



Clinician Referral Guide to the Victorian Specialist Immunisation Services (VicSIS)

The purpose of this document is to provide clinicians and vaccine providers with additional information for when it is appropriate to refer patients into VicSIS vs when patients can receive their vaccines in clinic.

Does the patient meet any of the criteria listed in the VicSIS [Referral Form](#)?

Patients who experience a significant AEFI following a dose of a COVID-19 vaccine should be referred to a VicSIS clinic for further assessment. **A report of this AEFI should first be made to SAEFVIC – see overleaf for more information.**

Yes

Refer patient to

[The Victorian Specialist Immunisation Services \(VicSIS\)](#)

No

Patients with a cardiac history:

- myo/peri/endocarditis >6 months prior to vaccination
- Coronary artery disease or myocardial infarction
- Stable heart failure
- Arrhythmias
- history (not acute) of rheumatic fever or rheumatic heart disease
- Kawasaki disease
- Most congenital heart diseases or implantable cardiac devices

Please refer to the [ATAGI guidance on myocarditis and pericarditis after mRNA vaccines](#)

Patients with Allergy

- Previous history of anaphylaxis to other vaccines or multiple drugs including anaphylaxis to food, venom, or latex
- Previous history of anaphylaxis to other vaccines or multiple drugs Allergic conditions including asthma, atopic dermatitis (eczema), or allergic rhinitis (hay fever)

Follow current <https://www.allergy.org.au/hp/papers/guide-allergy-and-covid-19-vaccination>

Patients with Haematology conditions

- History of venous thromboembolism in typical sites (DVT or pulmonary embolism)
- Predisposition to form blood clots (e.g. Factor V Leiden) or other non-immune thrombophilic disorders
- Family history of clots or clotting conditions
- Receiving anticoagulant medications
- History of ischaemic heart disease or cerebrovascular accident
- Current or past history of thrombocytopenia* including [idiopathic thrombocytopenic purpura \(ITP\)](#)

Please see the recent [ATAGI and THANZ statement on TTS and the COVID-19 vaccine](#)

Patients with other chronic medical conditions e.g.

- Significantly immunocompromised (e.g. on chemotherapy, DMARDs, post bone marrow transplant)
- On anticoagulants with INR>3
- Previous multiple sclerosis/[Guillain-Barré syndrome \(GBS\)](#)

Please see recent advice on [Immunocompromise link MVEC resources](#)

Are you concerned your patient requires a mixed vaccine schedule?

Follow current [ATAGI advice on mixed schedules](#)

Proceed to routine vaccination at GP clinic or vaccine hub

*if platelets <20, reduce risk of haematoma at injection site with pressure/cool compress

Other helpful resources

- [Primary Care Approach to TTS after AZ](#)
- [COVID-19 vaccination decision guide for women who are pregnant, breastfeeding or planning pregnancy](#)
- [MVEC resources](#)
- [COVID-19 vaccination – ATAGI clinical guidance on COVID-19 vaccine in Australia in 2021 | Australian Government Department of Health](#)
- **Contact the Coronavirus hotline on 1800 020 080 (option 4).**