID19 VACCINE (COVID19) | 1281968-1 | Pt has had a rash on neck and face X 3 days. She reports its slightly itchy, swollen and red. Not painful. It started on neck and spread to face. No fever, no trouble breathing. Very slight tight feeling in her throat yesterday with mild difficult in swallowing, but otherwise no issues swallowing/breathing today. Had first dose of covid pfizer vaccine 10 days ago. Has tried benadryl and hydrocortisone (one dose/application each) with no significant improvement. |
| SWELLING | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| SWELLING | COVID19 VACCINE (COVID19) | 1536269-1 | Developed reactions to cold in the form of hives, large welts, and swelling of the lips. First reaction was a softball size welt on June 25th after icing sore elbow. Now any contact with chilled or iced items produces welts, swelling, and itching. Contact with cold river water while rafting August 8 produced hives over entire body. Contact with ice cream on 8/7 produced swollen lips. Very concerned as my daughter is a competitive swimmer. While the first notable welt on elbow, was approximately 9 days after 2nd vaccine, she said she noticed an itchy sensation when exposed to cold at some point prior to this but never before 2nd vaccine. |
| SWELLING | COVID19 VACCINE (COVID19) | 1651047-1 | Right shoulder after the 2nd shot started to swell up.; Arm pit is much more full and feels very sore.; Lymph nodes are swollen.; This is a spontaneous report from a contactable consumer, the patient. A 16-year-old male patient received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EW0173) via an unspecified route of administration in the right arm on 08Apr2021 at 14:00 (at the age of 16-years-old) as a single dose for COVID-19 immunisation. The patients' medical history included a known allergy to fentanyl (MANUFACTURER UNKNOWN). Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any medication within two weeks of the COVID-19 vaccination. The patient previously received the first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EW0173) via an unspecified route of administration in the right arm an unknown date as a single dose for COVID-19 immunisation. On 30Apr2021 at 12:00, the patient reported that his right shoulder started to swell up after the second dose, the arm pit was much fuller and felt very sore. The patients' father who was a medical professional said that the lymph nodes were swollen. The events did not result in a visit to the doctors or other healthcare professional office/clinic visit, and emergency room/department or urgent care. It was unknown whether any therapeutic measures were taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events right shoulder started to swell up, arm pit was much fuller and felt very sore and lymph nodes were swollen were not resolved at the time of this report. No follow-up attempts are needed. No further information is expected. |
| SWELLING FACE | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------|---------------------------|---------------------------|---|
| SWELLING FACE | COVID19 VACCINE (COVID19) | 1791131-1 | Lip, chin, face swelling; Lip, chin, face swelling; Rash and hives all over entire body; Rash and hives all over entire body; This is a spontaneous report from a contactable consumer (patient). A 12-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number and expiration date were not reported) on the left arm on 03Sep2021 (15:00) as dose 1, single, with route of administration unspecified, for COVID-19 immunization at the physician's office. Medical history included sulfa meds allergy. The patient was not pregnant at the time of vaccination. There were no concomitant medications. The patient previously took amoxicillin, and had drug allergy. The patient did not receive other vaccines in four weeks. On 06Sep2021 (20:00), the patient had lip, chin, and face swelling, rash, and hives all over entire body. The events were reported to be serious (medically significant); and had resulted into a doctor or other healthcare professional office/clinic visit and emergency room/department or urgent care. The patient had received steroids, allergy medications and asthma medications as treatment for the events. The outcome of the events was not recovered. The patient did not have COVID-19 prior to vaccination, and has not been tested post-vaccination. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up. |
| SWELLING OF EYELID | COVID19 VACCINE (COVID19) | 1487142-1 | 48 hours after vaccine right upper eyelid became swollen and slightly tender to palpation |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1259688-1 | bp 128/76 pt w syncope 5 mins into monitoring. hit head on front left. monitored for s/sx of concussion. denies blurred vision head ache. monitored for 15mins post fall 09:07 am pt c/o blurring in right eye peripheral vision pt to check with pcp if symptoms continue or worsen. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1280705-1 | Within about 5 minutes of receiving her first Pfizer Covid19 vaccine, the patient passed out and hit her head on the floor. She regained consciousness quickly (within seconds) after I got to her. She stated she had felt nauseas and tingly before fainting. She has not experienced this before with other vaccines. Ambulance was dispatched due to her hitting her head. Parents and paramedics determined she was ok to go home. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1299511-1 | Systemic: Fainting / Unresponsive-Mild |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1320442-1 | Systemic: Fainting / Unresponsive-Severe, Systemic: Nausea-Mild, Additional Details: Patient received injection and got up from chair. After standing for a few minutes he fainted and lost consciousness. His mom and I got him to the floor and he regained consciousness within a minute. He said he felt thirsty and nauseated. His mom gave him water. He laid on the floor for 20 minutes and then sat up for a few minutes. Then he walked out of the dressing room and left the store. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1324503-1 | Patient passed out immediately following administration of the vaccine to the left deltoid. His head fell backwards and limp. The Rph administering the vaccine moved in front of the patient and gently moved his head into an upright position. The patient had mild muscle spasms and twitches while passed out but when he regained consciousness he immediately began talking saying he was ok. Father came into the consultation room at that point and Rph explained what had occurred. Patient looked a little pale and eyes were having a hard time staying open so with the help of his dad Rph helped him down to the ground in the corner of the room so he could have back and head support from the wall. Patient was given a glucose tablet and water, and later orange juice. Patient stayed in the consultation room for about 20 minutes before leaving on his own and saying he was feeling much almost back to normal. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1325402-1 | Patient bopped her head back and then forward (fainted for about one second) after receiving vaccine. Reports of low blood pressure and dizziness |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1331144-1 | Patient with vasovagal syncope. Rapidly improved with position change, hydration, and monitoring. Returned home with mother as the driver. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1347710-1 | A 17 Year old boy, received his first dose of COVID -vaccine, Pfizer. He walked out of the health room feeling fine. Stood outside in the waiting room talking to his mom during his 15 min observatory period. within 10 mins, he fainted and fell on his face on the floor. Till the pharmacist came out to him, the pharmacist kept tapping his shoulder and called his name out loud, he recovered and woke up. pharmacist checked his BP and was 121/71 and 68 HR. 911 was called , and paramedics came in, checked his vitals and all were normal . He just hit his chin when he fell, and bled from his gum, no loose teeth reported and a chin wound that might need glue stitches per paramedics. Patient was fine and talking when paramedics transported him to the hospital. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1354466-1 | Patient experienced vasovagal syncope within a minute of her vaccination. Helped patient lie down on the floor and explained situation to her. Assisted patient to cot, and provided apple juice. Encouraged patient to call her mom and continued to monitor patient's status. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1358457-1 | Syncopal episode on the day following immunization. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1376659-1 | syncope within minutes of vaccination with resultant left front incisor tooth fracture |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------|---------------------------|---------------------------|--|
| SYNCOPE | COVID19 VACCINE (COVID19) | 1388467-1 | vasovagal syncope for less than 30 seconds after seeing drop of blood on arm after vaccine administration. Aroused easily. Drank juice, was released to Mom in 30 minutes, feeling well, ambulating normally. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1403508-1 | pt fainted shortly after vaccination (within 5 minutes). Pt regained consciousness within few seconds. Pt lied down with feet higher on a chair. Pt was monitored for 30 minutes and recovered fully. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1506475-1 | syncope dizzy, light headed, upset stomach lasted 15 minutes |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1592988-1 | Pt presented with guardian at point of sale to report fainting spell in the bathroom with guardian. Reported feeling clammy and nauseous after shot but attributed to anxiousness. Guardian said the the patient started tunnel vision while walking to the bathroom then collapsed onto guardian. She did not loose consciousness. Had the patient sit back down in the waiting room. Her pulse was 80bpm regular rate and rhythm. Pale paler with clammy feel. Pt was alert and followed directions but did not speak for herself. Blood Pressure was taken 110/81 79BPM. Vaccine was given about 12:30 with reporting to point of sale at 12:56pm Monitored patient for 5 more minutes. She was feeling better and able to stand with out any faintness. Sent on her way to call if any reoccurrence. |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1654177-1 | Patient fainted after vaccination |
| SYNCOPE | COVID19 VACCINE (COVID19) | 1816464-1 | Patient fainted for two minutes following vaccination |
| TACHYCARDIA | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| TACHYCARDIA | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| TACHYCARDIA | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIC); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not results in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| TACHYCARDIA | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| THIRST | COVID19 VACCINE (COVID19) | 1320442-1 | Systemic: Fainting / Unresponsive-Severe, Systemic: Nausea-Mild, Additional Details: Patient received injection and got up from chair. After standing for a few minutes he fainted and lost consciousness. His mom and I got him to the floor and he regained consciousness within a minute. He said he felt thirsty and nauseated. His mom gave him water. He laid on the floor for 20 minutes and then sat up for a few minutes. Then he walked out of the dressing room and left the store. |
| THROAT IRRITATION | COVID19 VACCINE (COVID19) | 1374665-1 | "` 5 minutes after injection, pt c/o throat ""strangeness"". No itching, rash, hives, chest sx. No clear GI sx. OP clear Lungs clear Skin clear Pt improving. DCed home with instructions to call PCP soon and especially before next injection" |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|------------------------------|---------------------------|---------------------------|---|
| THROAT IRRITATION | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| THROAT IRRITATION | COVID19 VACCINE (COVID19) | 1466671-1 | Patient didn't have any side effects from his first dose. With his second, he felt fine for about 15 hours. Then his lips and eyes started to swell, his throat got itchy, & he started taking deep breaths. These are telltale signs of him starting to have an anaphylactic reaction. I gave him two Benadryl immediately, and monitored him. His breathing improved and I didn't have to inject him with his EpiPen or take him to the hospital. The swelling in his eyes and lips didn't subside, however, so I gave him routine doses of Benadryl for about 12 hours while monitoring him. He was fine again, for another 20 hours or so, and then his symptoms started to come back. Benadryl stopped it completely that time and I didn't have to give him anymore. |
| THROAT TIGHTNESS | COVID19 VACCINE (COVID19) | 1281968-1 | Pt has had a rash on neck and face X 3 days. She reports its slightly itchy, swollen and red. Not painful. It started on neck and spread to face. No fever, no trouble breathing. Very slight tight feeling in her throat yesterday with mild difficult in swallowing, but otherwise no issues swallowing/breathing today. Had first dose of covid pfizer vaccine 10 days ago. Has tried benadryl and hydrocortisone (one dose/application each) with no significant improvement. |
| THROAT TIGHTNESS | COVID19 VACCINE (COVID19) | 1321376-1 | "reports ""throat feels a little tight "" and ""hard to swallowing"". Brought to observation area. Vss (baseline HTN per his report). reports seasonal allergies. Oropharynx red upon inspection and drainage noted at back of throat. Able to drink fluids with difficulty. Reports immediate improvement of symptoms after PO fluids. Discussed symptoms of anaphylaxis with him. Released him to home after discussion of serious symptoms and what to contact ems for" |
| THROAT TIGHTNESS | COVID19 VACCINE (COVID19) | 1347615-1 | "Patient c/o throat ""tightening"" s/p Covid Pfizer#1. No respiratory distress. No hives or rash. Rx cetirizine 10 mg PO and diphenhydramine 25 mg PO with H2O, Observed x 30 min total. No worsening of symptoms. Discharged." |
| THROAT TIGHTNESS | COVID19 VACCINE (COVID19) | 1378245-1 | Patient complained of facial flushing, tingling lips, and his throat feeling like it was tightening. Nurse administered 25mg IM Benadryl per clinic protocol. The reaction resolved after administration of IM Benadryl. |
| THYROID FUNCTION TEST NORMAL | COVID19 VACCINE (COVID19) | 1394224-1 | My daughter was vaccinated May 26. When her period started the following week she had a cycle unlike any she's had in the previous 3 years since she started menstruating. Her cycle was sporadic, heavier than ever and lasted longer. Simultaneously, she felt faint constantly for over 4 days, was unable to stand for more than 15 minutes, and was nauseated constantly for 5 days during her period. The ONLY thing that is different in her life this month is that she received her first dose of the vaccine. Her doc had bloodwork done and her results were perfectly normal, meaning there is no other reason to point to other than the fact that she had the 1st vaccine dose. |
| THYROXINE FREE DECREASED | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| TIC | COVID19 VACCINE (COVID19) | 1657447-1 | 3-4 hours of severe physical tics accompanied by non-stop coprolalia, head banging and screaming. Complaining of ringing in ears and aural sensitivity. Episode receded, but significant tics occurred the next day as well. |
| TIC | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------|---------------------------|---------------------------|--|
| TINNITUS | COVID19 VACCINE (COVID19) | 1342017-1 | Received her first dose of the Pfizer COVID-19 vaccine on Sunday May 16,2021 at around 2:50 pm. At around 7:20 pm on May 16,2021 she stood up to walk to the bathroom. She began feeling nauseous when she stood up. While she was washing her hands, after going to the bathroom, she began to have difficulty with her vision. She describes white and blue dots obstructing her vision in both eyes. She also began to experience loud tinnitus. She described hearing multiple frequencies. The problem with her vision and the tinnitus continued as she walked through our house to a couch where she laid down. The vision problem and tinnitus continued while she laid on the couch. Her breathing was rapid but she thinks this may have been due to the stress caused by her other symptoms. This episode lasted for several minutes and then the vision problem resolved. The tinnitus continued for several minutes after the vision problem resolved. The intensity of the tinnitus slowly decreased until it finally stopped. The following evening, she experienced tinnitus for a few minutes but it was less intense than it was the previous evening. She very rarely has experienced tinnitus in the past. She has very infrequently experienced brief episodes of orthostatic hypotension when she was dehydrated. When this event occurred, she felt like she was well hydrated. This event lasted much longer and she has never experienced this problem with her vision in the past. |
| TINNITUS | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| TINNITUS | COVID19 VACCINE (COVID19) | 1502004-1 | Approximately 3 minutes after injection, pt. reported that her vision had gone black, her ears were ringing, and she felt faint. I notified the nurse immediately. Within another minute her breathing became rapid and faint. She was given water and coached to breath slowly and deeply. The nurse checked her blood pressure with a result of 67/22. A second BP check resulted in 70/27. The nurses transferred her to the ER. In the ER, a third BP check 20 minutes after injection resulted in a normal reading of approximately 110/70. She continued to take oral fluids for approximately one hour before being released. The medical staff reported to us that this is a completely normal reaction for many people to all vaccinations, and suggested that she should get the second dose of Pfizer vaccine in 3-4 weeks. However, when we check the CDC website we find that these are anaphylactic symptoms and should not get the 2nd dose of Pfizer, so we are greatly concerned and decided to report the event. |
| TINNITUS | COVID19 VACCINE (COVID19) | 1657447-1 | 3-4 hours of severe physical tics accompanied by non-stop coprolalia, head banging and screaming. Complaining of ringing in ears and aural sensitivity. Episode receded, but significant tics occurred the next day as well. |
| TINNITUS | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| TOOTH FRACTURE | COVID19 VACCINE (COVID19) | 1376659-1 | syncope within minutes of vaccination with resultant left front incisor tooth fracture |
| TRANSFUSION | COVID19 VACCINE (COVID19) | 1840949-1 | Patient received first dose 08/14/21, had symptoms of light headedness and diaphoresis 2 days later with menorrhagia. She was seen in the ER. She was found to be anemic. Was prescribed iron supplements. She received her second dose 3 weeks later and again had menorrhagia. She was seen in the ER a week later with menorrhagia and severe anemia. She came back the next day and required a blood transfusion and a D and C. She was in the hospital for 3 days. She has a history of heavy menstrual bleeding. |
| TREMOR | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| TREMOR | COVID19 VACCINE (COVID19) | 1512712-1 | "SUBJECTIVE: Pt. is a 15 year old male here vaccinated at our community vaccine event at high school last evening and received the Pfizer vaccine Approx 10 min after receiving the vaccine the patient reported: weakness and lightheadedness At approx 10 min post vaccination he was still sitting in the chair he was vaccinated in. When I came to him he was clammy and pale and felt weak and lightheaded. He also c/o of feeling tremulous This Hx of was obtained by pt and pt's mother who was with pt at the vaccine event. Pt was feeling anxious but well prior to the vaccine. He last ate approx 5 hrs prior to vaccine and had hamburger and root beer. He had no significant activity during the day prior to the event. He did wake up approx 4 hrs earlier than his usual time on day of event because of school orientation he had that day. Pt and mom denied any prior hx of similar reactions after vaccines Pt reported it ""feels like just got a shot"" No nausea, itching or resp distress No PMHx -Per pt. has been on IEP for adhd No current medications NKDA SocHx: pt denied any recent drug or etoh use Sudden onset of symptoms/signs: yes Rapid progression of symptoms/signs: Rapid progression that quickly improved OBJECTIVE: General appearance: pale and clammy Skin:no rashes Resp: CTA bilat CV: RRR Vitals Vaccine given at 5:58 pm 6:05 pm BP 87/50, P 83, pox 98%- pt was given water 6:08 pm BP 134/84, - coloring in face improved and pt began to feel better- pt was alert and oriented x 3 at this point 6:13pm BP 130/66- pt was given granola bar and 2nd bottle of water BS: 118 DISPOSITION: After sitting in chair for approx 35 min, drinking two bottles of water and two granola bars pt was feeling better, appeared better with normal coloring and not clammy and had normal vitals signs. He and his mom felt comfortable going home to rest. I reviewed warning signs with mom to call or go to ED for I called the next day (7/29) and spoke with his mom and she stated pt was doing better after eating dinner and was feeling well this. She plans to call pt's pediatrician to coordinate his 2nd dose in their office or affiliated clinic." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------|---------------------------|---------------------------|--|
| TREMOR | COVID19 VACCINE (COVID19) | 1727442-1 | "Covid Vax 1 received 6/7/21, Covid Vax 2 received 6/28/21. Night between 8/25 and 8/28 she had a shivering full body shake enough to wake the friend on the top bunk, as she was on the bottom bunk. The friend does not remember which night it was. She came home 8/29/21 from friends sleepover. 8/30/21 she woke to dizziness and it persisted for 1/2 the day. 8/31/21 she had her first ""twitch"" jerking movement of the head/neck. 9/2/21 she reported to me that she was having a jerking in her head/neck and asked if that was normal. It was happening 1 to 3 x/day. 9/6/21 I (parent) noticed that the jerking was in sequence of 3-4 head jerking to the side (tilting of the head). 9/9/21 she had full blown tic and was seen in the MD office. The head drops down to the right shoulder, then chin first to the mid chest line and then back up to normal position. This happens 4-10 times in sequence when mild to moderate episodes, and constant movement for 30 to 90 minutes before starting to relax up a little. This causes pain in the upper back and neck when moderate to severe movement." |
| TREMOR | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak-numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| TROPONIN | COVID19 VACCINE (COVID19) | 1399992-1 | chest pain for about 24 hours that resolved spontaneously over 24 hours. |
| TROPONIN I | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| TROPONIN I | COVID19 VACCINE (COVID19) | 1365693-1 | Patient woke up with chest pain and later diagnosed with possible acute pericarditis at his PCP office. He was treated with Ibuprofen 600 mg taken three times daily and referred to the pediatric cardiologist. |
| TROPONIN I | COVID19 VACCINE (COVID19) | 1412742-1 | fever to 101 F on 6/17/2021 at 8am which persisted. Chest pain started 6/18/2021 at 3am and has been constant. sharp chest pain lower chest midline, worse with laying, better with sitting or walking. Shortness of breath with laying also. Also has palpitations, light headedness, dizziness, nausea, feels clammy. Chest pain worse on 6/19/2021 at 1:30 am and came to the ED for further evaluation and treatment. Just got admitted and full evaluation in progress. |
| TROPONIN I | COVID19 VACCINE (COVID19) | 1424392-1 | Myocarditis |
| TROPONIN I | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| TROPONIN I INCREASED | COVID19 VACCINE (COVID19) | 1392930-1 | One day after vaccine, patient developed chest pain and headache. Three days after vaccination, presented to PCP then ED with chest pain. Found to have elevated troponin. Transferred to PICU with persistent chest pain. Chest pain dissipated after NSAIDs. |
| TROPONIN I INCREASED | COVID19 VACCINE (COVID19) | 1394691-1 | Patient presented the emergency department with chest pain radiating to left arm on 6/12. Studies indicate myocarditis. Patient will be transferred to specialty hospital for cardiology. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------|---------------------------|---------------------------|---|
| TROPONIN I INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| TROPONIN I INCREASED | COVID19 VACCINE (COVID19) | 1772257-1 | Acute myocarditis ~48 hours after vaccination with shortness of breath and chest pain, TPN elevation |
| TROPONIN I INCREASED | COVID19 VACCINE (COVID19) | 1826456-1 | chest pain, shortness of breath, likely myocarditis |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1334617-1 | Presented 3 days after Covid vaccination with ongoing chest pain since then. He was found to have elevated troponin and elevated ST segments consistent with pericarditis. He was also found to have be Covid positive by PCR. No medications initiated. ECHO normal. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1361977-1 | myocaritis - chest pain with elevated troponin reequiring hospital admission. symptoms started 3 days after vaccination which was his second dose of the Pfizer vaccine. First dose was on 5/1/21. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1400914-1 | chest pain intermittent for 2 days, EKG no acute changes, high sensitivity troponin 2217 (ref range <45). |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1404228-1 | Received second covid vaccine and one month later, developed chest pain, shortness of breath and was admitted to hospital for concern of myocarditis. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1407988-1 | Patient was hospitalized on 6/11/2021 after presenting to the ER with a history of chest pain x 48 hours. Labs showed an elevated troponin and an EKG was consistent with pericarditis/ myopericarditis. On further questioning patient had received the second dose of his COVID-19 Pfizer vaccine 2 days prior to the onset of chest pain. In the ER he was given a dose of ketorolac which relieved his chest pain. An echo as done which showed normal left ventricular systolic function and no pericardial effusion. He was admitted for further monitoring of his heart rhythm and to trend his troponin. He remained in the hospital for ~ 48 hours and was discharged on 6/13. His troponin was at its peak at his initial presentation and was 7,077. It initially decreased in the first 3 hours, but had small increases in the first 24 hours of admission. However, it had decreased to a low of 1575 at the time of discharge. His CRP initially was 4.4 (normal < 1 mg/dL) and decreased to 1.5 at discharge. ESR was mildly elevated at 23 and decreased to 18 at discharge. Chest pain had completely resolved within 12 hours of admission. He was maintained on ibuprofen 600 mg three times daily. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procal elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1416452-1 | Myocarditis diagnosis |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1417295-1 | Pt visit ER 3 days post 2nd Covid-19 vaccine on 6/18/21. SOB started following day, CP last night. Diagnosed with Myocarditis during ER visit. Discharged. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1429826-1 | 6/24/2021 developed tactile fever, substernal chest pain, and shortness of breath 6/25/2021 increased shortness of breath, chest pain |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------|---------------------------|---------------------------|--|
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1450664-1 | Healthy 16yr old boy with no PMHx. Received dose #1 vaccine on 6/9/21 and dose #2 6/30/21. Developed chest pain on 7/1 relieved temporarily with Tylenol but returns when Tylenol wore off. Progressive worsening over next 2 days. Mom took pt to Urgent Care 7/3 who referred pt to ER. EKG with diffuse ST elevation, no fever, Troponin elevated at 11. Afebrile. He was transferred to our hospital and admitted to PICU 7/3. Chest pain initially improved with ibuprofen but worsened on hospital day #2 with higher troponin. Started on IVIG and solumedrol, ibuprofen changed to Toradol with good response. No pressors, otherwise hemodynamically stable. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1463557-1 | Palpitations and chest pain Seen in ER on 7/8/21 and admitted overnight with rising troponin levels, improved by next day. Diagnosis of myocarditis related to COVID19 vaccine |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1464697-1 | chest pain, slightly more on left |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1533287-1 | Myocarditis - chest pain with significantly elevated troponin. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1574537-1 | Chest Pain Developed a few days after vaccine administration. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1582314-1 | chest pain 48hr after 2nd Pfizer COVID-19 vaccine |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1632935-1 | Patient developed myocarditis with acute chest pain and peak troponin of 11. He required 2 nights of hospitalization. He symptomatically improved within 48 hours with troponin trending down to 6. He had normal echo. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1655967-1 | Patient developed chest pain approximately 3 days after second Pfizer COVID vaccine. Patient went to the ER and was admitted with acute myocarditis and elevated troponins. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1693635-1 | Acute myocarditis. Patient initially developed headache, chest pain, nausea and vomiting. All other symptoms resolved, but chest pain continued, so he presented to the ED 2 days after receiving the vaccine (Wed, 9/8). He was found to have elevated troponins at that time and was hospitalized for further observation and management. His chest pain resolved by Friday, 9/10. His troponins fluctuated between 4.14-9.94. He was discharged in good condition with downtrending troponins on Saturday, 9/11. |
| TROPONIN INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| TROPONIN NORMAL | COVID19 VACCINE (COVID19) | 1341490-1 | Pericarditis, temp 100, chest pain |
| TROPONIN NORMAL | COVID19 VACCINE (COVID19) | 1404807-1 | See above. Received COVID 2 June 09 at pharmacy. Developed acute onset lower chest pain and abd. pain. Eval at emergency room showed negative troponin, CBC, EKG, CXR. Pt with elevated lipase to mid 500's and slightly bumped AST and ALT. Patient responded well to IVF with lipase decrease to 50. AST and ALT improved, but still slightly above normal. had normal AST and ALT on routine check 05/2021 (On Accutane) |
| TROPONIN NORMAL | COVID19 VACCINE (COVID19) | 1421801-1 | 1 day after 2nd shot had fever, abdominal pain, chest pain, shortness of breath, tachycardia.. Was seen in ER. Fever. abdominal pain resolved in 2-3 days. Chest pain still present, and shortness of breath 5 days after |
| TROPONIN NORMAL | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| TUNNEL VISION | COVID19 VACCINE (COVID19) | 1397729-1 | The morning after the 1st COVID vaccine, patient experienced a sudden onset of feeling clammy, pale and narrowing vision. Near syncopal episode. Resolved after lying down and resting for about 10 minutes. |
| TUNNEL VISION | COVID19 VACCINE (COVID19) | 1592988-1 | Pt presented with guardian at point of sale to report fainting spell in the bathroom with guardian. Reported feeling clammy and nauseous after shot but attributed to anxiousness. Guardian said the the patient started tunnel vision while walking to the bathroom then collapsed onto guardian. She did not loose consciousness. Had the patient sit back down in the waiting room. Her pulse was 80bpm regular rate and rhythm. Pale paler with clammy feel. Pt was alert and followed directions but did not speak for herself. Blood Pressure was taken 110/81 79BPM. Vaccine was given about 12:30 with reporting to point of sale at 12:56pm Monitored patient for 5 more minutes. She was feeling better and able to stand with out any faintness. Sent on her way to call if any reoccurrence. |
| UNDERDOSE | COVID19 VACCINE (COVID19) | 1662850-1 | Vaccine reconstituted incorrectly. 0.8mL instead of 1.8mL of diluent used. 3 patients received the higher concentrated doses. Patients notified. No adverse reactions reported. |
| UNEVALUABLE EVENT | COVID19 VACCINE (COVID19) | 1300489-1 | NO |
| UNEVALUABLE EVENT | COVID19 VACCINE (COVID19) | 1407125-1 | None stated. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-----------------------------------|---------------------------|---------------------------|--|
| UNRESPONSIVE TO STIMULI | COVID19 VACCINE (COVID19) | 1297599-1 | 16yoF was accompanied with an adult who was present for the vaccination. The COVID-19 Vaccine Pfizer-BioNTech 0.3mL administered IM in right deltoid while patient was sitting. Patient remained sitting for 10 minutes after administered dose. Patient reported feeling well after the injection. Patient stood up while we continued to talk, after 2 more minutes passed out while standing. Suddenly, patient began to go limp and her eyes crossed and rolled back. Patient fell backwards into the privacy curtain and into aisle 13 of the store. Patient's head bounced off the floor. Immunizer knelt next to patient. Patient was unresponsive until immunizer placed cold hand on back of neck and front of chest to check if she was breathing, immunizer calmly guided patient to breath, slow deep breaths into the belly and patient's eyes fluttered open. She said her head hurt really bad. Immunizer offered to the accompanying adult to call EMS because patient should be evaluated after hitting her head so hard. The accompanying adult denied EMS, then stating that patient had previously fainted while walking and said that she would be fine. Immunizer advised patient to remain laying down while immunizer got some ice. Ice was then placed on the back of the head. Patient slowly stood up after laying for 10 minutes and was walked over to a sitting area to put feet up and continue with ice for another 5 minutes before the accompanying adult wanted to leave. |
| UNRESPONSIVE TO STIMULI | COVID19 VACCINE (COVID19) | 1299511-1 | Systemic: Fainting / Unresponsive-Mild |
| UNRESPONSIVE TO STIMULI | COVID19 VACCINE (COVID19) | 1320442-1 | Systemic: Fainting / Unresponsive-Severe, Systemic: Nausea-Mild, Additional Details: Patient received injection and got up from chair. After standing for a few minutes he fainted and lost consciousness. His mom and I got him to the floor and he regained consciousness within a minute. He said he felt thirsty and nauseated. His mom gave him water. He laid on the floor for 20 minutes and then sat up for a few minutes. Then he walked out of the dressing room and left the store. |
| UNRESPONSIVE TO STIMULI | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| URINE ANALYSIS | COVID19 VACCINE (COVID19) | 1355803-1 | Patient awoke from a nap with chest tightness, difficulty breathing, and nausea, symptoms have continued intermittently, and are associated w/fatigue. |
| URINE ANALYSIS | COVID19 VACCINE (COVID19) | 1446379-1 | "Urinating blood multiple times. This has occurred over the course of 2 days now and is ongoing, but getting a bit better. Symptoms came 1 day after receiving 2nd dose of Pfizer COVID 19 vaccination. At the advice of the doctor, we went to the Emergency Room as it was Friday night at 9 p.m. A urine test confirmed blood in the urine and the diagnosis was ""gross hematuria"" and ""adverse effect of vaccine, initial encounter""" |
| URINE ANALYSIS | COVID19 VACCINE (COVID19) | 1591536-1 | 8/19/21 @ 1654 in the afternoon, call received from parent that child was at the emergency department of Hospital. Had a reaction to vaccine or medication prior to arrival. Reported patient had a bad seizure. Pt advised to discontinue guanfacine, see primary care provider, and neurology follow up. Discharged home. |
| URINE ANALYSIS | COVID19 VACCINE (COVID19) | 1756937-1 | Debilitating vertigo, transported via ambulance to emergency room. |
| URINE LEUKOCYTE ESTERASE POSITIVE | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1312005-1 | Hives after injection on right arm. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1322147-1 | Hives on the upper back shoulder and lower buttocks |
| URTICARIA | COVID19 VACCINE (COVID19) | 1341473-1 | Diffuse urticaria starting 1 week after vaccine, that has since lasted 2 days |
| URTICARIA | COVID19 VACCINE (COVID19) | 1411094-1 | Hives and edema on bilateral hands/arms |
| URTICARIA | COVID19 VACCINE (COVID19) | 1420763-1 | Approximately one week after 1st dose of Pfizer covid19 vaccine, patient developed a rash all over torso. Today, 3 weeks post vax#1, rash is still present. It is pruritic, covers entire torso (ant/post) from base of neck to pelvis/buttocks. Lesions are variable from small (5mm diam) raised, erythemic lesions to large (2-3cm diam) hives. Lesions on the back are coalescing to cover entire back. Pt's mother stated the individual lesions are coming together-rash worsening over past 2 weeks. OTC Topical cortisone helping with itch, but not with lesion resolution. Enc pt to reach out to PCP-Pediatrician and discuss possible systemic treatment such as PO anti-histamine or steroid taper. Pt rescheduled for dose #2 which will continue to be delayed until rash is completely resolved. Suggested 30 minute observation at next vaccine appointment. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1536269-1 | Developed reactions to cold in the form of hives, large welts, and swelling of the lips. First reaction was a softball size welt on June 25th after icing sore elbow. Now any contact with chilled or iced items produces welts, swelling, and itching. Contact with cold river water while rafting August 8 produced hives over entire body. Contact with ice cream on 8/7 produced swollen lips. Very concerned as my daughter is a competitive swimmer. While the first notable welt on elbow, was approximately 9 days after 2nd vaccine, she said she noticed an itchy sensation when exposed to cold at some point prior to this but never before 2nd vaccine. |
| URTICARIA | COVID19 VACCINE | 1583816-1 | urticarial |

| Symptoms | (COVID19 Vaccine) Type | VAERS ID | Adverse Event Description |
|--------------------------------|---------------------------|---------------------------|--|
| URTICARIA | COVID19 VACCINE (COVID19) | 1704744-1 | Mom called 9/1/2021 stating that patient was experiencing hives and itching on his chest and back post COVID 1st dose. She said that at the time he had a bright red welt at vaccine site. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1715365-1 | Angiderma to head, lips, eyes, throat and hives on torso and extremities. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1788209-1 | Experienced urticaria and symptoms similar to dermatographism. Plan: order COVID test due to fever. Benadryl at night, Zyrtec during the day. Cortisone cream on rash. Providing Prednisone 10mg for severe urticaria. Advised to seek further medical care if feeling any swelling/tingling around mouth. |
| URTICARIA | COVID19 VACCINE (COVID19) | 1791131-1 | Lip, chin, face swelling; Rash and hives all over entire body; Rash and hives all over entire body; This is a spontaneous report from a contactable consumer (patient). A 12-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number and expiration date were not reported) on the left arm on 03Sep2021 (15:00) as dose 1, single, with route of administration unspecified, for COVID-19 immunization at the physician's office. Medical history included sulfa meds allergy. The patient was not pregnant at the time of vaccination. There were no concomitant medications. The patient previously took amoxicillin, and had drug allergy. The patient did not receive other vaccines in four weeks. On 06Sep2021 (20:00), the patient had lip, chin, and face swelling, rash, and hives all over entire body. The events were reported to be serious (medically significant); and had resulted into a doctor or other healthcare professional office/clinic visit and emergency room/department or urgent care. The patient had received steroids, allergy medications and asthma medications as treatment for the events. The outcome of the events was not recovered. The patient did not have COVID-19 prior to vaccination, and has not been tested post-vaccination. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up. |
| UTERINE DILATION AND CURETTAGE | COVID19 VACCINE (COVID19) | 1840949-1 | Patient received first dose 08/14/21, had symptoms of light headedness and diaphoresis 2 days later with menorrhagia. She was seen in the ER. She was found to be anemic. Was prescribed iron supplements. She received her second dose 3 weeks later and again had menorrhagia. She was seen in the ER a week later with menorrhagia and severe anemia. She came back the next day and required a blood transfusion and a D and C. She was in the hospital for 3 days. She has a history of heavy menstrual bleeding. |
| VACCINATION COMPLICATION | COVID19 VACCINE (COVID19) | 1463557-1 | Palpitations and chest pain Seen in ER on 7/8/21 and admitted overnight with rising troponin levels, improved by next day. Diagnosis of myocarditis related to COVID19 vaccine |
| VACCINATION COMPLICATION | COVID19 VACCINE (COVID19) | 1719419-1 | After the 2nd vaccination patient complained of arm soreness that evening- which we expected. Upon waking he had pain in his collar bone, shoulder and under his arm. His arm and underarm area were swollen and his lymph nodes under his arm was also swollen. The pain has been continuous thru-out the weekend and into this week. We have given him some pain medication (over the counter) and it is slowly subsiding. A week after his first vaccination on 8/24/2021 he complained of a swollen lymph node under his right arm where he got the vaccination. His PCP looked at him and had us talk to our oncologist- it was determined it was most likely from the vaccination and a reaction he was having. |
| VACCINATION COMPLICATION | COVID19 VACCINE (COVID19) | 1774733-1 | Vaccination related malaise; fatigue; local reaction/ sore arm; Fever; local reaction/ sore arm; undiluted second dose of pfizer-biontech covid-19 vaccine; Administered undiluted second dose of Pfizer-BioNTech Covid-19 Vaccine; Paronychia; This is a spontaneous report from a contactable other health care professional. A 14-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, lot number: EW0191 and expiration date: 30Sep2021) via an intramuscular route of administration in right deltoid on 11Jun2021 at 11:55 AM (age at vaccination 14-year-old) as DOSE 2, 0.3 ml, SINGLE for covid-19 immunisation at physician's office. The patient's medical history included GERD from Dec 2020 to Feb 2021, ongoing paronychia from Jun2021, ongoing obesity from Mar2019, ongoing allergic rhinitis from Jun2016. Concomitant medications were not reported. Patient did not receive any other vaccines within 4 weeks prior to covid vaccine. The patient previously took first dose of BNT62B2 (PFIZER-BIONTECH COVID-19 VACCINE, formulation: solution for injection, Lot number: EW0177) on 19May2021 10:55 AM (age at vaccination 14-year-old) at via intramuscular route of administration in left deltoid as DOSE 1, SINGLE for covid-19 immunization. On 11Jun2021, a 14-year-old male patient administered undiluted second dose of Pfizer-Biontech covid-19 vaccine. On 19Jun2021, the patient experienced local reaction/ sore arm, fatigue, fever. On an unknown date, the patient experienced vaccination related malaise and paronychia. The patient did not receive any treatment for the events. The patient underwent lab tests and procedures, which included on 18Jun2021 Brain natriuretic peptide: 21 pg/mL (normal low: 0, normal high: 99), C-reactive protein: less than 0.5 mg/dl (normal high: 0.5), electrocardiogram: normal, ESR (red blood cell sedimentation rate): 10 mm/hr (normal low: 0, normal high: 15), troponin I: less than 3 ng/l (normal high: 45). The NDC number of Pfizer-BioNTech Covid-19 Vaccine: 59267-1000-1. These events local reaction/ sore arm, fatigue, fever were considered non-serious. The outcome of the events local reaction/ sore arm, fatigue, fever was recovered in 2021 and unknown for other events. The physician considers the Pfizer product had a causal effect to the adverse event. Information on Lot/Batch number was available. Additional information has been requested. Follow up (06Jul2021 and 09Jul2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to the HCP letter sent that included: The physician considers the Pfizer product had a causal effect to the adverse event. Added new events local reaction/ sore arm, fatigue, fever, vaccination related malaise and paronychia. Added all lab data. Added all medical history. Follow-up attempts are completed. No further information was expected. |
| VACCINATION ERROR | COVID19 VACCINE (COVID19) | 1283418-1 | The information provided on the screening and consent form was filled out incorrectly. The person put that they were born in 2004, but they were born in a different year. They do not meet the FDA age criteria to receive the vaccine. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|--------------------------------|---------------------------|---------------------------|---|
| VACCINATION SITE PAIN | COVID19 VACCINE (COVID19) | 1531071-1 | Tachycardia (heart rate as high as 182); Fever (as high as 103.2 even on ibuprofen); Body aches; Headache; Injection site pain; Joint pain; This is a spontaneous report from a contactable consumer (patient). A 17-year-old non-pregnant female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Batch/Lot number was not reported), dose 2 via an unspecified route of administration, administered in Arm Left on 03May2021 11:30 (at the age of 17-year-old) as dose 2, single for COVID-19 immunization. Medical history included, known allergies: Some foods (banana, avocado, almonds, cucumbers, some raw vegetables) from an unknown date and unknown if ongoing and patient did not have other medical history. Concomitant medication(s) included cetirizine hydrochloride (ZYRETIC); pseudoephedrine hydrochloride (SUDAFED [PSEUDOEPHEDRINE HYDROCHLORIDE]); levocetirizine dihydrochloride (XYZAL) and diphenhydramine hydrochloride (BENADRYL) taken for an unspecified indication, start and stop date were not reported (other medications the patient received within 2 weeks of vaccination). Patient was not pregnant at the time of vaccination. The patient previously received first dose of BNT162B2 (Lot number: unknown), administered in Left arm on 13Apr2021 11:30 AM (at the age of 17-year-old) for COVID-19 Immunization. Facility where the most recent COVID-19 vaccine was administered: Other. Patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 03May2021 15:00, patient experienced tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. Patient received 400 mg ibuprofen as treatment for adverse events. The events were assessed as non-serious, did not result in death, not life threatening, did not cause/prolonged hospitalization, not disabling/incapacitating, did not cause congenital anomaly/birth defect. The patient underwent lab tests and procedures which included Fever: 103.2 on 03May2021 (as high as 103.2), heart rate: 182 on 03May2021 (Tachycardia (heart rate as high as 182)). Therapeutic measures were taken as a result of tachycardia (heart rate as high as 182), fever (as high as 103.2 even on ibuprofen), body aches, headache, injection site pain, joint pain. The outcome of events was not recovered. No follow-up attempts are needed; information about lot/batch number cannot be obtained. |
| VACCINATION SITE PAIN | COVID19 VACCINE (COVID19) | 1692342-1 | Diarrhea; Soreness at vaccination site of left arm; This is a spontaneous report from a contactable consumer, the parent. A 12-year-old male patient received first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: FC3182) via an unspecified route of administration in the left arm on 04Sep2021 at 14:30 (at the age of 12-years-old) as a single dose for COVID-19 immunisation. Medical history included seasonal allergies and allergy to peanuts. It was also reported that the patient could have had COVID-19 in Jan/Feb2021 as family members had it, but the patient was not tested. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient did not receive any other vaccines within four weeks prior to the vaccination. Concomitant medications included over the counter cetirizine hydrochloride (WAL ZYR) taken for allergies from an unknown date and unknown if ongoing. On 06Sep2021 at 08:00 in the morning, the patient experienced diarrhea which lasted all day and soreness at vaccination site of left arm. On 07Sep2021 in the morning, the patient still had diarrhea. The events did not result in doctor or other healthcare professional office/clinic visit, emergency room/department or urgent care. Therapeutic measures were not taken as a result of the events. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcome of the events soreness at vaccination site of left arm and diarrhea were not resolved at the time of this report. |
| VACCINATION SITE PAIN | COVID19 VACCINE (COVID19) | 1707043-1 | This spontaneous case was reported by a pharmacist and describes the occurrence of VACCINATION SITE PAIN (sore arm) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administered first shot to a 16-year-old) in a 16-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 058E21A) for COVID-19 vaccination. No Medical History information was reported. On 27-Aug-2021 at 2:30 PM, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. In August 2021, the patient experienced VACCINATION SITE PAIN (sore arm). On 27-Aug-2021, the patient experienced PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administered first shot to a 16-year-old). On 27-Aug-2021, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (administered first shot to a 16-year-old) had resolved. At the time of the report, VACCINATION SITE PAIN (sore arm) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medications was reported. No treatment drug details was reported. Most recent FOLLOW-UP information incorporated above includes: On 08-Sep-2021: Follow up received on 08-sep-2021 and contains no new information. |
| VACCINE BREAKTHROUGH INFECTION | COVID19 VACCINE (COVID19) | 1412057-1 | Got the vaccine on 6/13. Developed fatigue, sore throat, runny nose within 24 hours on 6/14. Was stable, but on 6/17 developed high fevers up to 101-102, erythematous rash on his neck, bilateral conjunctivitis and runny nose. Presented to the ED under my care on 6/18 due to ongoing fever, dehydration and neck pain. Currently undergoing full evaluation: COVID19 PCR positive. ESR, CRP, procalcitonin elevated. ALT/AST elevated High sensitivity troponin elevated. BNP normal. CBC with neutrophilic predominance, platelets clumped - repeating. RVP pending. Evaluating for MIS, COVID reinfection, post-vaccine reaction, different viral illness, post-covid reaction + development of a cellulitis. |
| VENTRICULAR DYSFUNCTION | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| VENTRICULAR EXTRASYSTOLES | COVID19 VACCINE (COVID19) | 1262397-1 | Suspected myocarditis. Chest pain with multiple intermittent dysrhythmias including complete heart block, junctional, PVCs. Trop leak. Elevated NT-proBNP. Planning for IVIG. |
| VERTIGO | COVID19 VACCINE (COVID19) | 1397920-1 | Vertigo with occasional headache |
| VERTIGO | COVID19 VACCINE (COVID19) | 1756937-1 | Debilitating vertigo, transported via ambulance to emergency room. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|---------------------|---------------------------|---------------------------|--|
| VIRAL TEST | COVID19 VACCINE (COVID19) | 1412447-1 | Labored breathing; chest pains; fast heart rate; This is a spontaneous report from a contactable consumer reported for himself. A 16-years-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration, administered in Arm Right on 13May2021 11:30 AM as unknown, single (at age of 15-years-old) for covid-19 immunisation. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. No other medications the patient received within 2 weeks of vaccination. Medical history included choanal atresia, tonsils and adenoids removed, ear tags. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant medications were none. On 04Jun2021 09:00, the patient experienced labored breathing, chest pains, fast heart rate. The adverse events resulted in emergency room/department or urgent care, hospitalization for 2 days. The adverse events received treatment included Aspirin, Ibuprofen. The patient underwent lab tests and procedures which included Nasal Swab: negative on 05Jun2021. Outcome of the event was not recovered. Information on the lot/batch number has been requested. |
| VIRAL TEST NEGATIVE | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1259688-1 | bp 128/76 pt w syncope 5 mins into monitoring. hit head on front left. monitored for s/sx of concussion. denies blurred vision head ache. monitored for 15mins post fall 09:07 am pt c/o blurring in right eye peripheral vision pt to check with pcp if symptoms continue or worsen. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1344851-1 | Person complained of light headiness, dizziness and blurred vision after receiving the first dose of the Pfizer vaccine. EMS was called and treated the individual on scene and was released on their own. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1354950-1 | PATIENT EXPERIENCED BLURRY VISION, SWEATING, NAUSEA, AND HEADACHE. PATIENT WAS GIVEN WATER AND GUM. PATIENT WAS REQUESTED TO STAY FOR LONGER MONITORING. WAS DISMISSED ONCE THE BLURRY VISION, SWEATING, AND NAUSEA SUBSIDED. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1367895-1 | Systemic: Allergic: Difficulty Breathing-Mild, Systemic: Chills-Mild, Systemic: Dizziness / Lightheadness-Mild, Systemic: blurry vision-Mild, Systemic: Shakiness-Mild, Systemic: Weakness-Mild, Additional Details: Patient reported leg weakness and blurred vision and dizziness/slight difficulty breathing upon getting ready to leave observation area. Said she hadn't eaten in a while and felt cold due to A/C in the store as well. BP was low and HR high, so called 911 to get her emergency help as she didn't feel like she could walk out of store safely. Felt strange and that her legs might give way. EMS arrived, vitals looked good, pt refused ambulance. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1677511-1 | Going to pass out; Immediately got dizzy; Sweating; Vision was grey and unclear; Vision was grey and unclear; All face and arm colors turned white; Could barely hear; This is a spontaneous report from a contactable consumer (patient). A 17-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 08Aug2021 (Batch/Lot number was not reported) as DOSE 2, SINGLE for covid-19 immunisation. Patient had allergies to Clindamycin and penicillin, green beans, raspberries, coffee, and tea. Patient was not pregnant. Patient received the first dose of bnt162b2 on 08Aug2021 (as reported), at the age of 17 years old. Concomitant medication included unspecified birth control rod in arm 3 months ago. Patient immediately got dizzy, started sweating, vision was grey and unclear, all face and arm colors turned white, could barely hear, and felt Like going to pass out on 08Aug2021. Pharmacist gave glucose tablets (4) not diabetic. Outcome of events was recovered in 2021. No follow-up attempts are possible; information about lot/batch number cannot be obtained. No further information is expected. |
| VISION BLURRED | COVID19 VACCINE (COVID19) | 1861272-1 | Vaccine yesterday. This morning about 9am, developed headache, blurry vision, abdominal pain, fatigue. |
| VISUAL IMPAIRMENT | COVID19 VACCINE (COVID19) | 1322379-1 | Patient described that she was seeing black surrounding her after 2 minutes receiving the Covid-19 vaccination. Patient was given 10 ml of Benadryl 12.5 mg /5 ml liquid immediately. After 5 minutes taking Benadryl, patient complained that she felt that her physical condition is getting worse; she was anxious. I decided to call 911 based on her existing medical condition. The 911 team arrived within 10 minutes and checked her health condition. Patient recovered and went home safe. |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------------|---------------------------|---------------------------|--|
| VISUAL IMPAIRMENT | COVID19 VACCINE (COVID19) | 1342017-1 | Received her first dose of the Pfizer COVID-19 vaccine on Sunday May 16,2021 at around 2:50 pm. At around 7:20 pm on May 16,2021 she stood up to walk to the bathroom. She began feeling nauseous when she stood up. While she was washing her hands, after going to the bathroom, she began to have difficulty with her vision. She describes white and blue dots obstructing her vision in both eyes. She also began to experience loud tinnitus. She described hearing multiple frequencies. The problem with her vision and the tinnitus continued as she walked through our house to a couch where she laid down. The vision problem and tinnitus continued while she laid on the couch. Her breathing was rapid but she thinks this may have been due to the stress caused by her other symptoms. This episode lasted for several minutes and then the vision problem resolved. The tinnitus continued for several minutes after the vision problem resolved. The intensity of the tinnitus slowly decreased until it finally stopped. The following evening, she experienced tinnitus for a few minutes but it was less intense than it was the previous evening. She very rarely has experienced tinnitus in the past. She has very infrequently experienced brief episodes of orthostatic hypotension when she was dehydrated. When this event occurred, she felt like she was well hydrated. This event lasted much longer and she has never experienced this problem with her vision in the past. |
| VISUAL IMPAIRMENT | COVID19 VACCINE (COVID19) | 1402157-1 | Systemic: Confusion-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Fainting / Unresponsive-Mild, Systemic: Flushed / Sweating-Medium, Systemic: Nausea-Medium, Systemic: Tinnitus-Medium, Systemic: Visual Changes/Disturbances-Medium, Systemic: Weakness-Medium |
| VISUAL IMPAIRMENT | COVID19 VACCINE (COVID19) | 1502004-1 | Approximately 3 minutes after injection, pt. reported that her vision had gone black, her ears were ringing, and she felt faint. I notified the nurse immediately. Within another minute her breathing became rapid and faint. She was given water and coached to breath slowly and deeply. The nurse checked her blood pressure with a result of 67/22. A second BP check resulted in 70/27. The nurses transferred her to the ER. In the ER, a third BP check 20 minutes after injection resulted in a normal reading of approximately 110/70. She continued to take oral fluids for approximately one hour before being released. The medical staff reported to us that this is a completely normal reaction for many people to all vaccinations, and suggested that she should get the second dose of Pfizer vaccine in 3-4 weeks. However, when we check the CDC website we find that these are anaphylactic symptoms and should not get the 2nd dose of Pfizer, so we are greatly concerned and decided to report the event. |
| VITAL SIGNS MEASUREMENT | COVID19 VACCINE (COVID19) | 1347710-1 | A 17 Year old boy, received his first dose of COVID -vaccine, Pfizer. He walked out of the health room feeling fine. Stood outside in the waiting room talking to his mom during his 15 min observatory period. within 10 mins, he fainted and fell on his face on the floor. Till the pharmacist came out to him, the pharmacist kept tapping his shoulder and called his name out loud, he recovered and woke up. pharmacist checked his BP and was 121/71 and 68 HR. 911 was called , and paramedics came in, checked his vitals and all were normal . He just hit his chin when he fell, and bled from his gum, no loose teeth reported and a chin wound that might need glue stitches per paramedics. Patient was fine and talking when paramedics transported him to the hospital. |
| VOMITING | COVID19 VACCINE (COVID19) | 1058308-1 | "The child was administered the vaccine at about 11:15 a.m on 2/7/2021. She woke up about 14 hours later with vaccine side effects the family was prepared for, including headache, chills, nausea, vomiting and fatigue. This all resolved within 48 hours. Approximately one week later, the child woke up again in the night with severe chills in the middle of the night. It was a sudden onset following a week of feeling well. She had to sit in a warm/hot shower for an hour to get warm. She described it as ""freezing to death."" She has never experienced anything like this before." |
| VOMITING | COVID19 VACCINE (COVID19) | 1334703-1 | Vaccine Administered: Pfizer COVID-19 Patient reaction: Flushing Pale Skin Nausea/Vomiting Fainting Dizziness Action taken: Antihistamine given. Outcome: Patient recovered. Late charting for 5/17/2021 - 5ml Diphenhydramine given PO 10 minute after c19 vaccine - patient dizzy, diaphoretic, and nauseous. Emergency medication entered and signed. |
| VOMITING | COVID19 VACCINE (COVID19) | 1369033-1 | tired, body aches, restricted breathing, upset stomach, vomiting, congestion |
| VOMITING | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |
| VOMITING | COVID19 VACCINE (COVID19) | 1379732-1 | "Pt was given his 2nd dose of Pfizer vaccine at pharmacy on 6/3/21 at 1:20pm. Minutes after the vaccine pt developed headache, stiffness of neck, dizziness, fatigue and SOB. Epi-pen was brought out but never administered, pt was there for about 45 min. Was sent home and took Advil 400mg. Was playing badminton with lots of running 30-45 min prior to vaccine. No other vaccines given in the past year. Since the vaccine, pt has had fever up to 102. Continued headache, neck stiffness. 1st night 6/3/21- bad headache, throbbing headache all around head but worse back right side and then ""spikes"" on left side (like someone was hitting him with an axe) and fell asleep d/t sever pain, trouble breathing in the next few days 2nd night 6/4/21- neck pain and stiffness was really bad, he looked pale and almost disoriented. Had fever. Slow to respond. Would get rush of bad headache if he moved his neck too fast. Afraid he would fall down if he moved too fast. 3rd night 6/5/21 - (called 911) chest pain, difficulty breathing, vomited stomach acid, pain radiated down chest to the left, pain only when breathing in and went away the next AM 6/7/21 Chest still feels sore on Left side. Biggest issue right now is headache." |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|-------------------|---------------------------|---------------------------|---|
| VOMITING | COVID19 VACCINE (COVID19) | 1392073-1 | Approximately 24 hours after secondPfizer dose, 17 year old male awoke in the morning and was complaining of intense throat pain radiating into the upper chest relieved by sitting up. NSAIDS not helpful, went to narcotic med to relieve, which it did with single tab of medication. Other symptoms, fatigue, body aches, low fever. Waxed and waned over 48 hour time period from onset, with another intense episode of throat/chest pain 24 hours in from onset requiring narcotic pain med to relief. Again this was in the morning. One episode of vomiting during second intense period with what looked like water that just hadn't gone down his throat, and following this he reported some relief from what he described as a radiating burning sensation up under the lower jaw and radiating into the upper chest. No shortness of breath ever. Burning sensation in throat and chest resolved by 72 hours with no more episodes of the acute throat and chest pain after the two episodes. While ED was considered due to the distress being experienced, we decided against since the narcotic med was helping and no shortness of breath was being experienced. I did try to get on with the CDC to report my concerns when it was happening to see if others were reporting this, then because it was a concerning reaction, but site was difficult to navigate and I was trying to monitor. I did not call the pediatrician at that time as I am a health care worker and felt I could assess and make decisions based on findings. Following the recent reports of myocarditis in teens, especially males, I felt obligated to report this experience. This child has no history of heart ailment. No tests were done to assess what might have been the cause. I assumed it was an outside-the-box reaction to the second Pfizer dose. |
| VOMITING | COVID19 VACCINE (COVID19) | 1396029-1 | Headache, vomiting, confusion, lost ability to speak, hypokalemia, tingling in arm all in evening of 6/12 |
| VOMITING | COVID19 VACCINE (COVID19) | 1407761-1 | "Patient is a 13 yo male, otherwise healthy, who received his second covid vaccine on Saturday. He did well until Tuesday morning when he started to have emesis and ""chest pressure"". He was brought to the ER where work up included a troponin level that was elevated at 20.43. Due to concern for myocarditis, he was transferred and admitted to the hospital for further work up and management. -Echo results note that the cardiac function and coronaries are normal. Very trace pericardial effusion -EKG at Good Patient consistent with pericarditis -Repeat troponin 15 Discharged 6/17" |
| VOMITING | COVID19 VACCINE (COVID19) | 1444579-1 | Patient Vomited about 10 minutes after the Pfizer COVID-19 vaccine. We gave the mother a water bottle, asked how he was and he said he felt better. About 10 minutes later they left without checking back in with the staff. The RPh on duty was watching him for other reactions and he seemed fine. |
| VOMITING | COVID19 VACCINE (COVID19) | 1450153-1 | Patient developed fatigue 3 hrs post injection. The following day, developed fever to 103F, nausea and vomiting, dizziness and pleuritic chest pain, difficulty breathing. fever last for 2 days. Went to ED for evaluation on day 3 (7/1). Symptoms ultimately resolved, but then developed facial hives and facial swelling on day 5 post vaccine. |
| VOMITING | COVID19 VACCINE (COVID19) | 1532067-1 | Patient experienced fever, myalgias, anorexia/nausea/emesis 1d following COVID vaccine, 2d after had chest pain with emesis, presented to ED and was hospitalized with myocarditis. Treated with IVIG, ketorolac, acetaminophen as well as milrinone to support cardiac function. Currently hospitalized in PICU 4d following vaccine administration. |
| VOMITING | COVID19 VACCINE (COVID19) | 1602814-1 | Vomiting every 10-15 minutes. Inability to keep fluids down |
| VOMITING | COVID19 VACCINE (COVID19) | 1634192-1 | My son got his first dose of the Pfizer Covid-19 Vaccine and five days later he had sharp pains in his side followed by vomiting three times and being in pain all night. I took him to pediatrician in morning and was told to go to the ER where they did an emergency appendectomy on the Tuesday following his vaccine. I am not quite sure if it is a direct result of the vaccine but I did research on the website as well as the University and it states a 1/2500 chance through their testing. |
| VOMITING | COVID19 VACCINE (COVID19) | 1659713-1 | Pt was given the shot and almost immediately felt woozy, light headed. The practitioner left the room to get a cold compress and upon returning found the patient had passed out in the chair and fell forward and hit her head on the countertop. She proceeded to have a seizure per her mother. She then vomited and then was beginning to feel better. About 10 minutes later she complained of blurred vision and ringing in the ears. Upon talking to the pediatrician's office the mom then proceeded to call for emergency services. She was then transported to the hospital via ambulance. |
| VOMITING | COVID19 VACCINE (COVID19) | 1678879-1 | vomiting, malaise, headache |
| VOMITING | COVID19 VACCINE (COVID19) | 1693635-1 | Acute myocarditis. Patient initially developed headache, chest pain, nausea and vomiting. All other symptoms resolved, but chest pain continued, so he presented to the ED 2 days after receiving the vaccine (Wed, 9/8). He was found to have elevated troponins at that time and was hospitalized for further observation and management. His chest pain resolved by Friday, 9/10. His troponins fluctuated between 4.14-9.94. He was discharged in good condition with downtrending troponins on Saturday, 9/11. |
| VOMITING | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| VULVAL ULCERATION | COVID19 VACCINE (COVID19) | 1347910-1 | Severe vulvar ulcers (Lipschutz) |
| WHEELCHAIR USER | COVID19 VACCINE (COVID19) | 1861660-1 | loss body feeling-weak- numb Headache uses a wheel chair now was hospitalized for 3days her body shakes uncontrollably and she cant stop it Has been diagnosed with Guillemin barre syndrome She sees a neurologist now to try to figure out the try to figure how to get her nerves to react but nothing takes away the pain |
| WHEEZING | COVID19 VACCINE (COVID19) | 1369584-1 | pt mom yelled for help. other employee dialed 911. mom reporting that patient keeps fainting/feeling nausea. used smelling salt x 2. then had patient have small sips of orange juice. patient began feeling nausea again and threw up. pt started breathing heavy/flushed/wheezing administered epi-pen (1st dose incomplete- bent needle) 2nd dose successful in muscle of right thigh. patient reported feeling better. took bp 94/54 pulse 88. ems arrived and took over. patient left with ems |

| Symptoms | Vaccine Type | VAERS ID | Adverse Event Description |
|----------------------------------|---------------------------|---------------------------|---|
| WHEEZING | COVID19 VACCINE (COVID19) | 1651640-1 | Within 10 minutes after receiving the vaccination, patient reported headache and blurred vision. He was sweating with shallow wheezing breaths. He reported trouble breathing. While asking him questions, his head rolled back and his arms and legs began convulsing for a couple seconds. Epinephrine from the e-kit was administered and emergency services were called. Patient was moved to prone position on the floor, breathing quickly, with pale lips and complaints of numb fingers. Emergency services arrived, were informed of events, and took over. They determined he was probably having a panic attack, although he did not report nerves regarding the vaccination. Patient had never experienced a reaction to previous vaccinations. Panic or fear of initial headache and blurred vision may have elevated reaction. Patient eventually left with family. |
| WHITE BLOOD CELL COUNT | COVID19 VACCINE (COVID19) | 1433686-1 | Hematuria and UTI symptoms with urgency, fever to 102F, leukocyte positive on OTC urine dip. |
| WHITE BLOOD CELL COUNT DECREASED | COVID19 VACCINE (COVID19) | 1249757-1 | Patient developed fatigue and headache within 24 hrs of receiving 1st vaccine, over the next several days she developed periorbital edema and cervical LAD. 6 days after vaccine she developed fever and chills and was febrile to 103. She went to the ER and labs revealed pancytopenia. She was admitted on the evening of 4/20 and was observed for 36 hrs. Symptoms improved without antibiotics |
| WHITE BLOOD CELL COUNT DECREASED | COVID19 VACCINE (COVID19) | 1376330-1 | 8 hours post vaccination, developed subjective fever, chills, headache, malaise 6/2: Around 32 hours post vaccination, developed acute chest pain, shortness of breath, difficulty breathing when laying flat. Required ibuprofen. 6/3: felt better, required ibuprofen. Presented to ED on 6/4 with continued symptoms (chest pain, shortness of breath), noted to have elevated troponins. Transferred to Hospital on 6/4 to ICU for monitoring. To the floor on 6/5. Clinically doing well just on NSAIDs with slowly decreasing troponins. Dx: probable acute myocarditis per cardiology based on clinical symptoms and troponin leak |
| WHITE BLOOD CELL COUNT INCREASED | COVID19 VACCINE (COVID19) | 1704984-1 | right neck pain, fatigue, anorexia, then emesis, fever, red eyes, rash, diarrhea, tachycardia, hypotensive, cervical lymphadenopathy IVIG, pulse steroids, anakinra |
| WHITE BLOOD CELL COUNT NORMAL | COVID19 VACCINE (COVID19) | 1441528-1 | "Fever to 101.3 and malaise night of vaccine, ""bad cough"" on the following day with chest pain which resolved over a few days, then she developed bilateral ankle swelling and pain 80 hours later with a rash and swelling spreading up to her thighs and down through her feet. hands also swelled and turned white (sounds like Raynaud's). knee pain resulting in difficulty sleeping at night. tachycardic on exam. evaluated in clinic on 6/11 and follow up on 6/15. noted loss of appetite for a week and fatigue. Myalgias made ambulation painful. instructed to use NSAIDs and elevation and she improved over the next few days" |
| WRONG PRODUCT ADMINISTERED | COVID19 VACCINE (COVID19) | 1775320-1 | The patient, who is 16 years of age, was given Moderna vaccine in error. She should have received the Pfizer vaccine. |

Note: Submitting a report to VAERS does not mean that healthcare personnel or the vaccine caused or contributed to the adverse event (possible side effect).

Notes:

Caveats: VAERS accepts reports of adverse events and reactions that occur following vaccination. Healthcare providers, vaccine manufacturers, and the public can submit reports to VAERS. While very important in monitoring vaccine safety, VAERS reports alone cannot be used to determine if a vaccine caused or contributed to an adverse event or illness. The reports may contain information that is incomplete, inaccurate, coincidental, or unverifiable. Most reports to VAERS are voluntary, which means they are subject to biases. This creates specific limitations on how the data can be used scientifically. Data from VAERS reports should always be interpreted with these limitations in mind.

The strengths of VAERS are that it is national in scope and can quickly provide an early warning of a safety problem with a vaccine. As part of CDC and FDA's multi-system approach to post-licensure vaccine safety monitoring, VAERS is designed to rapidly detect unusual or unexpected patterns of adverse events, also known as "safety signals." If a safety signal is found in VAERS, further studies can be done in safety systems such as the CDC's Vaccine Safety Datalink (VSD) or the Clinical Immunization Safety Assessment (CISA) project. These systems do not have the same limitations as VAERS, and can better assess health risks and possible connections between adverse events and a vaccine.

Key considerations and limitations of VAERS data:

- Vaccine providers are encouraged to report any clinically significant health problem following vaccination to VAERS, whether or not they believe the vaccine was the cause.
- Reports may include incomplete, inaccurate, coincidental and unverified information.
- The number of reports alone cannot be interpreted or used to reach conclusions about the existence, severity, frequency, or rates of problems associated with vaccines.
- VAERS data are limited to vaccine adverse event reports received between 1990 and the most recent date for which data are available.
- VAERS data do not represent all known safety information for a vaccine and should be interpreted in the context of other scientific information.

Some items may have more than 1 occurrence in any single event report, such as Symptoms, Vaccine Products, Manufacturers, and Event Categories. If data are grouped by any of these items, then the number in the Events Reported column may exceed the total number of unique events. If percentages are shown, then the associated percentage of total unique event reports will exceed 100% in such cases. For example, the number of Symptoms mentioned is likely to exceed the number of events reported, because many reports include more than 1 Symptom. When more than 1 Symptom occurs in a single report, then the percentage of Symptoms to unique events is more than 100%. [More information.](#) ([/wonder/help/vaers.html#Suppress](#))

Data contains VAERS reports processed as of 11/12/2021. The VAERS data in WONDER are updated weekly, yet the VAERS system receives continuous updates including revisions and new reports for preceding time periods. Duplicate event reports and/or reports determined to be false are removed from VAERS. [More information.](#) ([/wonder/help/vaers.html#Reporting](#))

About COVID19 vaccines:

- For more information on how many persons have been vaccinated in the US for COVID19 to date, see <https://covid.cdc.gov/covid-data-tracker/#vaccinations/> (<https://covid.cdc.gov/covid-data-tracker/#vaccinations/>).
- One report may state that the patient received more than one brand of COVID-19 vaccine on the same visit. This is a reporting error, but explains why the total number of reports may not equal the total number of COVID-19 vaccine doses.

Help: See [The Vaccine Adverse Event Reporting System \(VAERS\) Documentation](#) ([/wonder/help/vaers.html](#)) for more information.

Query Date: Nov 23, 2021 9:28:26 PM

Suggested Citation:

United States Department of Health and Human Services (DHHS), Public Health Service (PHS), Centers for Disease Control (CDC) / Food and Drug Administration (FDA), Vaccine Adverse Event Reporting System (VAERS) 1990 - 11/12/2021, CDC WONDER On-line Database. Accessed at <http://wonder.cdc.gov/vaers.html> on Nov 23, 2021 9:28:26 PM

Query Criteria:

Age: 3-5 years; 6-17 years
State / Territory: Oregon
Vaccine Products: COVID19 VACCINE (COVID19)
VAERS ID: All
Group By: Symptoms; Vaccine Type; VAERS ID
Show Totals: False
Show Zero Values: Disabled