From the 10/1/2021 release of VAERS data:

Found 75,605 cases where Vaccine targets COVID-19 (COVID19) and Hospitalized

Table

<table>
<thead>
<tr>
<th>Vaccine/Manufacturer</th>
<th>Count</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>6VAX-F / GLAXOSMITHKLINE BIOLOGICALS</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>ANTH / EMERGENT BIOSOLUTIONS</td>
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</tr>
<tr>
<td>BCG / UNKNOWN MANUFACTURER</td>
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</tr>
<tr>
<td>COVID19 / JANSSEN</td>
<td>5,452</td>
<td>7.21%</td>
</tr>
<tr>
<td>COVID19 / MODERNA</td>
<td>20,384</td>
<td>26.96%</td>
</tr>
<tr>
<td>COVID19 / PFIZER/BIONTECH</td>
<td>54,373</td>
<td>71.92%</td>
</tr>
<tr>
<td>COVID19 / UNKNOWN MANUFACTURER</td>
<td>247</td>
<td>0.33%</td>
</tr>
<tr>
<td>DF / SANOFI PASTEUR</td>
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</tr>
<tr>
<td>DTAP / SANOFI PASTEUR</td>
<td>1</td>
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</tr>
<tr>
<td>DTAPIPV / SANOFI PASTEUR</td>
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<tr>
<td>FLU4 / GLAXOSMITHKLINE BIOLOGICALS</td>
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<tr>
<td>FLU4 / SEQIRUS, INC.</td>
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</tr>
<tr>
<td>FLUA3 / NOVARTIS VACCINES AND DIAGNOSTICS</td>
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</tr>
<tr>
<td>FLUX / UNKNOWN MANUFACTURER</td>
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<td>HEPA / GLAXOSMITHKLINE BIOLOGICALS</td>
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<tr>
<td>HPV9 / MERCK &amp; CO. INC.</td>
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<tr>
<td>IPV / SANOFI PASTEUR</td>
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<td>0%</td>
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<tr>
<td>MENB / NOVARTIS VACCINES AND DIAGNOSTICS</td>
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<td>0%</td>
</tr>
<tr>
<td>Vaccines</td>
<td>Count</td>
<td>Percentage</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>-------</td>
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</tr>
<tr>
<td>MMR / MERCK &amp; CO. INC.</td>
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</tr>
<tr>
<td>MNQ / SANOFI PASTEUR</td>
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<tr>
<td>PNC / PFIZER/WYETH</td>
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<td>0%</td>
</tr>
<tr>
<td>PNC13 / PFIZER/WYETH</td>
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<tr>
<td>PPV / MERCK &amp; CO. INC.</td>
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<tr>
<td>TDAP / GLAXOSMITHKLINE BIOLOGICALS</td>
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<td>TDAP / SANOFI PASTEUR</td>
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<tr>
<td>TYP / SANOFI PASTEUR</td>
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<tr>
<td>UNK / UNKNOWN MANUFACTURER</td>
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<tr>
<td>VARZOS / GLAXOSMITHKLINE BIOLOGICALS</td>
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<td>0%</td>
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<tr>
<td>VARZOS / UNKNOWN MANUFACTURER</td>
<td>3</td>
<td>0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>† 81,304</td>
<td>† 107.54%</td>
</tr>
</tbody>
</table>

† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 75605 (the number of cases found), and the Total Percentage is greater than 100.

### Case Details

**This is page 1 out of 152**

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**VAERS ID:** [902479](history)

**Form:** Version 2.0

**Age:** 46.0

**Sex:** Female

**Location:** Kansas

**Vaccinated:** 2020-12-14

**Onset:** 2020-12-14

**Days after vaccination:** 0

**Submitted:** 0000-00-00

**Entered:** 2020-12-15
<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  
Purchased by: ?

Symptoms: Chest pain, Feeling abnormal, Flushing, Intensive care
SMQs: Anaphylactic reaction (broad), Dementia (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Hypersensitivity (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 1 days  
Extended hospital stay? No  

Previous Vaccinations:  
Other Medications: unknown  
Current Illness: No  
Preexisting Conditions: unknown  
Allergies: No  
Diagnostic Lab Data: Unknown but sent to SICU for monitoring  

CDC Split Type:  
Write-up: rPfizer-BionNTech COVID-19 Vaccine EUA 5-7 minutes after the vaccine Associate stated she did not feel right, mentioned chest pain. "My chest feels funny. It feels like when you have really bad heartburn coming on". "I feel flushed like when you get contrast for a CT". Pulse 90 BP 160/90 checked later 130/90

VAERS ID: 903260 (history)  
Vaccinated: 2020-12-16  
Form: Version 2.0  
Onset: 2020-12-16  
Age: 60.0  
Days after vaccination: 0  
Sex: Female  
Submitted: 0000-00-00  
Location: Alaska  
Entered: 2020-12-17  

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Condition aggravated, Cough, Tracheomalacia, Wheezing
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Asthma/bronchospasm (broad), Eosinophilic pneumonia (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations: MMR and typhoid - hx of "passing out" and "throat closing"; unsure of vaccination dates, not recent
Other Medications: Acetaminophen, Albuterol, Excedrin Migraine, B complex vitamins tab, Cholecalciferol, Cyclobenzaprine, Duloxetine Dr, Esomeprazole, Norco, Analpram-HC rectal cream, hydroxyzine hydrochloride, ipratropium nasal spray, Duoneb, levothyroxine,

Current Illness:
Preexisting Conditions: asthma, diverticulosis, tracheomalacia, migraines, sciatica, sleep apnea, hiatal hernia, GERD, T2DM
Allergies: Anaphylaxis to amide, halogenated and ester anesthetics, and zofran; history of swelling with bee venom; Hives, shortness of breath and rash with peaches and sulfamethoxazole-trimethoprim; SVT with rizatriptan and sumatriptan

Diagnostic Lab Data:

Write-up: Approximately 10 minutes after vaccine administration, patient reported wheezing and coughing. Patient received epinephrine IM, IV Benadryl, IV solumedrol and racemic epinephrine SVN. Patient never developed a rash, hypotension, swelling of the lips, mouth or tongue, other GI side effects. Per ER attending and admitting physician, this reaction seems to be a clear exacerbation of the patient's tracheomalacia. The patient was more responsive to racemic epi SVN as opposed to IM epi. Patient admits that psychological stress may have been a component of her symptoms. The admitting physician does not consider this to be an anaphylactic reaction to the vaccination.

VAERS ID: 903332 (history)
Form: Version 2.0
Age: 51.0
Sex: Male
Location: North Carolina

Vaccinated: 2020-12-17
Onset: 2020-12-18
Days after vaccination: 1
Submitted: 0000-00-00
Entered: 2020-12-18

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EJ1685 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Work
Purchased by: ?

Symptoms: Seizure
SMQs: Systemic lupus erythematosus (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 0 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: 
Write-up: Seizure approximately 24 hours after vaccination

VAERS ID: 903400 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-17
Age: 55.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2020-12-18

Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK5730 / 1 | LA / IM

Administered by: Private Purchased by: ?
Symptoms: Dyskinesia, Dyspnoea, Feeling hot, Flushing, Intensive care, Respiratory arrest, Urticaria, Wheezing
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Dyskinesia (narrow), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypersensitivity (narrow), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: Rabies vaccine
Other Medications: Atorvastatin 20 mg once daily
Current Illness: None
Preexisting Conditions: Severe allergies
Allergies: Fish Iodine Shellfish Rabies vaccine
Diagnostic Lab Data: NA

CDC Split Type:
Write-up: 5 minutes after the Pfizer Covid-19 vaccine administration, the patient developed flushing, hives, felt warm and eventually short of breath. She started to wheeze and was wheeled into ER c/o "I can't breathe while holding throat and thrashing with facial flushness noted. PT took 2 Benadryls and had several Epi shots. She was then discharged from the ER and later on that day, started to feel short of breath again. In the ED today she was audibly gasping for air, however had no wheezing, had a normal saturation and a normal blood pressure. She had taken another dose of her EpiPen IM and diphenhydramine 50 mg by mouth prior to coming. She was then admitted to the hospital for further observation. While on the floor, she started to feel short of breath again (about 9 am on 12/18/2020), which required an RRT. Patient received another dose of diphenhydramine IV, methylprednisolone 125 mg IV and several doses of IM epinephrine. She also required oxygen. She was then transferred to an ICU for further care.

VAERS ID: 903592 (history)
Form: Version 2.0
Age: 34.0
Sex: Female
Location: Ohio
Vaccinated: 2020-12-17
Onset: 2020-12-17
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2020-12-18

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Cough, Discomfort, Dizziness, Dysphagia, Dysphonia, Dyspnoea, Hypoesthesia, Hypoesthesia oral, Paraesthesia, Sensation of foreign body, Tachycardia, Tachypnoea, Throat tightness, Tongue discomfort
SMQs: Anaphylactic reaction (narrow), Angioedema (broad), Asthma/bronchospasm (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Respiratory failure (broad), Infective pneumonia (broad), Dehydration (broad), Sexual dysfunction (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations: Flu vaccine
Other Medications: Levoxyl
Current Illness: None noted
Preexisting Conditions: Graves, Hashimoto’s
Allergies: Levaquin, methimazole, flu vaccine with preservatives
Diagnostic Lab Data: Ask physicians
CDC Split Type:
Write-up: Not all or limited to: anaphylactic reaction: Feeling lump in throat, tongue feeling funny with numbness, feeling of hard to swallow, throat tightness, shortness of breath, tachycardia, tachypnea, pressure, tingling, and numbness from head to toe, dizziness/lightheadedness, cough, voice changes.

VAERS ID: 903638 (history)  Vaccinated: 2020-12-17
Form: Version 2.0  Onset: 2020-12-18
Age: 62.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: Massachusetts  Entered: 2020-12-18

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Feeling abnormal, Hypoaesthesia, Transient ischaemic attack, Vision blurred
SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Ischaemic central nervous system vascular conditions (narrow), Dementia (broad), Embolic and thrombotic events, arterial (narrow), Guillain-Barre syndrome (broad), Glaucoma (broad), Lens disorders (broad), Retinal disorders (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Truvada 200 mg, Protonix 40 mg, Tylenol 650 mg, ASA 81 mg, Lipitor 10 mg, Omnipaque 350mg, Lisinopril 10 mg, Zofran 4 mg
Current Illness: none
Preexisting Conditions: HTN
Allergies: NKDA
Diagnostic Lab Data: admitted to hospital TIA

Write-up: Patient is a very pleasant 62 year old gentleman with a history of HTN, hyperlipidemia who presented with left facial numbness and left UE numbness. He states that it is worse medially on his arm. Present in upper and lower face. He states it started around 730 am this morning. He also notes intermittent "foggy" sensation since Monday associated with some blurred vision that comes and goes. Denies focal weakness, unsteady gait, difficulty with speech and swallow. He denies f/c, cp, sob, rash, pruritis, n/v/d, edema. He did receive the Pfizer COVID vaccine yesterday

VAERS ID: 903766 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-17
Age: 36.0 Days after vaccination: 0
Sex: Female
Location: Arizona Submitted: 0000-00-00
Entered: 2020-12-18

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Angioedema, Full blood count, Human chorionic gonadotropin, Metabolic function test
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Oropharyngeal allergic conditions (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Levothyroxine 100 mcg, albuterol HFA, Wellbutrin XL
Current Illness: None
Preexisting Conditions: CSF leak, migraines, asthma
**Allergies:** Amoxicillin (hives), divalproex (swelling)

**Diagnostic Lab Data:** CBC, BMP, HCG

**CDC Split Type:**

**Write-up:** Angioedema

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**VAERS ID:** 903800 (history)  
**Vaccinated:** 2020-12-17  
**Form:** Version 2.0  
**Onset:** 2020-12-17  
**Age:** 40.0  
**Days after vaccination:** 0  
**Sex:** Female  
**Submitted:** 0000-00-00  
**Location:** Puerto Rico  
**Entered:** 2020-12-18  

<table>
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<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / UNK</td>
<td>LA / SYR</td>
</tr>
</tbody>
</table>

**Administered by:** Public  
**Purchased by:** ?

**Symptoms:** Chest X-ray, Chest pain, Dyspnoea, Electrocardiogram, Full blood count, Malaise, Metabolic function test, Nausea, Throat tightness, Vomiting

**SMQs:** Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypersensitivity (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:** asthma

**Preexisting Conditions:** asthma

**Allergies:** seafood, barbiturates, caffeine, oxycodone, demerol, morphine, acetaminophen, nalbuphine

**Diagnostic Lab Data:** cbc, bmp, ekg, Chest xray

**CDC Split Type:**

**Write-up:** sob, nausea, malaise, vomit, chest pain, throat tightness
VAERS ID: **903806** (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-18
Age: 89.0 Days after vaccination: 1
Sex: Female
Location: Florida

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
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<tbody>
<tr>
<td>COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Dyspnoea, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Lorazepam, Depakote, Trazadone, Coreg, Bumetanide, Senna, Bumetanide
Current Illness: Mild cough
Preexisting Conditions: A fib, Gastro reflux, type 2 diabetes, hypertension, edema, anxiety, heart failure, pacemaker, obesity, OA, anemia
Allergies: Codeine, morphine, propafenone
Diagnostic Lab Data: Tests performed at hospital
CDC Split Type:
Write-up: Resident became short of breath 7 hours after vaccine, went to hospital, was COVID+

VAERS ID: **903820** (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-18
Age: 85.0 Days after vaccination: 1
Sex: Male
Location: Florida

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Senior Living  Purchased by: ?
Symptoms: Dyspnoea, Laboratory test, Pyrexia, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: eye drops, hydroxyzine, Ivermectin, Xarelto, donepezil, finasteride, melatonin, Tamsulosin, atorvastatin, fluoxetine
Current Illness: None
Preexisting Conditions: Dementia, anxiety, glaucoma, hyperlipidemia, COPD
Allergies: Morphine
Diagnostic Lab Data: tests performed at hospital

VAERS ID: 903931 (history)
Form: Version 2.0
Age: 29.0
Sex: Male
Location: Washington

Write-up: Day following vaccine, fever, sob - went to hospital, COVID+

VAERS ID: 903931 (history)  Vaccinated: 2020-12-17  Onset: 2020-12-18
Days after vaccination: 1
Submitted: 0000-00-00  Entered: 2020-12-18

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>AR / SYR</td>
</tr>
</tbody>
</table>

Administered by: Military  Purchased by: ?
Symptoms: Abdominal pain, Blood creatinine increased, C-reactive protein increased, Computerised tomogram abdomen, Computerised tomogram abnormal, Dehydration, Gastrointestinal inflammation, Gastrointestinal wall thickening, Haematocrit increased, Scan with contrast abnormal, Small intestinal obstruction
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Retroperitoneal fibrosis (broad),
Presented with periumbilical pain to emergency department (patient works at Medical Center). Admitted to hospital for small bowel obstruction. Labs were consistent with dehydration (Hct 55, Cr 1.25), as well as CRP 1.10. A CT Abd/Pelvis identified proximal dilation and fecalization of small bowel, with a transition point in the left lower quadrant. Distal to the transition point, the small bowel appears thick, with hyperenhancement and inflammation progressing into the cecum. General Surgery was consulted and patient admitted to hospital for management of this small bowel obstruction.
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Microgestin
Current Illness: none
Preexisting Conditions: none
Allergies: NKA
Diagnostic Lab Data: 6:11PM: 185/71 Temp 98.2 sat 98% HR85
CDC Split Type:
Write-up: rash appeared at site of injection, very painful, hot to touch, hard, with rash spreading to torso

VAERS ID: 904072 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 34.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2020-12-19

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<td>EK5730 / 1</td>
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Administered by: Private  Purchased by: ?
Symptoms: Chest discomfort, Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: allegra Klonopin Lamictal Latuda Implanon PRILOSEC Synthroid albuterol inhaler
Current Illness: Asthma gerd hypothyroid gastric sleeve GI bleed
Preexisting Conditions: Asthma gerd hypothyroid gastric sleeve GI bleed
Allergies: Latex, eggs, pork, shellfish, beef, cinamon
Diagnostic Lab Data:
CDC Split Type:
Write-up: Chest Tightness and shortness of breath

VAERS ID: [904107](history) Vaccinated: 2020-12-19
Form: Version 2.0 Onset: 2020-12-19
Age: 82.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Florida Entered: 2020-12-19

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Administered by: Senior Living Purchased by: ?
Symptoms: Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Probiotic Capsule, Macrobid Capsule 100 MG, Simethicone Tablet 80 MG, Meloxicam Tablet 7.5 MG, Asmanex HFA Aerosol 100 MCG/ACT (Mometasone Furoate), Incruse Ellipta Aerosol Powder Breath Activated 62.5 MCG/INH (Umeclidinium Bromide), Mirta
Current Illness: SEPSIS, UNSPECIFIED ORGANISM, THROMBOCYTOPENIA, ADULT FAILURE TO THRIVE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE
Preexisting Conditions: COPD, Adult failure to thrive
Allergies: NKA
Diagnostic Lab Data:
CDC Split Type:
Write-up: Resident short of breath approximately 10 minutes post vaccination. Staff noted that his baseline upon activity and transferring is generally shortness of breath. Resident wears 2L NC, O2 saturation was 92%, increased to NC to 4 Liters O2 saturation up to 96%. 170/80, heart rate 94, regular rhythm. Sent to hospital.
VAERS ID: 904234 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 44.0 Days after vaccination: 0
Sex: Female
Location: Illinois
Submitted: 0000-00-00
Entered: 2020-12-19

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Administered by: Private Purchased by: ?
Symptoms: Dyspnoea, Palpitations, Rash, Tachycardia
SMQs: Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Imitrex, Topamax
Current Illness:
Preexisting Conditions: migraines
Allergies: None
Diagnostic Lab Data:
CDC Split Type:
Write-up: Rach, tachycardia, palpitations, shortness of breath shortly after receiving vaccine - given epi, solumedrol, Benadryl. persistent symptoms the following day.

VAERS ID: 904264 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 46.0 Days after vaccination: 0
Sex: Female
Location: California
Submitted: 0000-00-00
Entered: 2020-12-19

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<td>RA / IM</td>
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Administered by: Private   Purchased by: ?
Symptoms: Abdominal pain lower, Blood triglycerides normal, Computerised tomogram abdomen, Computerised tomogram abnormal, Constipation, Lipase increased, Liver function test normal, Nausea, Pancreatitis acute, Scan with contrast abnormal, Ultrasound abdomen normal, Vomiting, White blood cell count increased
SMQs: Acute pancreatitis (narrow), Neuroleptic malignant syndrome (broad), Retroperitoneal fibrosis (broad), Malignancy related therapeutic and diagnostic procedures (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: Propranolol 60mg ER daily Sertraline 100mg daily
Current Illness: No acute illnesses at time of vaccination, unknown up to one month prior
Preexisting Conditions: Hypertension Depression
Allergies: No known medication allergies, unknown other allergies
Diagnostic Lab Data: Lipase $g 6000 IU/L on 12/18/20, 967 IU/L on 12/19/20 White Blood Cell count 20,000 on 12/18/20, 11,550 on 12/19/20 liver function tests normal on 12/18/20 CT abd/pelvis with IV contrast read at 3:18am 12/19/20: "There are inflammatory changes surrounding the pancreas consistent with acute pancreatitis. No pseudocyst, abscess, or hemorrhage." US abdomen read at 23:41 12/18/20: "No gallstones, wall thickening, or pericholecystic fluid. Negative sonographic Murphy"s sign."
CDC Split Type:
Write-up: Patient presented to the emergency department at 8:45pm on 12/18/20 with lower abdominal pain, nausea, vomiting, and constipation that started approximately 2 hours prior to presentation, at approximately 6:45pm. Her labs were significant for a lipase of $g 6000 IU/L, and a CT scan of her abdomen/pelvis was done that demonstrated evidence of acute pancreatitis. Given the fact that she does not have a history of heavy alcohol use, with normal triglycerides and no evidence of gallstones on her current admission, and no recent gastroenterology procedures, there is no clear etiology of her pancreatitis; concern for post-vaccination pancreatitis. The patient is currently admitted to the hospital, on hospital day #1 of her current condition.
VAERS ID: 904349 (history) Vaccinated: 2020-12-14
Form: Version 2.0 Onset: 2020-12-16
Age: 36.0 Days after vaccination: 2
Sex: Female
Location: North Dakota Submitted: 0000-00-00
Entered: 2020-12-20

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Administered by: Private Purchased by: ?
Symptoms: Abdominal pain, Computerised tomogram, Lipase, Nausea, Pancreatitis acute, Vomiting
SMQs: Acute pancreatitis (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: singulair, albuterol, Adderall XR, Symbicort, clonidine, B12 supplement, omeprazole, fexofenadine, fluoxetine, Mirena, levothyroxine, lorazepam, oxcarbazepine, Phenergan, Vitamin D3
Current Illness:
Preexisting Conditions: Bipolar 1, Severe persistent Asthma, Morbid Obesity
Allergies:
Diagnostic Lab Data: lipase, CT scan
CDC Split Type:
Write-up: acute, mild pancreatitis, associated with symptoms associated with Nausea and vomiting and abdominal pain. Patient's symptoms started 1 day after her vaccination.

VAERS ID: 904385 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2020-12-16
Age: 83.0 Days after vaccination: 0
Sex: Female
Location: Texas Submitted: 0000-00-00
Entered: 2020-12-20

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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private    Purchased by: ?

Symptoms: Commuted fracture, Epistaxis, Facial bones fracture, Haemorrhage, Loss of consciousness, Subcutaneous haematoma, Tenderness

SMQs: Torsade de pointes/QT prolongation (broad), Haemorrhage terms (excl laboratory terms) (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Accidents and injuries (narrow), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: amLODIPine, 7.5 mg, oral, Nightly ? cevimeline, 30 mg, oral, TID ? cholecalciferol (vitamin D3), 2,000 Units, oral, Daily ? irbesartan-hydrochlorothiazide, 1 tablet, oral, QAM ? levothyroxine, 50 mcg, oral, Daily at 0600 ? metoprolol s

Current Illness: None

Preexisting Conditions: Sjogrens Syndrome, Hypertension, Hypothyroidism

Allergies: Quinilones, Sulfa

Diagnostic Lab Data: There is a comminuted fracture of the nasal bones bilaterally with Left orbital floor blowout fracture with hemorrhagic opacification of the left maxillary sinus and slight inferior displacement with slight extraconal fat protrusion. There is associated left orbital preseptal and postseptal emphysema. Commuted fracture involving the anterior and posterior wall of the left maxillary sinus with hemorrhagic opacification of the sinus and left malar subcutaneous hematoma

CDC Split Type:

Write-up: Patient is a pleasant 83 y.o. female pediatrician with history of Sjogren's, hypothyroidism, hyperlipidemia, hypertension who had been at Hospital to get her Covid vaccine. 30 minutes after doing so she reports being in the lobby and about to walk upstairs and feeling fine. The next thing she knows she wakes up on the stairs with her nose and face bleeding surrounded by healthcare team. She denies any precipitating symptoms such as chest pain, shortness of breath, fevers dizziness, headache. She reports feeling well otherwise in the last few days. I did a thorough bony palpation exam including spine and he only point of tenderness besides on her face was the area above her right ankle. She does not have a history of syncope or collapse
VAERS ID: 904386 (history)  Vaccinated: 2020-12-19
Form: Version 2.0  Onset: 2020-12-19
Age: 63.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Illinois  Entered: 2020-12-20

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Administered by: Private  Purchased by: ?
Symptoms: Electrocardiogram abnormal, Palpitations, Sinus tachycardia, Supraventricular tachycardia
SMQs: Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: albuterol (VENTOLIN HFA) 108 (90 Base) MCG/ACT inhaler fluticasone NASAL (FLONASE) 50 MCG/ACT nasal spray escitalopram (LEXAPRO) 20 MG tablet
Current Illness: potassium 3.4 on day of vaccination
Preexisting Conditions: Hypertension, psoriasis
Allergies: No known allergies
Diagnostic Lab Data:

Write-up: Patient had vaccine at 1330 on 12/20. At around 1815 she began experiencing heart palpitations. She presented to the ED and she was found to have a heart rate in the 130s. EKG showed junctional tachycardia. She was given 6mg of adenosine and an EKG was repeated and showed sinus tachycardia. Eventually her heart rate decreased to the 70s-90s. She was noted to have a potassium of 3.4 which was repleted. She was admitted overnight for observation. In the morning her potassium was normal and she remained in sinus rhythm. She was discharged later that afternoon.
VAERS ID: 904436 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-18
Age: 47.0 Days after vaccination: 1
Sex: Male
Location: New Jersey
Submitted: 0000-00-00
Entered: 2020-12-20

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Administered by: Private Purchased by: ?

Symptoms: Activated partial thromboplastin time shortened, Alanine aminotransferase normal, Aspartate aminotransferase normal, Atrial fibrillation, Blood albumin normal, Blood alkaline phosphatase normal, Blood creatinineine normal, Blood culture negative, Blood lactic acid decreased, Blood potassium decreased, Chest X-ray abnormal, Gram stain positive, Haematocrit decreased, Hypotension, International normalised ratio increased, Malaise, Palpitations, Platelet count normal, Procalcitonin increased, Protein total normal, Pyrexia, Respiratory tract congestion, Tachycardia, White blood cell count increased

SMQs: Liver-related coagulation and bleeding disturbances (narrow), Anaphylactic reaction (broad), Haematopoietic erythropenia (broad), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (narrow), Sepsis (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Flomax 0.4mg Daily

Current Illness: Enterococcus faecalis UTI diagnosed 11/2520 associated with ureteral stent removal 11/10/20 treated successfully with Augmentin

Preexisting Conditions: Borderline HTN, recurrent renal calculi

Allergies: None

Diagnostic Lab Data: Presentation labs: WBC 21.6 Hct 38.9 Plt 227 K 3.3 Cr 1.26 Lactate 2.6 Protein 6.5 Alb 3.5 AST/ALT/AP normal INR 1.4 PTT 48.1 Procalcitonin 4.7 CXR: Mild congestion Cultures Blod, urins (1day): NGTD

CDC Split Type:

Write-up: The patient was well prior to vaccination (12/17). The day after, he felt mildly unwell and had a low grade fever. The following day, he had a fever of 102. He received 1L of fluid at
Urgent Care and had a BP ion the 80s. Shortly thereafter, he felt palpitations and developed AF. He came to the hospital where he was tachycardia to 200 bpm and hypotensive to SBP70s. He received aggressive fluid resuscitation (4L), IV metoprolol and was started on empiric Abx. Within several hours, the HR lowered, BP increased, and AF spontaneously converted to sinus. He had no dysuria. Curtures so far have not shown growth at our hospital. Urinary culture from urgent care has reportedly shows 20k gram positive cocci.

VAERS ID: 904555 (history)  Vaccinated: 2020-12-15
Form: Version 2.0  Onset: 2020-12-17
Age: 63.0  Days after vaccination: 2
Sex: Male  Submitted: 0000-00-00
Location: New York  Entered: 2020-12-20

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Administered by: Private  Purchased by: ?


SMQs: Torsade de pointes/QT prolongation (broad), Acute pancreatitis (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Convulsions (narrow), Pseudomembranous colitis (broad), Parkinson-like events (broad), Gastrointestinal perforation, ulcer, haemorrhage, obstruction non-specific findings/procedures (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Depression (excl suicide and self injury) (broad), Hypotonic-hyporesponse episode (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Bystolic 5mg once a day Prilosec 20mg once a day One a Day multivitamins

Current Illness: No other illnesses at the time of vaccination or one month prior.

Preexisting Conditions: History of hypertension and GERD.

Allergies: No allergies.

Diagnostic Lab Data: 12/17/2020: Na+ 141, K+ 4.4, Cl 101, CO 24, BUN 13, Cr 0.82, Glucose 124, Ca 10.6, Mg 1.7 WBC 11.3, HB 18.1, Hct 52.2, Plts 173 Lactic acid 4.9 (range 0.5-2.2), repeat after hydration 1.1 CXR, CT scan of brain, MRI and E of brain, and EEG all normal

CDC Split Type:

Write-up: I had no reaction following the vaccination. The next day I had very mild soreness at the injection site. The next morning (about 36 hours after the vaccination) I woke up with fatigue and a sore throat. I had breakfast and about 10 minutes later I vomited everything (projectile vomiting, no nausea or abdominal pain). An hour later I had episode of severe watery diarrhea (just one episode). Felt very weak so I decided to sit down, stumbled to a chair, and then proceeded to have a syncopal episode with about 4 minutes of seizure like activity (witnessed, I don't remember that part). Decided to go to the ER, where I had labs, EKG, CXR, head CT scan, MRI and EEG. I was admitted for 24 hour observation, all the tests were normal.

VAERS ID: 904719 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2020-12-18
Age: 40.0 Days after vaccination: 2
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2020-12-21

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Administered by: Private Purchased by: ?

Symptoms: Angiogram cerebral abnormal, Central nervous system lesion, Demyelination, Dizziness, Gastrointestinal disorder, Headache, Injection site erythema, Injection site pruritus, Limb discomfort, Magnetic resonance imaging brain abnormal, Neurological symptom, Palpitations, Paraesthesia, Vaccination site swelling

SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Optic nerve disorders (broad), Cardiomyopathy (broad), Demyelination (narrow), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Vestibular disorders (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: hydroxyzine, Xyzal, nasal spray, vitamins C, D
Current Illness: vertigo
Preexisting Conditions: asthma
Allergies: benadryl
Diagnostic Lab Data: CTA brain- found infundibulum MRI brain- found lesion and
demyelination lumbar puncture- still to be done ** currently admitted in the hospital when this
report was given
CDC Split Type:
Write-up: Day 1: palpitations, dizziness Day 2: headache, redness, swelling, itching on
vaccination site; GI disturbance Day 3: vaccination arm had paresthesia, heaviness, almost
stroke-like symptoms; the symptoms started suddenly ** treated in the ER; IV steroids- for
possible allergic reaction; tpa- for the stroke-like signs; halfway through the tpa, I felt an
improvement with the arm

VAERS ID: 905191 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 86.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Michigan Entered: 2020-12-21

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Administered by: Private Purchased by: ?
Symptoms: COVID-19, Dyspnoea, Hospice care, Pyrexia, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad),
Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary
hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic
symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad),
COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: Aspirin chewable tab, ferrous sulfate tab, memantine tab, and tiotropium inhaler

Current Illness: Inpatient admission 12/3/2020 - 12/7/2020 for acute encephalopathy secondary to acute UTI and suspected pneumonia. Discharged from hospital to long term care on 12/7/2020

Preexisting Conditions: Bladder muscle dysfunction - overactive Alzheimer"s disease
History of cerebrovascular accident COPD History of prostate cancer Iron deficiency anemia

Allergies: No known medication, product, or food allergies

Diagnostic Lab Data:

Write-up: Do no suspect that vaccine caused patient condition and resulting inpatient admission. Suspect patient had COVID-19 at time of vaccination, but had not developed symptoms yet. Here is timeline: Patient went to ED on 12-18-2020 at 22:51 with complaint for fever and shortness of breath. Patient ended up testing positive for COVID-19, 12-19-2020 00:09, but was not symptomatic at time of vaccine. As of 12/21/2020 12:04 pm, patient is still inpatient and on comfort care/hospice.

VAERS ID: [905320](history)

Form: Version 2.0

Age: 33.0

Sex: Male

Location: New York

Vaccinated: 2020-12-16

Onset: 2020-12-18

Days after vaccination: 2

Submitted: 0000-00-00

Entered: 2020-12-21

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private

Purchased by: ?

Symptoms: Abdominal pain, Appendicectomy, Appendicitis, Computerised tomogram abdomen abnormal, Laparoscopic surgery, Scan with contrast abnormal

SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Malignancy related therapeutic and diagnostic procedures (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? Yes, 1 days

Extended hospital stay? No
Other Medications: Norvasc 5 mg PO Daily, Vitamin C 1 tab daily
Current Illness: None
Preexisting Conditions: Hypertension, Hyperlipidemia
Allergies: NKDA
Diagnostic Lab Data: CT Scan of Abdomen with contrast on Friday December 16th confirmed early appendicitis
CDC Split Type:
Write-up: severe abdominal pain experience 2 days post vaccination of dose 1 of 2. Diagnoses with early acute appendicitis on Friday December 18th and had a laproscopic appendectomy on Saturday December 19th.

VAERS ID: 905345 (history)  Vaccinated: 2020-12-17
Form: Version 2.0  Onset: 2020-12-20
Age: 22.0  Days after vaccination: 3
Sex: Male  Submitted: 0000-00-00
Location: Wisconsin  Entered: 2020-12-21

<table>
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<tr>
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<td>- / IM</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Haemorrhage, Platelet count decreased, SARS-CoV-2 test negative, Thrombocytopenia
SMQs:; Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: None reported by patient
Current Illness: No known past medical history
Preexisting Conditions: None
Allergies: No known allergies
Diagnostic Lab Data: COVID (-) Platelets 2000 cells/mcL
CDC Split Type:
Write-up: Patient received Pfizer COVID 19 vaccine last Thursday 12/17. Admitted today (12/21) with bleeding and low platelet count - working up for ITP, TTP. Given recency of vaccination and no known contributory allergy or medical history, physician thought potentially
associated with vaccination.

**VAERS ID:** 905774  **Vaccinated:** 2020-12-18
**Form:** Version 2.0  **Onset:** 2020-12-19
**Age:** 57.0  **Days after vaccination:** 1
**Sex:** Male  **Submitted:** 0000-00-00
**Location:** Indiana  **Entered:** 2020-12-21

<table>
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<td><strong>COVID19:</strong> COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EJ1685 / 1</td>
<td>UN / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Private  **Purchased by:** ?
**Symptoms:** Myocardial infarction
**SMQs:** Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow)
**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** No
**Hospitalized?** Yes, ? days
**Extended hospital stay?** No
**Previous Vaccinations:**
**Other Medications:**
**Current Illness:**
**Preexisting Conditions:**
**Allergies:**
**Diagnostic Lab Data:**
**CDC Split Type:**
**Write-up:** Nurse reports that patient had no problems after receiving vaccination. Patient went home and EMS was called early the next morning and team administered vaccination was contacted physician that the associate works for stating the patient had a heart attack.

---

**VAERS ID:** 905974  **Vaccinated:** 2020-12-20
**Form:** Version 2.0  **Onset:** 2020-12-20
**Age:** 44.0  **Days after vaccination:** 0
**Sex:** Female  **Submitted:** 0000-00-00
**Location:** California  **Entered:** 2020-12-21

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<td>EJ1685 / 1</td>
<td>UN / IM</td>
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</table>
Administered by: Private    Purchased by: ?
Symptoms: Angiogram cerebral normal, Arteriogram carotid normal, Blood glucose normal, Computerised tomogram head normal, Drug screen positive, Hemiparesis, Intensive care, Magnetic resonance imaging brain normal, Paraesthesia, Throat tightness, Tic, Urine analysis normal, White blood cell count increased
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Dyskinesia (broad), Dystonia (broad), Drug abuse and dependence (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow), Hypersensitivity (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: Nexplanon birth control implant
Current Illness: None
Preexisting Conditions: Thalassemia minor
Allergies: Egg-containing compound Latex Penicillins
Diagnostic Lab Data: 12/20/20 at 1620 Blood glucose = 73 mg/dl 12/20/20 at 1620 White Blood Cells = 10.72 thousand/mm3 12/20/20 at 1758 Urinalysis: negative for infection 12/20/20 at 1758 Urine Toxicology: positive for amphetamine-methamphetamine 12/20/20 at 1636 CT of Head without contrast: negative for bleed 12/20/20 at 2018 CT Angiography of Head and Neck: no significant blockage or stenosis 12/21/20 at 1316 MRI of Brain without contrast: normal evaluation; without any evidence of acute ischemic stroke
CDC Split Type:
Write-up: Left sided weakness of face, arm and left leg, onset 15 minutes after receiving vaccination Brought immediately to ED, subjective feeling of closing of throat. Given IM epinephrine 0.3mg x 1. Upon evaluation in the ED by tele-neurology consult, she received 88.5mg of alteplase on 12/20/20 at 1721 She was admitted to the Intensive Care Unit on 12/20/20 at 2208 Seen by neurology on 12/21/20 at 1227. Evaluation showed weakness on the left side but is noted that it could be effort-related. Neurologist noted that patient was treated with alteplase; CT angiogram showed no significant blockage or stenosis. Noted that this is could be related to a vasovagal effect, psychogenic or an acute ischemic stroke. As of 12/21/20 at 1615, attending provider noted left-sided paresthesia, left-sided tics and possible transient ischemic attack
VAERS ID: 906282 (history)  Vaccinated: 2020-12-20
Form: Version 2.0  Onset: 2020-12-20
Age: 55.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Missouri  Entered: 2020-12-21

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Aphasia, Dyspnoea, Hypopnoea, Intensive care, Throat clearing, Wheezing
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Asthma/bronchospasm (broad), Dementia (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypersensitivity (broad), Respiratory failure (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: IVIG, Mestinon, Lisinopril, Immodium, Advil, Imuran, Baclofen
Current Illness:
Preexisting Conditions: Myastheniz Gravis, Multiple Sclerosis, PCOS, HTN
Allergies: IVIG, Tecfideral, Atropine
Diagnostic Lab Data: unknown
CDC Split Type:
Write-up: Given the vaccine at 712 pm on 12/20/20. At approximately 715 pm, she began to clear her throat and then became unable to speak, followed by audible wheezes and short, shallow breaths. At 1923, Epinephrine was administered. At 1928, she was able to speak again and was transported to the ED. The patient reports after arrival to the ER, the symptoms returned. She was given PO Benadryl, followed by IV Benadryl, and then a 2nd dose of Epinephrine. She was admitted to the ICU for observation.
### Patient Details

- **VAERS ID:** 906285 (history)
- **Age:** 64.0
- **Sex:** Male
- **Location:** California
- **Vaccinated:** 2020-12-18
- **Onset:** 2020-12-18
- **Days after vaccination:** 0
- **Submitted:** 0000-00-00
- **Entered:** 2020-12-21

### Vaccination Details

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<td>EH9899 / 1</td>
<td>AR / IM</td>
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</table>

### Symptoms

- **Administered by:** Other
- **Purchased by:** ?

### SMQs

- Acute coronary syndrome, Altered state of consciousness
- Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypoglycaemia (broad)

### Other Information

- **Life Threatening?** No
- **Birth Defect?** No
- **Died?** No
- **Permanent Disability?** No
- **Recovered?** Yes
- **Office Visit?** No
- **ER Visit?** No
- **ER or Doctor Visit?** No
- **Hospitalized?** Yes, 2 days
  - **Extended hospital stay?** No
- **Previous Vaccinations:**
- **Other Medications:** Blood thinners x 2 yrs
- **Current Illness:** 2-3 Household members + COVID-19
- **Preexisting Conditions:** STATUS POST STROKE 2018 (EMBOLIC)
- **Allergies:** Unknown
- **Diagnostic Lab Data:**
- **CDC Split Type:**
- **Write-up:** At work patient had ALOC x10 minutes. Rapid response called. Transf to Hospital (12/18-12/20). D/C Dx ACUTE CORONARY SYNDROME (NON-STEMI)
Administered by: Private  Purchased by: ?
Symptoms: Cold sweat, Dyspnoea, Heart rate increased, Nausea, Pruritus, Rash
SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Birth control, adderall, vitamin b complex, vitamin d, multivitamin and hair skin and nails.
Current Illness: None.
Preexisting Conditions: None.
Allergies: penicillin, amoxicillin and mold.
Diagnostic Lab Data:
CDC Split Type:
Write-up: Rapid heart beat, difficulty breathing, itching, rash, clamminess, cold sweats, nausea

VAERS ID: 906132 (history)  Vaccinated: 0000-00-00
Form: Version 2.0  Onset: 0000-00-00
Age: 50.0  Submitted: 0000-00-00
Sex: Female  Entered: 2020-12-22
Location: Unknown

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Administered by: Unknown  Purchased by: ?
Symptoms: Chest discomfort, Feeling hot, Tachycardia
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 0 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020501255
Write-up: waves of heat feeling; tachycardia; chest tightness; This is a spontaneous report
from contactable physician via Pfizer Sales Representative. A 50-year-old female patient
received bnt162b2, via an unspecified route of administration in 2020 at single dose for
immunization. The patient''s medical history and concomitant medications were not reported.
The patient experienced waves of heat feeling, tachycardia, chest tightness 15 min after
receiving the vaccine in 2020. Patient received several doses of steroid and was kept
overnight in hospital and recovered. The outcome of events was recovered in 2020.
Information on the Lot/Batch number has been requested.; Sender''s Comments: The reported
information is limited. Based on the close temporal relationship and the description of the
events, waves of heat feeling, tachycardia, chest tightness, there is a reasonable possibility
that the events are related to BNT162 vaccine.
The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation,
including the review and analysis of aggregate data for adverse events. Any safety concern
identified as part of this review was well as any appropriate action in response, will be promptly
notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.

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VAERS ID: 906318 (history)  Vaccinated: 2020-12-21
Form: Version 2.0  Onset: 2020-12-21
Age: 57.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Texas  Entered: 2020-12-22

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<td>EK5730 / 1</td>
<td>LA / IM</td>
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Administered by: Military  Purchased by: ?
Symptoms: Acute myocardial infarction, Blood magnesium normal, Blood phosphorus normal, Brain natriuretic peptide increased, Chest X-ray normal, Chest discomfort, Dyspnoea, Electrocardiogram ST segment depression, Emotional distress, Fibrin D dimer normal, Full blood count normal, Headache, Hypertension, International normalised ratio increased,
Metabolic function test normal, Pain, Prothrombin time prolonged, SARS-CoV-2 test negative, Troponin I increased

SMQs: Cardiac failure (broad), Liver-related coagulation and bleeding disturbances (narrow), Anaphylactic reaction (broad), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Hypertension (narrow), Cardiomyopathy (broad), Depression (excl suicide and self injury) (broad), Other ischaemic heart disease (broad), Hypokalaemia (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:

Current Illness:
Preexisting Conditions: Congestive Heart Failure [Active]. Heart Disease [Active]. COPD - Chronic Obstructive Pulmonary Disease [Active]. Abnormal EKG [Active]. Hypokalemia [Active]. Lung Disease [Active]. Chest Pain [Active].
Allergies: Levaquin


CDC Split Type:
Write-up: 57-year-old female history of hypertension, hyperlipidemia, type 2 diabetes, COPD, subsegmental PE is not on anticoagulation, multiple cardiac stents presenting with greater than 12 hrs of worsening left-sided chest pressure, headache and shortness of breath. Patient takes a daily aspirin and had no improvement of symptoms with her at-home nitroglycerin. Here afebrile, HTN, remaining vitals wnl. Non-toxic, in moderate distress 2/2 to pain. EKG with
minimal ST depressions in leads II and III. Will plan for CXR and labs. Pt given zofran and morphine for pain control. Will give additional aspirin for total 324 mg in last 24 hrs. On re-evaluation, pt with mild improvement in pain. Troponin elevated at 0.18, remaining labs wnl. At this time concerned for NSTEMI, pt treated with 1 mg/kg of lovenox and MOD consulted for admission. MOD evaluated pt and cardiology was consulted. Given concerning PMHx and current hx of chest pain with findings consistent with NSTEMI, cardiology at recommended likely transfer for cardiac cath. Will pend repeat troponin and EKG for dispo decision.

VAERS ID: 906333 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-21
Age: 66.0 Days after vaccination: 3
Sex: Male
Location: New York Submitted: 0000-00-00
Entered: 2020-12-22

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Administered by: Private Purchased by: ?
Symptoms: Anosmia, Condition aggravated, Cough, Decreased appetite, Fatigue, Intensive care, Pyrexia, Respiratory symptom, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Taste and smell disorders (narrow), Anticholinergic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), Immune-mediated/autoimmune disorders (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: GERD
Allergies: No known Allergies
Diagnostic Lab Data: Cepheid Xpert Xpress positive for SARS-CoV-2 12/21 at 10:30AM
CDC Split Type:
Write-up: Approximately 65 hours post-vaccination patient felt profound fatigue, no appetite, and had increase in baseline chronic cough, and anosmia. Patient was admitted to the hospital on 12/21 due to worsening respiratory symptoms that required supplemental oxygen initially 2L via nasal cannula. Patient was upgraded to ICU-level of care at 6:30PM 12/21 to receive high-flow nasal cannula, and has had one episode of fever (100.6) 12/22 at 7:00 AM.
VAERS ID: 906506 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-21
Age: 38.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Tennessee Entered: 2020-12-22

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<td>EJ1685 / 1</td>
<td>LA / IM</td>
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Administered by: Private Purchased by: ?
Symptoms: Flushing, Stridor, Throat irritation
SMQs: Anaphylactic reaction (narrow), Angioedema (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Asthma
Allergies: Denied allergies
Diagnostic Lab Data:
CDC Split Type:
Write-up: Burning in throat, flushed face and neck. Developed stridor. Benadryl 25 mg PO given, Epinephrine 0.5mg given IM, albuterol inhaler 4 puffs. Transferred to the Emergency department and admitted to the hospital.

VAERS ID: 906514 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-21
Age: 46.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Idaho Entered: 2020-12-22

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Administered by: Private Purchased by: ?
Symptoms: Flushing, Stridor, Throat irritation
SMQs: Anaphylactic reaction (narrow), Angioedema (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Asthma
Allergies: Denied allergies
Diagnostic Lab Data:
CDC Split Type:
Write-up: Burning in throat, flushed face and neck. Developed stridor. Benadryl 25 mg PO given, Epinephrine 0.5mg given IM, albuterol inhaler 4 puffs. Transferred to the Emergency department and admitted to the hospital.
Administered by: Private  
Purchased by: ?
Symptoms: Cough, Dysphonia, Intensive care, Throat irritation, Throat tightness
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: none known
Current Illness: T2DM, asthma, obesity, Factor V Leiden deficiency, psoriasis
Preexisting Conditions: same as above
Allergies: Anaphylactic reaction to Zolare and Humira
Diagnostic Lab Data:
CDC Split Type:
Write-up: Patient was administered the Covid19 vaccine. She was advised to wait 30 minutes post vaccination. While the patient was waiting, she reported having an itchy throat, throat tightness, then a hoarse voice and a cough developed. This happened at about 20 minutes after she received the vaccine. The patient was assessed by the nursing and provider staff. She received an adult epi pen injection and EMS was called. Patient was taken to the ER by EMS. She reports she received two more epi injections, benadryl, and Solu Medrol. She was stabilized. Patient was discharged from the ED after several hours. She then reports a second episode of throat tightening and worsening cough at 12:30 am and was taken by ambulance to the ICU and admitted. She is still in the hospital at this time 12/22/2020.

VAERS ID: 906529 (history)  
Vaccinated: 2020-12-18
Onset: 2020-12-19
Days after vaccination: 1
Submitted: 0000-00-00
Entered: 2020-12-22

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<td>- / 1</td>
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rupture of membranes
SMQs: Pregnancy, labour and delivery complications and risk factors (excl abortions and stillbirth) (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Claritin, Prenatal Vitamins, Flonase
Current Illness: no
Preexisting Conditions: no
Allergies: no
Diagnostic Lab Data: No
CDC Split Type: vsafe
Write-up: When I got the vaccination I was 32weeks pregnant and on Saturday I had spontaneous rupture of the amnotic fluids and went immediately to the hospital and was immediately given steroid, magnesium for the baby. And on Sunday around 3:45PM I got a second round of the steroids and was transferred for observation. On Monday, at 8:06am I went into early labor I delivered my baby at 33weeks gestation and she weighed 3lb 11oz. Expected Date of Delivery-2/8/2021. I was a high risk patient d/t Fibroids but have experienced no issues the entire pregnancy and my last ultrasound was 12/17 and baby was healthy with no complications at that time.

<table>
<thead>
<tr>
<th>VAERS ID: 906532 (history)</th>
<th>Vaccinated: 2020-12-19</th>
</tr>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-20</td>
</tr>
<tr>
<td>Age: 40.0</td>
<td>Days after vaccination: 1</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Florida</td>
<td>Entered: 2020-12-22</td>
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<table>
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<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Condition aggravated, Intensive care, Seizure
SMQs: Systemic lupus erythematosus (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)
Life Threatening? No Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: folic acid cranberry Pepcid florastor keppra oxycarbazine
Current Illness:
Preexisting Conditions: LERS-DANLOS SYNDROME gerd tachycardia seizures cognitive communication disorder
Allergies: NKDA
Diagnostic Lab Data: resident currently at hospital admitted on 12/20/2020
CDC Split Type:
Write-up: seizure, resident sent to er and in CCU

VAERS ID: 906708 (history)  
Vaccinated: 0000-00-00
Form: Version 2.0  
Onset: 0000-00-00
Age:  
Submitted: 0000-00-00
Sex: Female  
Entered: 2020-12-22
Location: Unknown

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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>- / -</td>
</tr>
</tbody>
</table>

Administered by: Unknown  
Purchased by: ?
Symptoms: Bronchitis, Chest discomfort, Dyspnoea, Feeling abnormal, Headache, Hypoaesthesia, Injection site paraesthesia, Pain in extremity, Pneumonia, Rash, Skin discoloration
SMQs: Anaphylactic reaction (narrow), Peripheral neuropathy (broad), Dementia (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
**CDC Split Type:** USPFIZER INC2020502007 

**Write-up:** bronchitis or pneumonia; pain down arm into fingers; injection site tingling; Chest felt heavy and difficulty breathing; Chest felt heavy and difficulty breathing; bronchitis or pneumonia; rash on both arms with bright purple skin; rash on both arms with bright purple skin; felt like everything was numb and like she was on drugs; felt like everything was numb and like she was on drugs; Severe headache; This is a spontaneous report from a contactable consumer (nurse) via a Pfizer sales representative. A female patient of an unspecified age received the first dose of the bnt162b2 (BNT162B2; also reported as COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. On an unspecified date, the patient experienced: bronchitis or pneumonia (medically significant), pain down arm into fingers, injection site tingling, chest felt heavy and difficulty breathing, rash on both arms with bright purple skin, felt like everything was numb and like she was on drugs; all of which required hospitalization. The clinical course was reported as follows: The female patient (nurse) took the first dose of the vaccine and experienced pain down arm into fingers, injection site tingling. The patient’s chest felt heavy and difficulty breathing; however, the "tongue never swelled." Rapid response was called, and the patient was taken to the hospital. The patient was given a "cocktail" to treat the reaction. The patient "felt like everything was numb and like she was on drugs" The patient also felt like she had bronchitis or pneumonia. The patient also experienced a "rash on both arms with bright purple skin"; along with a severe headache. Therapeutic measures were taken as a result of pain down arm into fingers, injection site tingling, and chest felt heavy and difficulty breathing. The clinical outcome of the events was unknown. No follow-up attempt possible; information about batch/lot number cannot be obtained.

---

**VAERS ID:** 906733  
**Form:** Version 2.0  
**Age:** 50.0  
**Sex:** Female  
**Location:** Maryland  
**Vaccinated:** 2020-12-21  
**Onset:** 2020-12-21  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-22  

<table>
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<th>Vaccination / Manufacturer</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Work  
**Purchased by:** ?  

**Symptoms:** Anaphylactic reaction  
**SMQs:** Anaphylactic reaction (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Hypersensitivity (narrow)  
**Life Threatening?** No  
**Birth Defect?** No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: unknown
Current Illness: unknown
Preexisting Conditions: unknown
Allergies: yes
Diagnostic Lab Data:
CDC Split Type:
Write-up: anaphylaxis

VAERS ID: 906910 (history) Vaccinated: 2020-12-18
Onset: 2020-12-21
Days after vaccination: 3
Age: 56.0
Sex: Male
Location: Florida
Submitted: 0000-00-00
Entered: 2020-12-22

<table>
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<th>Site / Route</th>
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<td>EH9899 / 1</td>
<td>AR / IM</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Blood bilirubin increased, Blood osmolarity increased, Blood urea increased, Contusion, Haemorrhage, Immune thrombocytopenia, Monocyte percentage increased, Platelet count decreased, Platelet transfusion, Thrombocytopenia
SMQs: Acute renal failure (broad), Liver related investigations, signs and symptoms (narrow), Acute pancreatitis (broad), Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Systemic lupus erythematosus (narrow), Retroperitoneal fibrosis (broad), Biliary system related investigations, signs and symptoms (narrow), Accidents and injuries (narrow), Chronic kidney disease (broad), Hypersensitivity (narrow), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: No home medications at the time of vaccination or hospital admission
Current Illness: No pertinent past medical history prior to vaccination
Preexisting Conditions: No pertinent past medical history prior to vaccination
Allergies: No known allergies of any type
Diagnostic Lab Data: BP: 159/106 (12/22/20), Platelets 0 (12/22/20), monocytes 12.1% (12/22/20), BUN 22.3 (12/22/20), BILI 1.50 (12/22/20), calculated osmolality 297 (12/22/20). All other labs are w
CDC Split Type:
Write-up: HPI: 56 y.o. male with no pmhx c/o generalized bruising for 2 days, noticed small blood tinged spots generalized. Gradual onset, severe on severity, no alleviating or aggravating factors. Patient denies fevers, chills, N/V/D, abdominal pain. In ER: Platelet <1. Platelet transfusion in ER. Admitted for Thrombocytopenia/ITP

VAERS ID: 907022 (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-22
Age: 44.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Ohio  Entered: 2020-12-22

<table>
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<tr>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>01J20A / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Angioedema, Endotracheal intubation
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Oropharyngeal allergic conditions (narrow), Hypersensitivity (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Calcium 600 mg with D daily; Women"s Multiple vitamin daily; Vitamin D3 5,000 units daily; Zyrtec 10 mg at bedtime PRN; Celebrex 200 mg daily; Gabapentin 300 mg (3 caps daily); Melatonin 9 mg daily PRN; Zanaflex 4 mg Daily
Current Illness: Not known
Preexisting Conditions: Anxiety; Depression; Chronic Back Pain
Allergies: Morphine; Tramadol; NSAIDs; Codeine; Oxycodone; Percocet
**Diagnostic Lab Data:** None at this time

**CDC Split Type:**

**Write-up:** Anaphylaxis/Angioedema Patient was given EpiPen 0.3 mg IM; Methylprednisolone 125 mg once; Diphenhydramine 25 mg IV push once; Famotidine 20 mg IV push once; Dexamethasone 10 mg IV push once Patient was intubated and put on propofol and midazolam drips for sedation

---

**VAERS ID:** [907074](history)

**Form:** Version 2.0

**Age:** 82.0

**Sex:** Female

**Location:** Ohio

**Vaccinated:** 2020-12-22

**Onset:** 2020-12-22

**Days after vaccination:** 0

**Submitted:** 0000-00-00

**Entered:** 2020-12-22

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:** Atrial fibrillation, Condition aggravated

**SMQs:** Supraventricular tachyarrhythmias (narrow)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, ? days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:** atrial fibrillation hx

**Preexisting Conditions:** atrial fibrillation hx

**Allergies:** NKDA

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** EMS called after patient displayed a heart rate of 160, a little over an hour after vaccine administration. Patient was taken to the hospital and diagnosed with an episode of RVR Afib; she was admitted to the hospital.
VAERS ID: 907101 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-22
Age: 41.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Maine Entered: 2020-12-22

<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Work Purchased by: ?
Symptoms: Chest X-ray, Cough, Hyperhidrosis, Nausea, Palpitations, Speech disorder
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypoglycaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Singulair, advair, Duonebs, dupixent, albuterol, zyrtec, chlorpheniramine; wellbutrin, Sertraline;
Current Illness: had been feeling slightly under the weather two weeks ago; no current asthma exacerbation, but has very labile asthma
Preexisting Conditions: Sleep apnea on CPAP eosinophilic asthma on multiple controller meds environmental allergies obesity
Allergies: Anaphylaxis hx to NSAIDS; hs of environmental allergies, and reaction to latex
Diagnostic Lab Data: 12/22/20 - CXR ordered - results not currently available
CDC Split Type:
Write-up: patient felt slightly nauseated at 10 minutes after injection, then developed slight sweating; BP 160/81; 83 at 5:45 and then 158/87 with HR 82 at 5:52 pm. Her lungs were clear, she was speaking in full sentences and was denying any chest pressure, her usual sense of asthma exacerbation. At 6:05 it was 164/83 with HR 79 and patient developed a dry cough; we decided to have her wait just a bit longer, then cough worsened, so at 6:25, decision was made to have patient seen in ER for further assessment, and en route in wheelchair to ER the dry cough became persistent, spasmodic and patient was unable to speak. Epi-Pen was injected in right mid thigh, and patient transported to ED urgent eval. She noted immediate palpitations, and slight improvement of breahting, was able to speak in four
word sentences. On arrival to the ED, patient was administered Duonebs, Albuterol neb, IV Benedryl, IV Solumedrol; CXR was obtained, with results pending. Patient was sent to observation for ongoing monitoring and assessment of breathing. at 6:30 PM in the ER, she

<table>
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<tr>
<th>VAERS ID: 907330 (history)</th>
<th>Vaccinated: 2020-12-22</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-22</td>
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<tr>
<td>Age: 50.0</td>
<td>Days after vaccination: 0</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Arizona</td>
<td>Entered: 2020-12-22</td>
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</table>

**VAERS ID:** 907330 (history)  
**Form:** Version 2.0  
**Age:** 50.0  
**Sex:** Female  
**Location:** Arizona  
**Vaccinated:** 2020-12-22  
**Onset:** 2020-12-22  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-22

**Vaccination / Manufacturer**  
**Lot / Dose**  
**Site / Route**

| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 011J20A / 1 LA / SYR |
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 011J20A / 1 LA / SYR |

**Administered by:** Private  
**Purchased by:** ?  
**Symptoms:** Abdominal discomfort, Abdominal pain, Dizziness, Dyspnoea, Headache, Hyperhidrosis, Hyperventilation, Rash macular, Tremor, Vomiting  
**SMQs:** Anaphylactic reaction (broad), Acute pancreatitis (broad), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Parkinson-like events (broad), Gastrointestinal perforation, ulcer, haemorrhage, obstruction non-specific findings/procedures (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** Flexeril, Advil, Protonix, Estrace, Vivelle DOT Norco PRN  
**Current Illness:** No  
**Preexisting Conditions:** Mild Osteopenia, GERD, Anemia,  
**Allergies:** Reglan - anaphylaxis  
**Diagnostic Lab Data:** 12/22 ED administrated PEPCID, ZOFRAN, Prednisone 60 mg, and Ativan 1mg IV.  
**CDC Split Type:**  
**Write-up:** Employee presented to COVID Clinic for Moderna COVID 19 vaccination 1st dose. Given to left arm. Left clinic prior to completing 15 minute observation time and told an MA in waiting area that she felt ill ot her stomach and having trouble taking deep breaths. Employee
found in nearby Bathroom sitting on the floor, she had vomited, reported she was lightheaded, couldn't breathe, shaking, abdominal discomfort sweating, attempted to move employee to wheelchair, did respond well to transfer to Wheelchair, She reported symptoms worsening: HA, abdominal pain and developed blotchy skin, hyperventilating, and dizzy. CODE Blue called, patient given Epinephrine injection 0.5mg patient sent to ER

VAERS ID: 907423 (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-22
Age: 26.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Arizona  Entered: 2020-12-23

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<td>011J20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  Purchased by: ?

Symptoms: Asthenia, Chest X-ray, Computerised tomogram head, Dyspnoea, Electrocardiogram, Hypoaesthesia, Laboratory test, Nausea, Pregnancy test, Speech disorder, Swollen tongue

SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (narrow), Peripheral neuropathy (broad), Dementia (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Psychosis and psychotic disorders (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: Laparoscopic Cholecystectomy on 11-6-2020
Preexisting Conditions: None
Allergies: Keflex and Tramadol
Diagnostic Lab Data: CT of head, routine labs, chest x-ray, pregnancy test, neurology consulting, EKG
CDC Split Type:
Write-up: Onset of symptoms began approximately 1.5 hours after vaccination. Patient became weak c/o tongue swelling, nausea, difficulty breathing, numbness especially in lower
extremities. Felt she couldn't breath, numbness continued to get worse and affected her upper extremities as well, weak speech.

<table>
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<tr>
<td>Age: 48.0</td>
<td>Days after vaccination: 0</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: New Mexico</td>
<td>Entered: 2020-12-23</td>
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Vaccination / Manufacturer

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<tr>
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<td>EK5730 / 1</td>
<td>- / IM</td>
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</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Acute kidney injury, Anxiety, Atrial tachycardia, Chest discomfort, Chest pain, Dizziness, Dyspnoea, Flushing, Hyperhidrosis, Hypersensitivity, Hypertension, Malaise, Palpitations, Tremor
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (narrow), Anaphylactic reaction (narrow), Angioedema (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Parkinson-like events (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hypertension (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Allergies: none
Diagnostic Lab Data:
48 y.o female with history of atrial tachycardia who presents to the ED via EMS for a possible adverse reaction to Covid vaccine. Patient received her Covid vaccine around 1600 today, and soon became diaphoretic, shaky, and lightheaded. She had presented to the emergency department. Currently she denies any chest pain, difficulty breathing, throat swelling, tongue swelling, or any other symptoms currently except for palpitations. 

**Allergic Reaction**

The primary symptoms are shortness of breath. The primary symptoms do not include cough, abdominal pain, vomiting, dizziness or rash. The current episode started 1 to 2 hours ago. The problem has not changed since onset. The onset of the reaction was associated with a new medication. Significant symptoms also include flushing. 48-year-old female with a history of atrial septal defect, status post atrial septal defect repair in 1980. She works as a nurse at Hospital and has been experiencing increasing rapid palpitations associated with chest pain, and hypertension. With her episodes, she experiences marked lightheadedness, dyspnea, and feeling marked anxiety, as well as chest tightness. She received the COVID-19 vaccine today and while waiting in the observation room, she started feeling unwell, with rapid palpitations, associated with lightheadedness and dyspnea. She last had a sustained episode 2 - 3 weeks ago and had presented to ER and Hospital. No syncope. No orthopnea, PND or increased lower extremity swelling. 

**Active Hospital Problems?**

Diagnosis ? Atrial paroxysmal tachycardia ? History of repair of atrial septal defect ? ? ? 1. Paroxysmal atrial tachycardia in setting of prior atrial septal defect repair - she is having breakthrough episodes through flecainide/digoxin - it is likely her atrial tachycardia is related to her ASD patch. Will hold flecainide/digoxin for now, and try to schedule an ablation during her hospital admission due to highly symptomatic episodes resulting in multiple ER visits. ? 2. Acute renal insufficiency - most likely pre-renal - iv fluids started. ? 3. Possible COVID-19 vaccine reaction - she probably had an incidental atrial tachycardia episode post vaccine administration, rather than an actual adverse reaction. Continue to monitor.

---

### VAERS ID: 907478 (history)

| Vaccinated: | 2020-12-18 |
| Onset: | 2020-12-20 |
| Days after vaccination: | 2 |
| Submitted: | 0000-00-00 |
| Entered: | 2020-12-23 |

<table>
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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Computerised tomogram head normal, Computerised tomogram thorax normal, Electroencephalogram, Generalised tonic-clonic seizure

**SMQs:** Systemic lupus erythematosus (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Atorvastatin, Multivitamin, Aspirin
Current Illness: none
Preexisting Conditions: none
Allergies: none
Diagnostic Lab Data: CT Head, MRI Brain, CT Chest, all negative, EEG results unknown at this time
CDC Split Type:
Write-up: Seizure (Grand mal)

VAERS ID: 907616 (history)
Form: Version 2.0
Age: 53.0
Sex: Female
Location: New Mexico

Vaccination / Manufacturer | Lot / Dose | Site / Route
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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK5730 / 1 | - / IM

Administered by: Other
Purchased by: ?
Symptoms: Anaphylactic reaction, Dyspnoea, Hypersensitivity, Pruritus, Urticaria
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Past Medical History: Diagnosis Date ? Addison's disease (CMS-
Write-up: 12-22 HPI 53-year-old female with a history of Addison's disease, anaphylactic reaction who presents to the ED complaining of hives and shortness of breath. Patient reports that 3 days ago she received the COVID-19 pfizer vaccine. She reports that since that time she has developed progressively worsening hives on her legs and arms. Approximately 1 hour ago she began to develop shortness of breath and so she presented to the ER. Patient reports a previous history of anaphylactic reactions multiple times. Denies any other acute complaints at this time. MDM Patient came in with shortness of breath and hives. Suspect allergic reaction to the COVID-19 vaccine. Patient had already taken 50 mg of Benadryl. She was given Solu-Medrol and EpiPen. She reported feeling better with improvement in the pruritus. She reports that she has had rebound reaction requiring EpiPen at 24 hours. Given the distance that she lives from adequate medical care and the possibility for recurrent severe reactions, the patient will be hospitalized for further observation. 12-23 Female with history of asthma and addison's had anaphylaxis to covid vaccine. Admitted over night to ensure that she did not rebound. Received IV Dex and this am has had no reoccurrence of hives or shortness of breath. Will discharge home on epipen, hydrocortisone prn, prednisone bid for 5 days. Return to ER or go to PCP for worsening symptoms.

VAERS ID: 907635  

Form: Version 2.0  
Age: 48.0  
Sex: Female  
Location: Delaware  
Vaccinated: 2020-12-23  
Onset: 2020-12-23  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2020-12-23

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<td>LA / IM</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Swollen tongue, Throat irritation

SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, ? days  
Extended hospital stay? No
Write-up: Patient received covid 19 vaccine. She began to experience itching throat and swollen tongue. She was sent to the Emergency Department. She received IV Benadryl 50 mg, IV famotidine 20 mg and 125 mg IV solu-medrol. Around 930, patient stated that symptoms had resolved, except for tongue being slightly swollen. Patient was admitted to the observation unit of the hospital.

VAERS ID: 907805 (history) Vaccinated: 2020-12-15
Form: Version 2.0 Onset: 2020-12-16
Age: 52.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Florida Entered: 2020-12-23

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<td>EH9899 / 1</td>
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Administered by: Pharmacy    Purchased by: ?
Symptoms: Atrial fibrillation, Blood parathyroid hormone increased, Chest discomfort, Chest pain, Chills, Computerised tomogram thorax normal, Dyspnoea, Echocardiogram abnormal, Fatigue, Fibrin D dimer increased, Pain, Painful respiration, Palpitations, Tricuspid valve incompetence, Troponin normal
SMQs: Anaphylactic reaction (broad), Haemorrhage laboratory terms (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Chronic kidney disease (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: ziac, protonix, loratadine, crestor, multivitamin
Current Illness: no
Preexisting Conditions: HTN, hypercholesterolemia, primary hyperparathyroidism
**Allergies:** no known allergies

**Diagnostic Lab Data:** 12/18/20 D Dimer was elevated. CT chest was negative for PE. Troponins were normal. routine labs were performed. PTH 114. 12/19/20 Echo was normal with mild tricuspid regurgitation

**CDC Split Type:**

**Write-up:** First night following after vaccine I woke up with chest pain (i though pleuritic) which went away. I had mild body aches and fatigue, chills. next day I experienced chest (again I thought pleuritic) discomfort especially when taking a deep breath. i felt better then had mild fatigue and body aches again. day 3 post vaccine I woke up with discomfort when taking a deep breath with continued discomfort. i felt tired through the day. Then that evening i developed SOB, severe palpitations and chest pain and went to ER. Diagnosis New onset rapid A fib. I was hospitalized and once my work up was finished and I had normal sinus rhythm I was discharged home the next evening.

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**VAERS ID:** 907852 (history)

**Form:** Version 2.0

**Age:** 83.0

**Sex:** Female

**Location:** Pennsylvania

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**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Diarrhoea, Headache, Nausea, Vomiting

**SMQs:** Acute pancreatitis (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (narrow)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, ? days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Allopurinol 300mg, atorvastatin 20mg, Vitamin D3 1,00U, digoxin 125mcg, Colace 100mg, metoprolol XL 100mg, Pantoprazole 40mg

**Current Illness:** COVID 19 PNA 11/3/20

**Preexisting Conditions:** HTN, Osteoarthritis, HLD, Gout, Glaucoma, DM2- diet controlled, cardiomyopathy, systolic CHF, PAF

**Allergies:** Alendronate, Calcitonin, Penicillin, Raloxifene, Bimatoprost, Erythromycin

**Diagnostic Lab Data:**
Write-up: Patient received Pfizer COVID 19 vaccine on 12/21/2020. Patient felt fine that day and all day of 12/22/2020. Around 2AM on 12/23/2020, Patient woke up with a headache and started to have nausea, vomiting, and diarrhea.

VAERS ID: 907860 (history)  
Form: Version 2.0  
Age: 66.0  
Sex: Female  
Location: Unknown  

Vaccinated: 2020-12-22  
Onset: 2020-12-23  
Days after vaccination: 1  
Submitted: 0000-00-00  
Entered: 2020-12-23

Vaccination / Manufacturer

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Administered by: Private  
Purchased by: ?

Symptoms: Chest discomfort, Dizziness, Troponin increased  
SMQs: Anaphylactic reaction (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Vestibular disorders (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? Yes  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, ? days  
Extended hospital stay? No

Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: increased troponin.

CDC Split Type: 
Write-up: Chest pressure, dizziness, increased troponin lab value.

VAERS ID: 908003 (history)  
Form: Version 2.0  
Age: 44.0  
Sex: Female  
Location: Michigan  

Vaccinated: 2020-12-21  
Onset: 2020-12-21  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2020-12-23

Vaccination / Manufacturer

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Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Chest discomfort, Dyspnoea, Electrocardiogram, Tachycardia, Throat tightness
SMQs: Anaphylactic reaction (narrow), Angioedema (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Dehydration (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Ibuprophen
Current Illness: none
Preexisting Conditions: none
Allergies: Gadolinium MRI dye
Diagnostic Lab Data: EPINEPHRINE, SOLUMEDROL, BENADRYL, PEPCID, EKG (ST).
12/21 3:14PM REPEAT EVENT 12/22 WITH ADMISSION TO OBS UNIT FOR OBSERVATION
CDC Split Type:
Write-up: ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA

VAERS ID: 908262 (history)  Vaccinated: 2020-12-17
Form: Version 2.0  Onset: 2020-12-17
Age: Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: New York  Entered: 2020-12-24

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Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Intensive care
SMQs: Anaphylactic reaction (narrow), Anaphylactic/anaphylactoid shock conditions
Anaphylaxis; This is a spontaneous report from a contactable pharmacist. A 55-year-old female patient received the bnt162b2 (BNT162B2; also reported as: PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 17Dec2020 at a single dose for COVID-19 immunization. The patient"s medical history included eosinophil process allergic reaction, fish, iodine and shellfish allergy; all from an unknown date and unknown if ongoing. Concomitant medications were not reported. The patient previously took rabies vaccine for immunization and experienced anaphylactic reaction on an unspecified date. On 17Dec2020, the patient experienced anaphylaxis; which required hospitalization, and was assessed as medically significant. The patient was hospitalized for anaphylaxis from 18Dec2020 to an unknown date. The clinical course was reported as follows: The pharmacist called about a patient who received the COVID-19 vaccine on 17Dec2020 and started having a reaction approximately 30 minutes later. The patient used epinephrine (EPIPEN) and 50 mg of diphenhydramine hydrochloride (BENADRYL) and returned to the hospital on 18Dec2020. The patient was currently in the intensive care unit (ICU) receiving an epinephrine drip. The patient had a previous history of an anaphylactic reaction to the rabies vaccine, eosinophil process allergic reaction, fish, iodine and shellfish allergy. The patient was stabilized but continued to have reactions (not specified). The pharmacist had not seen the patient and was reaching out to Pfizer on behalf of the physicians. The pharmacist believed this had been reported by the hospital. The pharmacist had no patient information. Therapeutic measures were taken as a result of anaphylaxis. The clinical outcome of the event, anaphylaxis, was unknown. The batch/lot numbers for the vaccine, BNT162B2, were not provided and will be requested during follow up.; Sender"s Comments: Based on the information available, a possible contributory role of the suspect products cannot be excluded for the reported event anaphylaxis due to temporal association. However patient previous history of allergic reaction cannot be excluded to have played a contributory role.
VAERS ID: **908401** (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 24.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Kentucky Entered: 2020-12-24

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Administered by: Work Purchased by: ?
Symptoms: C-reactive protein increased, Chills, Dizziness, Electrocardiogram abnormal, Fibrin D dimer normal, Sinus tachycardia, Tremor
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Parkinson-like events (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypoglycaemia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Junel Birth Control
Current Illness: COVID-19 Positive with past 30 days, symptoms resolved
Preexisting Conditions: anxiety, heart murmur
Allergies: No known allergies
Diagnostic Lab Data: D-Dimer 0.64 C Reactive Protein 6.98 EKG- Sinus Tachycardia 146-160"s
CDC Split Type:
Write-up: Vaccine administered at 0730. Pt went home and went to bed. Woke up at 0930 with shaking, chills and feeling like she was going to pass out. Evaluated in ER and noted to have sinus tachycardia in 140-160"s. Given 5mg IV Lopressor which took heart rate down to 110"s. Admitted to hospital 12/23/2020.

VAERS ID: **908448** (history) Vaccinated: 0000-00-00
Form: Version 2.0 Onset: 0000-00-00
Age: Unknown Submitted: 0000-00-00
Sex: Unknown Entered: 2020-12-24
Location: Illinois
**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**

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**UNK: VACCINE NOT SPECIFIED (NO BRAND NAME) / UNKNOWN MANUFACTURER**

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Administered by: Private  
Purchased by: ?

**Symptoms:** Blood test, Hypoaesthesia, Influenza virus test negative, Magnetic resonance imaging normal, Muscular weakness, SARS-CoV-2 test negative, Streptococcus test negative  
SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), COVID-19 (broad), Sexual dysfunction (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** Yes  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Vitamin D 50000 iu

**Current Illness:** None  
**Preexisting Conditions:** Christi and syringohydromelia, I eye scotoma  
**Allergies:** Iodinated contrast dye dicloxicillin lidocaine nectar tape smo

**Diagnostic Lab Data:** Step test rapid COVID regular COVID influenza all negative 12/22/20  
MRI 12/23/20 Blood work 12/23/20

**CDC Split Type:**

**Write-up:** Left arm leg and face numbness bilateral legweakness Vaccine given at 915 am  
Symptoms started at 11 am Called Pfizer to report at 1151 am Saw primary doctor at 2 pm  
Return to primary md again 12/22/20 Referral to neurosurgeon 11/22/20 Hospitalized 11/22/20 to 11/24/20 lepto Meningeal inflammation hospital

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**VAERS ID:** [908663](https://www.vaers.org/vaers/files/908663_history.pdf) (history)  
**Vaccinated:** 2020-12-23  
**Onset:** 2020-12-23  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-24

**COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA**

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Administered by: Private  
Purchased by: ?

**Symptoms:** Chest pain, Erythema, Feeling hot, Lung disorder, Paraesthesia, Pharyngeal swelling
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Accutane Multivitamin
Current Illness: Acne has improved
Preexisting Conditions: Acne
Allergies: None
Diagnostic Lab Data:

Write-up: Within minutes I had lower chest pain and wired sensation in my lungs. My throat was swelling. I was very hot and red. I the gurney my right arm was tingling. Opposite arm from vaccine.

VAERS ID: 908685 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-23
Age: 22.0  Days after vaccination: 0
Sex: Female
Location: Arizona  Submitted: 0000-00-00
Entered: 2020-12-24

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Administered by: Private  Purchased by: ?
Symptoms: Pharyngeal swelling, Supraventricular tachycardia
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Supraventricular tachyarrhythmias (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Nuvaring
Current Illness: Chronic Tonsillitis Dysmenorrhea
Preexisting Conditions: N/A
Allergies: N.K.A
Diagnostic Lab Data:
CDC Split Type: vsafe
Write-up: throat swelling, SVT

VAERS ID: 908869 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-19
Age: 73.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Oklahoma Entered: 2020-12-24

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<td>EH9899 / 1</td>
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Administered by: Private  Purchased by: ?
Symptoms: Blood bilirubin increased, Blood creatinine increased, Contusion, Immunoglobulin therapy, International normalised ratio normal, Metabolic function test normal, Petechiae, Platelet count decreased, Platelet transfusion, Prothrombin time normal
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Liver related investigations, signs and symptoms (narrow), Acute pancreatitis (broad), Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (broad), Retroperitoneal fibrosis (broad), Biliary system related investigations, signs and symptoms (narrow), Accidents and injuries (narrow), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Comprehensive list displayed in additional information below. ascorbic acid daily, atorvastatin 40mg daily, cholecalciferol daily, docusate 100mg daily, levothyroxine 100mcg daily, losartan 100mg daily, zinc 50mg daily
Current Illness: Vague symptoms (anorexia, fatigue) 11/29/2020 - 12/6/2020; Received high-dose influenza vaccination on 11/25/2020 at employee health department. On 11/29/2020 patient began having generalized fatigue, anorexia, and occasional chills. Presented to Urgent care on 12/4/2020 and reported same symptoms for past 5 days with 10-12 lb weight loss and worsening fatigue. Pfizer rapid PCR COVID test negative. Patient's symptoms improved and he returned to normal activities of daily living until 12/19/2020, 1 day after COVID19 vaccination.

Preexisting Conditions: HTN, Type II Diabetes
Allergies: NKDA
Diagnostic Lab Data: 12/21/2020 CBC: platelets of 1,000

CDC Split Type:
Write-up: 12/18/2020: COVID19 vaccine received. 12/19/2020: Patient noticed petechiae/bruising on arms, legs and face. Worsened over next 48 hours. 12/21/2020: Patient had blood drawn (CMP, PT/INR, CBC) at lab. 12/22/2020: Labs resulted; CMP and PT/INR WNL (exceptions: SCr 1.24, TBil 1.7); CBC with platelet count of 1,000 resulting in patient admission to Hospital. At admission he received 80 mg of prednisone, 40 g of IV Ig and a unit of platelets. 12/23/2020: Continued hospitalization. Patient’s platelets improved to 20,000 and he received another 35g of IV Ig. 12/24/2020: Patient discharged with platelets of 38,000.

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<tr>
<td>COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private    Purchased by: ?

Symptoms: Dizziness, Hypotension, Loss of consciousness, Unresponsive to stimuli
SMQs: Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
VAERS ID: 908893 (history)  
Vaccinated: 2020-12-23  
Onset: 2020-12-24  
Days after vaccination: 1  
Submitted: 0000-00-00  
Entered: 2020-12-24

**Vaccination / Manufacturer**  
**Lot / Dose**  
**Site / Route**
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH  
UNKNOWN / 1  
UN / IM

**VAERS ID:** 908893  
**Vaccination:** 2020-12-23  
**Onset:** 2020-12-24  
**Days after vaccination:** 1  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-24

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Acute kidney injury, Blood creatine increased, Blood potassium increased, Blood urea increased, Chronic kidney disease, Electrocardiogram T wave peaked, Haemodialysis, Hyperkalaemia, Mental status changes, Pyrexia

**SMQs:** Rhabdomyolysis/myopathy (broad), Acute renal failure (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Chronic kidney disease (narrow), Tumour lysis syndrome (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, ? days

**Extended hospital stay?** No

**Previous Vaccinations:**
Other Medications: amlodipine 10mg QD, atorvastating 10mg QD, brimonidione-timolol, calcium acetate 667, plavix, diltiazem 30mg BID, hyralazine 100mg TID, labetalol 200mg BID, keppra 500mg, pantoprazole 20mg, latanoprost

Current Illness: Unknown

Preexisting Conditions: Hypertension, T2 Diabetes Mellitus, End Stage Renal Disease, Heart Failure with preserved ejection fraction, Coronary Artery disease s/p stent placement, COVID Pneumonia 4/2020

Allergies: NKDA

Diagnostic Lab Data: Temp 100.8, Potassium 7.8, BUN 35, Cr 8.81

Write-up: Patient vaccinated at Nursing home. Transferred to ER the following day when patient developed fever and altered mental status. Found to have acute kidney injury on chronic kidney disease, hyperkalemia. Required emergent hemodialysis for hyperkalemia with ECG findings of peaked T waves.

VAERS ID: 908917 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-24
Age: 47.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Nebraska Entered: 2020-12-24

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<th>Site / Route</th>
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<td>025J20-2A / 1</td>
<td>AR / IM</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?

Symptoms: Activated partial thromboplastin time shortened, Asthenia, Binocular eye movement disorder, Blood glucose normal, Dysarthria, Facial paralysis, Feeling abnormal, Gait disturbance, Grip strength decreased, Haemoglobin normal, International normalised ratio normal, Mobility decreased, Platelet count normal, Red blood cell count normal, Visual impairment, White blood cell count normal

SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Dementia (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Glaucoma (broad), Optic nerve disorders (broad), Lens disorders (broad), Retinal disorders (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hearing impairment (broad), Ocular motility disorders (narrow), Tendinopathies and ligament disorders (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:
Other Medications: Albuterol inhaler, Vitamin D3, citalopram, fluticasone nasal spray, tramadol, nicotine transdermal patch

Current Illness: No recent illnesses in the last 30 days

Preexisting Conditions: Tobacco dependency, depression, chronic low back pain, anxiety, vitamin D deficiency

Allergies: No known drug or food allergies

Diagnostic Lab Data: WBC: 8.1 RBC: 4.81 Hemoglobin: 15.2 Platelet Count: 188 INR: 0.9 PTT: 32 Blood Glucose: 108

CDC Split Type:

Write-up: Patient is a 47 y.o. female who arrived by Car presented to the emergency department for Stroke symptoms. Patient awoke at 6:15 this morning, some difficulty seeing out of the right eye and also was stumbling towards the left and to table. Concerned about things not being right so brought to the emergency department. Patient feels her speaking and swallowing are okay. She did drink a bit of coffee earlier. She denies headache or significant vision problems presently. Continues to not feel normal on her left side. No history of stroke and parents or siblings. She does give personal history of an occipital migraine many years ago at which time she did not have a headache but had some vision troubles. Physical Exam Vitals signs and nursing note reviewed. Constitutional: General: She is not in acute distress. Appearance: She is not ill-appearing or diaphoretic. HENT: Head: Normocephalic and atraumatic. Right Ear: Tympanic membrane normal. Left Ear: Tympanic membrane normal. Nose: Nose normal. Mouth/Throat: Mouth: Mucous membranes are moist. Pharynx: No oropharyngeal exudate or posterior oropharyngeal erythema. Eyes: Conjunctiva/sclera: Conjunctivae normal. Pupils: Pupils are equal, round, and reactive to light. Comments: Patient displays absence of left lateral movement Neck: Musculoskeletal: Normal range of motion. No muscular tenderness. Cardiovascular: Rate and Rhythm: Normal rate and regular rhythm. Heart sounds: No murmur. Pulmonary: Effort: Pulmonary effort is normal. Breath sounds: Normal breath sounds. Abdominal: General: Bowel sounds are normal. There is no distension. Palpations: Abdomen is soft. Tenderness: There is no abdominal tenderness. Musculoskeletal: Right lower leg: No edema. Left lower leg: No edema. Lymphadenopathy: Cervical: No cervical adenopathy. Skin: Findings: No rash. Neurological: Mental Status: She is alert. Cranial Nerves: Cranial nerve deficit (left facial droop, dysarthria) present. Comments: Patient"s speech seems a bit slurred to me. Absence of ocular movements towards left noted as well as upward movements. Tongue is midline. Patient is unable to shrug the left shoulder or lift the left arm off the bed. Grip strength is 4 out of 5 on the left. Left leg strength is 3 out of 5. Extremity strength on right arm and leg is 5 out of 5. After consultation with a neurologist, the patient is being transferred from the ED.

VAERS ID: 908918 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-23
Age: 61.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: New York  Entered: 2020-12-24

<table>
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<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0140 / 1</td>
<td>RA / -</td>
</tr>
</tbody>
</table>
**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:** Blood glucose decreased, Bradycardia, Heart rate decreased

**SMQs:** Arrhythmia related investigations, signs and symptoms (broad), Hypoglycaemia (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** Unknown  
**Current Illness:** Unknown  
**Preexisting Conditions:** Bradycardia  
**Allergies:** No known allergies  
**Diagnostic Lab Data:** Unknown  
**CDC Split Type:**

**Write-up:** This resident received the first dose of the Pfizer Covid vaccine at the Covid vaccine clinic at medical Facility. He had a rapid response, experienced low blood glucose and low heart rate. NP and medical director were in attendance. Heart rate remained low despite all measures. He was transferred to Hospital for bradycardia.

---

**VAERS ID:** 908969 (history)  
**Vaccinated:** 2020-12-19  
**Onset:** 2020-12-21  
**Days after vaccination:** 2  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-24

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<tr>
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<td>EK5730 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Other  
**Purchased by:** ?

**Symptoms:** Echocardiogram, Electrocardiogram abnormal, Laboratory test normal, Nausea, Pain, Palpitations, Pyrexia, Scan myocardial perfusion, Ventricular arrhythmia, Ventricular extrasystoles

**SMQs:** Torsade de pointes/QT prolongation (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Ventricular tachyarrhythmias (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypokalaemia (broad)

**Life Threatening?** No
Starting that night 12/19/20 at approx 8pm I became nauseous with a 100.8f fever. I felt achy for the 2 days with the fever subsided. On Monday 12/21/20 I was at work (Firefighter) when I started to have palpitations. I was able to obtain a 12 lead EKG right away which showed a ventricular rhythm lasting for approx 5 min. After that I was having multiple PVC's / Ventricular beats. I was taken to Hospital where I was admitted. Over night the rhythm subsided, all my labs were good with other test's being done. I was discharged home. I have not had any other episodes since Monday. I was cleared by our Occ Health Doc who suggested I fill this out.
Write-up: 15 min after receiving Covid 19 vaccine patient started to feel like her heart was racing / felt faint. Burning feeling in upper thigh and pelvic area. BP 180/100 HR 130. Rapid Response called / transported to ER. Admitted for 24 hr observation.. Solu-medrol, Benadryl and Ativan given in ER. Released home the next day. 72 hrs later patient states she has numbness and tingling in hands and feet. 12/24/2020 patient reports she is feeling better today / no symptoms noted.

VAERS ID: 909031
Form: Version 2.0
Age: 87.0
Sex: Female
Location: Alaska
Vaccinated: 2020-12-18
Onset: 2020-12-24
Days after vaccination: 6
Submitted: 0000-00-00
Entered: 2020-12-24

<table>
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<tr>
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<td>EK5730 / 1</td>
<td>AR / IM</td>
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</tbody>
</table>

Administered by: Private
Purchased by: ?

Symptoms: Blood bilirubin increased, Blood creatinine increased, Blood lactic acid decreased, C-reactive protein increased, Confusional state, Hypotension, Platelet count decreased, SARS-CoV-2 test negative, Sepsis, White blood cell count increased

SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Liver related investigations, signs and symptoms (narrow), Anaphylactic reaction (broad), Acute pancreatitis (broad), Haematopoietic thrombocytopenia (narrow), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Dementia (broad), Biliary system related investigations, signs and symptoms (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (broad), Sepsis (narrow), Opportunistic infections (broad), COVID-19 (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Levothyroxine, vitamin D, Naproxen, Namenda, Aricept
Current Illness: UTI
Preexisting Conditions: Dementia
Allergies: None
Diagnostic Lab Data: Lactic acid 2.2 Creat 1.2 CRP 8.32 T. Bili 1.1 WBC 13.3 Sars Cov2 negative (rapid Abbott) PLT 115
CDC Split Type:
Write-up: Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline)

VAERS ID: 909130 (history)  Vaccinated: 2020-12-16
Form: Version 2.0  Onset: 2020-12-20
Age: 51.0  Days after vaccination: 4
Sex: Male  Submitted: 0000-00-00
Location: New York  Entered: 2020-12-25

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Acute myocardial infarction, Catheterisation cardiac abnormal, Coronary artery occlusion, Troponin increased
SMQs: Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Bupropion
Current Illness: None
Preexisting Conditions: Psoriasis, psoriatic arthritis, seasonal affective disorder
Allergies: Amoxicillin
Diagnostic Lab Data: Cardiac cath with 100% RCA occlusion and 75% LAD occlusion, elevated troponin
### Write-up:
Acute NSTEMI with symptom onset 4 days after vaccination

<table>
<thead>
<tr>
<th>VAERS ID: 909146 (history)</th>
<th>Vaccinated: 2020-12-18</th>
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</thead>
<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-18</td>
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<tr>
<td>Age: 46.0</td>
<td>Days after vaccination: 0</td>
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<tr>
<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Texas</td>
<td>Entered: 2020-12-25</td>
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#### Vaccination / Manufacturer

<table>
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<tr>
<th>Vaccine / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Chest pain, Disorientation, Dyspnoea, Heart rate increased, Hyperhidrosis, Hypertension, Paraesthesia

**SMQs:** Anaphylactic reaction (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hypertension (narrow), Cardiomyopathy (broad), Hypoglycaemia (broad), Dehydration (broad)

**Life Threatening?** Yes

**Birth Defect?** No
**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** Yes
**ER Visit?** No
**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 1 days
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** I developed tingling all over body with disorientation, rise in heart rate to 140 mint/mints with New onset of severe HTN into 190 mmHg and diaphoresis, followed by SOB and Chest pain. I required IV solucotef, IV tendril and pepcid. Then i

**Current Illness:** Migraine

**Preexisting Conditions:** Migraine

**Allergies:** Levaquin-zithromax

**Diagnostic Lab Data:** see listed before

**CDC Split Type:**

**Write-up:** listed before
VAERS ID: 909379 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-23
Age: 28.0  Days after vaccination: 0
Sex: Female
Location: Pennsylvania
Submitted: 0000-00-00
Entered: 2020-12-26

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0140 / 1</td>
<td>RA / IM</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Cardiac monitoring, Chest X-ray, Computerised tomogram abdomen, Computerised tomogram pelvis, Computerised tomogram thorax, Electrocardiogram, Hypotension, Laboratory test, Nausea, Presyncope, Tachycardia, Vomiting
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations: mild near syncope at age 18 (2010) after Gardasil dose
Other Medications: bupropion PO 300mg daily fexofenadine PO 180mg daily Mirena IUD
Current Illness:
Preexisting Conditions:
Allergies: sulfa drugs, mango skin
Diagnostic Lab Data: 12/23/20 emergency department lab workup, chest x-ray, chest/abd/pelvis CT scan, EKG x3, inpatient hospital labs, cardiac monitoring
CDC Split Type:
Write-up: near syncope, hypotension, nausea/vomiting, tachycardia (120-150) within 5 minutes of administration. did not resolve and worsened within 1 hour. Pt went to ER for workups. Received IV benadryl without improvement. Admitted to hospital overnight for continuous cardiac monitoring. Improved overnight and discharged in the afternoon 12/24/20.
VAERS ID: 909490 (history) Vaccinated: 2020-12-26
Form: Version 2.0 Onset: 2020-12-26
Age: 28.0 Days after vaccination: 0
Sex: Female
Location: Washington Submitted: 0000-00-00
Entered: 2020-12-27

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<td>- / 1</td>
<td>- / IM</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Anaemia, Dizziness, Haemoglobin decreased, Nausea, Palpitations, Sinus tachycardia
SMQs: Acute pancreatitis (broad), Haematopoietic erythropenia (broad), Haemorrhage laboratory terms (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: none
Current Illness: none
Preexisting Conditions: none
Allergies: pollen
Diagnostic Lab Data: Anemia - Hb 9.5 tachycardia 120s
CDC Split Type:
Write-up: The patient developed palpitations, lightheadedness and nausea and came to the ED and was found to have sinus tachycardia. Unclear if it is a vaccine reaction or due to anxiety or severe iron deficiency anemia.

VAERS ID: 909577 (history) Vaccinated: 2020-12-26
Form: Version 2.0 Onset: 2020-12-26
Age: 60.0 Days after vaccination: 0
Sex: Female
Location: Michigan Submitted: 0000-00-00
Entered: 2020-12-27
<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>Symptoms:</td>
<td>Dizziness, Dyspnoea, Full blood count, Laboratory test, Swelling</td>
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<tr>
<td>SMQs:</td>
<td>Anaphylactic reaction (narrow), Angioedema (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Vestibular disorders (broad)</td>
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<tr>
<td>Life Threatening?</td>
<td>Yes</td>
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<tr>
<td>Birth Defect?</td>
<td>No</td>
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<tr>
<td>Died?</td>
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<td>Permanent Disability?</td>
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<tr>
<td>Recovered?</td>
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<tr>
<td>Office Visit?</td>
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<td>ER Visit?</td>
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<tr>
<td>ER or Doctor Visit?</td>
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<tr>
<td>Hospitalized?</td>
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<td>Extended hospital stay?</td>
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<td>Previous Vaccinations:</td>
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<td>Other Medications:</td>
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<td>Current Illness:</td>
<td>Viral respiratory infection</td>
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<td>Preexisting Conditions:</td>
<td>Allergic rhinitis, GERD, endometriosis</td>
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<td>Allergies:</td>
<td>Avocado, Banana, Latex, Neosporin, Nystatin, Sulfa, Pineapple</td>
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<td>Diagnostic Lab Data:</td>
<td>Routine chemistries, CBC</td>
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<td>CDC Split Type:</td>
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<tr>
<td>Write-up:</td>
<td>Dizziness, dyspnea, neck swelling</td>
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</table>

**VAERS ID:** [909586](history)  
**Vaccinated:** 2020-12-17  
**Form:** Version 2.0  
**Age:** 48.0  
**Sex:** Female  
**Location:** Texas  
**Onset:** 2020-12-26  
**Days after vaccination:** 9  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-27

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<td>LA / IM</td>
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<tr>
<td>Administered by:</td>
<td>Private</td>
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<td>Purchased by:</td>
<td>?</td>
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</tr>
<tr>
<td>Symptoms:</td>
<td>COVID-19, Chest X-ray abnormal, Exposure to SARS-CoV-2, Pneumonia</td>
<td></td>
</tr>
<tr>
<td>SMQs:</td>
<td>Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)</td>
<td></td>
</tr>
<tr>
<td>Life Threatening?</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
Birth Defect? No  
Died? No  
Permanently Disabled? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 2 days  
  Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: Unknown  
Current Illness: Unknown  
Preexisting Conditions: Unknown  
Allergies: Unknown  
Diagnostic Lab Data: Chest exam and e-x-ray"s (hospitalized)  
CDC Split Type:  
Write-up: The patient was vaccinated on 12/17/20. Wife was diagnosed with COVID-19 on 12/18/20. He was diagnosed with COVID-19 on 12/21/20. Symptoms worsened on 12/26/20. And he had chest exam (x-ray"s), pneumonia bi-lateral and he was hospitalized on 12/26/20.

<table>
<thead>
<tr>
<th>VAERS ID: 909635 (history)</th>
<th>Vaccinated: 2020-12-21</th>
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</thead>
<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-22</td>
</tr>
<tr>
<td>Age: 46.0</td>
<td>Days after vaccination: 1</td>
</tr>
<tr>
<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
</tr>
</tbody>
</table>

| Location: Maryland | Entered: 2020-12-27 |

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  
Purchased by: ?  
Symptoms: Atrial fibrillation, Cardioversion, Chest discomfort, Dyspnoea, Echocardiogram normal, Palpitations, Presyncope  
SMQs: Anaphylactic reaction (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypotonic-hypo responsiveness episode (broad), Hypoglycaemia (broad)  
Life Threatening? Yes  
Birth Defect? No  
Died? No  
Permanently Disabled? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 2 days  
  Extended hospital stay? No
Previous Vaccinations: 
Other Medications: metformin, Jardiance, Losartan, HCTZ
Current Illness: 
Preexisting Conditions: DM, HTN
Allergies: Amoxicillin 
Diagnostic Lab Data: Normal echocardiogram

CDC Split Type:
Write-up: Palpitations, shortness of breath, chest tightness, presyncope, which led to New onset atrial fibrillation with rapid ventricular response and required synchronized cardioversion and hospitalization. Discharged on anticoagulation and beta-blocker.

VAERS ID: 909720 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-23
Age: 41.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Minnesota Entered: 2020-12-27

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
</tr>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EJ1685 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Abdominal pain lower, Appendicectomy, Appendicitis, Computerised tomogram abnormal, Pyrexia
SMQs;: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations: 
Other Medications: 
Current Illness: None
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: 12/24- CT revealed appendicitis, appendectomy performed
CDC Split Type:
Write-up: 12/23- began to experience intermittent right lower quadrant pain in the morning, fever of 100.4 F in the evening which subsided with ibuprofen. 12/24- no fever noted but
intermittent right lower quadrant pain continued, seen at the Health Clinic, sent to Hospital ER for CT scan, diagnosed with appendicitis, appendectomy performed.

VAERS ID: 909778 (history) Vaccinated: 2020-12-26
Form: Version 2.0 Onset: 2020-12-26
Age: 20.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Virginia Entered: 2020-12-27

**Vaccination / Manufacturer**

<table>
<thead>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Work Purchased by: ?

**Symptoms:** Dysphagia, Electroencephalogram, Pruritus, Psychogenic seizure, Swollen tongue, Tongue pruritus, Urticaria

**SMQs:** Anaphylactic reaction (narrow), Angioedema (narrow), Anticholinergic syndrome (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** Yes
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** Yes
**Hospitalized?** Yes, 2 days
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Depovera

**Current Illness:**

**Preexisting Conditions:** Asthma

**Allergies:** Morphine, penicillin, Shellfish, iodine, honey, pollen, dust

**Diagnostic Lab Data:** EEG

**CDC Split Type:**

**Write-up:** 8:27 Hives, itching all over chest and on tongue, tongue swelling, slight difficulty swallowing. 8:30 epi administered/ benedrly 8:32 pseudo seizures begin off and on till the 27th
VAERS ID: 909911 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-20
Age: 65.0 Days after vaccination: 2
Sex: Male Submitted: 0000-00-00
Location: Alaska Entered: 2020-12-28

<table>
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<tbody>
<tr>
<td><strong>COVID19</strong>: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Atrial fibrillation, Cardioversion, Echocardiogram, Electrocardiogram, Laboratory test
SMQs: Supraventricular tachyarrhythmias (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: HYDROCHLORIATHIAZIDE 25 MG 1/DAY, ALODAPRINE 5MG 1/DAY
Current Illness: HYPERTENSION
Preexisting Conditions: HYPERTENSION
Allergies: N/A
Diagnostic Lab Data: EKG ECHOCARDIOGRAM "VARIETY LABS"
CDC Split Type: vsafe
Write-up: 12/20/2020 12:00 PM DEVELOPED LAPIF ATRIAL FIB. WENT TO ER WHEN IT PERSISTED, MEDICAL CENTER. ADMITTED TO INPATIENT; 12/21/2020 - ELECTRICAL CARDIOVERSION, MONITORED OVERNIGHT. 12/22/2020 - DISCHARGED *ON CHRONIC BLOOD THINNER

VAERS ID: 910053 (history) Vaccinated: 2020-12-24
Form: Version 2.0 Onset: 2020-12-24
Age: 31.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Idaho Entered: 2020-12-28

<table>
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<th>Site / Route</th>
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<tbody>
<tr>
<td><strong>COVID19</strong>: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private        Purchased by: ?
Symptoms: Dyspnoea, Electrocardiogram, Nausea, Pharyngeal swelling, Respiratory viral panel, SARS-CoV-2 test negative, Vomiting
SMQs:; Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Amphetamine-dextroamphetamine Zolpidem
Current Illness: Acid Reflux Hiatal Hernia
Preexisting Conditions: Acid Reflux Hiatal Hernia
Allergies: no known
Diagnostic Lab Data: COVID-19 test - negative Respiratory panel - negative CMC EKG
CDC Split Type:
Write-up: 15 minute post vaccination observation patient denied any symptoms. Later in the day patient experienced significant nausea and vomiting followed by mild SOB and throat swelling.

VAERS ID: 910059 (history)    Vaccinated: 2020-12-23
Form: Version 2.0        Onset: 0000-00-00
Age: 37.0        Submitted: 0000-00-00
Sex: Female        Entered: 2020-12-28
Location: Kentucky

<table>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Other        Purchased by: ?
Symptoms: Acute kidney injury, Endotracheal intubation, Gait inability, Hypoaesthesia, Pyrexia, Respiratory failure
SMQs:; Rhabdomyolysis/myopathy (broad), Acute renal failure (narrow), Anaphylactic reaction (broad), Angioedema (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions
Anaphylactic/anaphylactoid shock conditions (broad), Toxic-septic shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Dystonia (broad), Acute central respiratory depression (narrow), Guillain-Barre syndrome (broad), Hypersensitivity (broad), Tumour lysis syndrome (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad), Hypokalaemia (broad), Sexual dysfunction (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, 4 days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: Cetirezen 10 mg Daily, Lasix 20 Mg daily, Gabapentin 400 bid, Glipizide 5 mg daily, lisnopril 5 mg daily, Levothryroxine25mcg daily, Metoxican 7.5 daily, Sertraline 50 daily

Current Illness: none

Preexisting Conditions: Depression, Diabetes ,Hypertension, Hypothyroidism, Obesity

Allergies: Pencillian

Diagnostic Lab Data:

VAERS ID: 910133 (history) Vaccinated: 2020-12-23

Form: Version 2.0 Onset: 2020-12-24

Age: 64.0 Days after vaccination: 1

Sex: Female Submitted: 0000-00-00

Location: South Dakota Entered: 2020-12-28

VAERS ID: 910133 (history)

Form: Version 2.0

Age: 64.0

Sex: Female

Location: South Dakota

Vaccinated: 2020-12-23

Onset: 2020-12-24

Days after vaccination: 1

VAERS ID: 910133 (history)

Vaccination / Manufacturer Lot / Dose Site / Route


Administered by: Private

Purchased by: ?

Symptoms: C-reactive protein increased, Full blood count normal, Speech disorder, Swollen tongue, X-ray normal

SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Dementia (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No

Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations: none
Other Medications: Guaiifenesin, Albuterol Inh, levothyroxine, amlodipine, coreg, Claritin.
Current Illness: none
Preexisting Conditions: Hypothyroidism, Hypertension, menopause
Allergies: environmental (sneezy/watery eyes), ibuprofen,
Diagnostic Lab Data: Labs completed at 1352. CBC WNL. CRP 7.4. Soft tissue neck xray at 1527 with no acute findings.
CDC Split Type:
Write-up: Noted tongue starting to swell on 12/24 at 1030. Started on left side, then progressed to right side. No SOB, difficulty swallowing or breathing, but staff noted difficulty understanding her speech. Presented to ED at 1300. 50mg Benadryl given IV on 12/24 at 1328 and 125mg solumedrol given IV at 1327. Pt reported improvement in tongue swelling at 1630.

VAERS ID: 910202 (history)  Vaccinated: 2020-12-18
Form: Version 2.0  Onset: 2020-12-23
Age: 39.0  Days after vaccination: 5
Sex: Male  Submitted: 0000-00-00
Location: New Jersey  Entered: 2020-12-28

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>RA / SYR</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Arthralgia, COVID-19, Dizziness, Loss of consciousness, Occupational exposure to SARS-CoV-2, SARS-CoV-2 test positive, Seizure, Syncope
SMQs:; Torsade de pointes/QT prolongation (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (narrow), Arthritis (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: no
Current Illness: no
Preexisting Conditions: no
Allergies: no
Diagnostic Lab Data: Yes/ medical records.
CDC Split Type:
Write-up: Pediatrician working in the hospital. Was exposed to an office contact who had Covid. Shoulder in soreness. At work on Wednesday. Felt lightheaded had to sit in chair. That’s all he remembers. He worked up to a CODE team putting oxygen on him. He has a seizure. Took the COVID test has COVID. Admitted to hospital for 2 days. Likely a syncopal event.

VAERS ID: 910251 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-27
Age: 41.0 Days after vaccination: 10
Sex: Male Submitted: 0000-00-00
Location: Kentucky Entered: 2020-12-28

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Asthenia, Blood magnesium, Blood thyroid stimulating hormone, C-reactive protein, Chest X-ray, Computerised tomogram head normal, Electrocardiogram, Full blood count, Influenza virus test, Lumbar puncture, Metabolic function test, Mobility decreased, Muscular weakness, SARS-CoV-2 test, Urine analysis
SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Tendinopathies and ligament disorders (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: amlodipine, nicotine patches, Descovy, azelastine, cetirizine, ibuprofen
Current Illness: none
Preexisting Conditions: hypertension, irritable bowel syndrome, kidney stones, HIV exposure 2 months ago
Allergies: none
Diagnostic Lab Data: 12/28/20 Lumbar puncture, urine analysis, COVID test, influenza test, CBC, CT head was negative, CXR, ECG, TSH, Magnesium, CMP, CRP
CDC Split Type:
Write-up: 41-year-old male who presents to the ED today with a complaint of weakness in his bilateral arms and legs. He states he fell slightly weak yesterday but this morning when he woke up around 6 AM he was not able to get out of bed because he was so weak. He states he feels like he has no muscle strength in his arms and legs. He denies any fever. He denies any cough or shortness of breath. He denies any chest pain or abdominal pain. He denies any nausea, vomiting or diarrhea. He denies any numbness in his extremities. He denies any neck or back pain. He did receive the first Covid vaccination on December 17.

VAERS ID: 910316 (history)  Vaccinated: 2020-12-17
Form: Version 2.0  Onset: 2020-12-21
Age: 22.0  Days after vaccination: 4
Sex: Male  Submitted: 0000-00-00
Location: Wisconsin  Entered: 2020-12-28

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>- / OT</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Laboratory test, Platelet transfusion, SARS-CoV-2 test negative, Thrombotic thrombocytopenic purpura
SMQs:, Haemorrhage terms (excl laboratory terms) (narrow), Embolic and thrombotic events, arterial (narrow), Renovascular disorders (broad), Immune-mediated/autoimmune disorders (narrow), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Comments: List of non-encoded Patient Relevant History: Patient Other Relevant History 1: None
Allergies:
Diagnostic Lab Data: Test Date: 20201221; Test Name: work-up; Result Unstructured Data: Test Result: unknown results; Test Date: 20201221; Test Name: covid_test; Test Result: Negative
CDC Split Type: USPFIZER INC2020505215

Write-up: TTP; This is a spontaneous report from a non-contactable pharmacist. A 22-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), intramuscular on 17Dec2020 as a single dose for COVID-19 immunization. The patient did not have any known relevant medical history. The patient had no allergies to medications, food or other products. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient's concomitant medications were not reported. It was unknown if the patient received any other vaccines within four weeks prior to the vaccination. On 21Dec2020, the patient experienced thrombotic thrombocytopenic purpura (TTP); which was serious for hospitalization. The clinical course was as follows: The patient went to the emergency room/urgent care and was admitted in the early morning of 21Dec2020 due to TTP. Work-up was ongoing with no known results. On 21Dec2020, the patient also had a COVID-19 test which was negative. The patient was treated with unspecified corticosteroids and platelets. The clinical outcome of the TTP was unknown. The reporter assessed that it was unknown if the TTP was related to the vaccination. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow up.;

Sender's Comments: Current limited information does not allow a full medically meaningful assessment, especially lack of medical history, concomitant medications, concurrent illness and diagnostic workups such as coagulation test, Combs test, bacterial/virologic/immunological biomarkers to identify the etiology. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

VAERS ID: 910602 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 46.0 Days after vaccination: 0
Sex: Female
Location: California Submitted: 0000-00-00

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EJ1685 / 1</td>
<td>- / OT</td>
</tr>
</tbody>
</table>

Administered by: Unknown Purchased by: ?
Symptoms: Abdominal pain lower, Pancreatitis
SMQs: Acute pancreatitis (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: ACETAMINOPHEN; ; SERTRALINE HCL; ZOLOFT
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020506207
Write-up: pancreatitis; acute lower abdominal pain; This is a spontaneous report from a contactable pharmacist. A 46-year-old non-pregnant female patient received the first dose of the bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number: EJ1685), intramuscularly on 18Dec2020 at 08:00 (as reported) at 46-years-old at a single dose for COVID-19 immunisation. The patient medical history was not reported. The patient had no known drug allergy (NKDA). Concomitant medications included acetaminophen (MANUFACTURER UNKNOWN), propranolol (MANUFACTURER UNKNOWN), sertraline hcl (MANUFACTURER UNKNOWN), sertraline hydrochloride (ZOLOFT); all taken for an unspecified indication from an unspecified date to an unspecified date (which were received within two weeks of vaccination). On 18Dec2020 at 17:00, the patient experienced pancreatitis and acute lower abdominal pain; which required hospitalization and were assessed as medically significant. The patient was hospitalized for pancreatitis and acute lower abdominal pain for 3 days on unspecified dates. The clinical course was reported as follows: The patient received the vaccine " at some point in the AM on 18Dec2020 (as reported)." That evening, the patient presented to the emergency department (ED) with acute lower abdominal pain. The patient was diagnosed with pancreatitis and was admitted overnight. It was unknown if the patient received any other vaccines within four weeks prior to the COVID vaccine. Prior to the vaccination, it was unknown if the patient was diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. Therapeutic measures were taken as a result of pancreatitis and acute lower abdominal pain. The clinical outcome of the events was recovering.; Sender"s Comments: The information currently provided is too limited to make a meaningful medical assessment. Other than a temporal association , there is no evidence or argument to suggest a causal relationship between BNT162B2 and the events pancreatitis and acute lower abdominal pain. The events are likely due to an underlying medical condition. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.
VAERS ID: 910624 (history) Vaccinated: 0000-00-00
Form: Version 2.0 Onset: 0000-00-00
Age: Submitted: 0000-00-00
Sex: Entered: 2020-12-28
Location: Unknown

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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
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</tbody>
</table>

Administered by: Unknown  Purchased by: ?
Symptoms: Basal ganglia haemorrhage, Condition aggravated, Hypertension
SMQs: Haemorrhage terms (excl laboratory terms) (narrow), Neuroleptic malignant syndrome (broad), Haemorrhagic central nervous system vascular conditions (narrow), Hypertension (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Hypertension
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020507193
Write-up: Admitted to the hospital with hypertensive basal ganglia bleed, had a head bleed; This is a spontaneous report from a contactable consumer. A male patient of unspecified age received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration in 2020 at single dose for COVID-19 immunization. Medical history included hypertension. The patient’s concomitant medications were not reported. After vaccination, the patient was admitted to the hospital with hypertensive basal ganglia bleed, had a head bleed in 2020. The outcome of event was unknown. Information on the lot/batch number has been requested.

VAERS ID: 910626 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2020-12-19
Age: Days after vaccination: 3
Sex: Submitted: 0000-00-00
Location: Unknown Entered: 2020-12-28
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

- / 1

RA / -

Administered by: Other
Purchased by: ?

Symptoms: Respiratory distress, SARS-CoV-2 test negative

SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Hypersensitivity (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:

Diagnostic Lab Data: Test Date: 20201219; Test Name: covid test/Nasal Swab; Test Result: Negative

CDC Split Type: USPFIZER INC2020507536

Write-up: resp distress; This is a spontaneous report from a non-contactable consumer (patient). An elderly male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration at 16Dec2020 12:00 pm at single dose for covid-19 immunization. Vaccine location was right arm and it was the first dose. The patient medical history and concomitant medications were not reported. No known allergies. Patient was not diagnosed with COVID-19 prior to vaccination. The patient didn't receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient experienced respiratory distress on 19Dec2020, he was hospitalized for three days. Patient received treatment for the adverse event. Since the vaccination, the patient has been tested for COVID-19 with nasal swab on 19Dec2020, it was negative. The action taken in response to the events for BNT162B2 was not applicable. The outcome of events was unknown. The event was serious, the seriousness criteria was Caused/prolonged hospitalization. No follow-up attempts are possible; information about lot/batch number cannot be obtained.

VAERS ID: 910641 (history)
Form: Version 2.0
Age: 54.0
Sex: Female
Location: Maryland

Vaccinated: 2020-12-18
Onset: 2020-12-18
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2020-12-28
Vaccination / Manufacturer | Lot / Dose | Site / Route
---|---|---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | - / 1 | LA / -

Administered by: Unknown  
Purchased by: ?

**Symptoms:** Cardiac monitoring, Chest X-ray, Computerised tomogram, Dizziness, Emotional distress, Fatigue, Feeling abnormal, Heart rate decreased, Hypersomnia, Injection site pain, Muscular weakness, Pain in extremity, Palpitations, Paraesthesia, Pulse abnormal, Scan with contrast, Ventricular extrasystoles, Vertigo

**SMQs:**: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Ventricular tachyarrhythmias (narrow), Dementia (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Extravasation events (injections, infusions and implants) (broad), Cardiomyopathy (broad), Depression (excl suicide and self injury) (broad), Vestibular disorders (narrow), Tendinopathies and ligament disorders (broad), Hypokalaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Comments: List of non-encoded Patient Relevant History: Patient Other Relevant History 1: None
Allergies:

**Diagnostic Lab Data:** Test Date: 20201222; Test Name: Blood pressure; Result Unstructured Data: Test Result:163/76; Comments: Normal base line is 130s/80s maybe lower; Test Date: 20201222; Test Name: cardiac monitor; Result Unstructured Data: Test Result:Results are pending; Test Date: 20201222; Test Name: Chest X-ray; Result Unstructured Data: Test Result:Unknown result; Comments: Result: Pending; Test Date: 20201222; Test Name: CT scan; Result Unstructured Data: Test Result:Unknown result; Comments: Result: Pending; Test Date: 20201222; Test Name: Heart rate; Result Unstructured Data: Test Result:80s-90s; Comments: 90s and then drop to 48; Test Date: 20201219; Test Name: pulse; Result Unstructured Data: Test Result:Thready; Test Date: 20201222; Test Name: Pulse oximetry; Result Unstructured Data: Test Result:97-99 %

**CDC Split Type:** USPFIZER INC2020508928

Write-up: Weakness and tingling down left arm; Weakness and tingling down left arm; Lightheaded; PVC's every 3 beats; emotional too and just very tired; Can not read the vaccination card as she does not have her glasses; Palpitations; Fatigue; Slept a lot; Thready pulse and vertigo; Thready pulse and vertigo; Soreness in left arm at the injection site and down the left arm; Soreness in left arm at the injection site and down the left arm; This is a
spontaneous report from a contactable nurse (patient). A 54-year-old female patient received first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, reason for no lot number of COVID Vaccine: Can not read the vaccination card as she does not have her glasses, Expiry Date unknown), via an unspecified route of administration in the left arm on 18Dec2020 at single dose for "Work with COVID patients". Medical history included none. There were no concomitant medications. The patient experienced weakness and tingling down left arm (hospitalization) on 22Dec2020, lightheaded (hospitalization) on 22Dec2020, PVC’s every 3 beats (hospitalization) on 22Dec2020, soreness in left arm at the injection site and down the left arm on 18Dec2020, thready pulse and vertigo on 19Dec2020, fatigue on 20Dec2020, slept a lot on 19Dec2020, palpitations on 21Dec2020. Details as follows: Caller says she received the vaccine, she is a nurse. She got the vaccine on Friday, 18Dec2020. She had soreness in her arm and at the injection site on Friday but that was it. On Saturday (19Dec2020) she noticed a thready pulse, but went on with her day with only a little arm pain. Sunday (20Dec2020) she was fatigued and the thready pulse continued. She slept a lot on Saturday (19Dec2020) and Sunday (20Dec2020). Yesterday (21Dec2020) she felt a little better, but had palpitations here and there. This morning (22Dec2020) she went into work, was very lightheaded, had tingling down her left arm, and had palpitations. So she hooked herself up to a monitor. Her pulse ox was between 97-99%. Her heart rate would be in the 90s and then drop to 48, so she went down to the ED. She has had a CT, and she is throwing PVC"s every 3 beats. She has not been admitted as they are still waiting for results. She is still in the ED. They did a CT to see if there was a possible clot. On 18Dec2020 she received the vaccine around 2 PM. She had soreness at the injections site and down the left arm, which went away by Sunday (20Dec2020). She now (22Dec2020) has weakness and tingling down the left arm. It was never red or anything at the injection site. Saturday, 19Dec2020, she had thready pulse and Vertigo which lasted until Sunday 20Dec2020. She would be laying in bed and try to flip to the other side and having vertigo. When the fatigue started on Sunday (20Dec2020) she did not feel like herself. She was very emotional too and just very tired. Since she went to the ED she has had a CT scan, one with contrast and one without. She had a chest X-ray, and she is on a cardiac monitor. Results are pending. She has Trigeminy PVCs. She says she never goes to the hospital. But she is not admitted yet (pending clarification). Can not read the vaccination card as she does not have her glasses. Unable to read off the NDC, lot, and expiration date. History: Has been on the same vitamins for two years with nothing new. Blood pressure: Normal base line is 130s/80s maybe lower. Heart rate: Currently within her normal limits of 80s-90s. Depending on what happens, it was asked if she should get the second dose. The patient underwent other lab tests and procedures which included blood pressure measurement: 163/76 on 22Dec2020, chest x-ray: unknown result on 22Dec2020 (Result: Pending), computerised tomogram (CT scan): unknown result on 22Dec2020 (Result: Pending), heart rate: 80s-90s on 22Dec2020, Pulse oximetry: 97-99 % on 22Dec2020, cardiac monitor: results are pending on 22Dec2020. The outcome of events weakness and tingling down left arm, pvc’s every 3 beats, lightheaded, palpitations and fatigue was not recovered. The outcome of the event soreness in left arm at the injection site and down the left arm was recovered on 20Dec2020. The outcome of the events thready pulse and vertigo was recovered on 20Dec2020. The outcome of the event slept a lot was recovered on 20Dec2020. The outcome of other events was unknown. Information on the lot/Batch number has been requested.; Sender's Comments: Based on available information, a possible contributory role of the subject vaccine cannot be excluded for the reported events due to temporal relationship. There is limited information provided in this report. Additional information is needed to better assess the case, including complete medical history, diagnostics, counteractive treatment measures and concomitant medications. This case will
be reassessed once additional information is available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

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<tr>
<td>Form:</td>
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<tr>
<td>Age:</td>
<td>61.0</td>
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<tr>
<td>Sex:</td>
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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERN</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Chest X-ray normal, Chest discomfort, Cough, Neutrophil percentage increased, Throat clearing

SMQs: Anaphylactic reaction (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 1 days  
Extended hospital stay? No  

Previous Vaccinations:  
Other Medications: Albuterol 90 mcg/ Aerosol 2 puffs 4 times day Famotidine 20mg po daily  
Prednisone 20mg po 2 times day Diphenhydramine 25 mg po Q 6 hrs prn

Current Illness: UTI 11/28/2020

Preexisting Conditions: Hx Asthma Hx Uterine Sarcoma

Allergies: MRI Dye, NSAIDs

Diagnostic Lab Data: 12/26 CXR: Negative, no pneumonia, edema or pneumothorax Lab work: Neutrophils 83.6

CDC Split Type:  
Write-up: 10 minutes after the vaccination, she began clearing her throat, within 30 minutes began coughing, which led to chest tightness. Was evaluated in the ER and admitted for observation. Given: Prednisone 40mg po, Benadryl 25mg po Duoneb x 3 and Pepcid 20mg
VAERS ID: 910750 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-25
Age: 76.0 Days after vaccination: 3
Sex: Male Submitted: 0000-00-00
Location: Oregon Entered: 2020-12-28

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<td>EJ1685 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Senior Living Purchased by: ?


SMQs:; Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Dyslipidaemia (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Dyskinesia (broad), Dystonia (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hyponatraemia/SIADH (narrow), Hypertension (narrow), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Lipodystrophy (broad), Hypotonic-hyporesponsive episode (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)


Previous Vaccinations:

Other Medications: Tylenol 325mg - 2 tablets Famotidine 20mg - 1 tablet BID Fenofibrate 160mg - 1 tablet daily Vitamin D 2000iu - 1 tablet daily Hydralazine 25mg - 1 tablet TID Amlodipine Besylate 5mg - 1 tablet BID Atorvastatin 40mg - 1 tablet HS Donepezil

Current Illness: none noted

Preexisting Conditions: hypertension associated with Stage 3 chronic kidney disease due to type II diabetes hemiparesis - R dominant side vascular dementia w/out behavioral disturbance hx of stroke with residual deficit -2005 - R medial thalamus -2018 - L basal ganglia paroxysmal atrial fibrillation type II diabetes dysphagia as late effect of stroke sleep
### Diagnostic Lab Data:
- MRI brain: no acute infarct
- CTA Head/Neck scan: failed to show a new area of ischemia
- Labs: no infection noted, WBC unrevealing, creatinine clearance 56.5 ml/min (based on Scr of 1.22mg/dL) - at baseline, sodium 134, potassium 4.8, BUN 13, PT INR 1.1, HGB 17.0, platelets 287, hematocrit 51.0, chol 167, trig 131, HDL 35

### CDC Split Type:
Write-up: Patient was found slumped over in wheelchair, drooling and unable to respond/follow simple instructions; sent to ED for evaluation. CT scans and MRI NEGATIVE for new/recent stroke; resident slurred speech likely due to hypertensive urgency

### VAERS ID: 910822 (history)
**Form:** Version 2.0
**Vaccinated:** 2020-12-22
**Onset:** 2020-12-23
**Age:** 42.0
**Sex:** Female
**Location:** Mississippi
**Submitted:** 0000-00-00
**Entered:** 2020-12-28

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<td>01J20A / 1</td>
<td>RA / IM</td>
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Administered by: Private
Purchased by: ?

**Symptoms:** Angioedema, Enlarged uvula, Hypersensitivity, Lip oedema, Lip swelling, Nasal congestion, Oedema mouth, Palatal oedema, Paraesthesia oral, Sneezing, Throat tightness, Tongue oedema

**SMQs:** Anaphylactic reaction (narrow), Angioedema (narrow), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** Yes
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** Yes
**Hospitalized?** Yes, 1 days
  - Extended hospital stay? No

**Previous Vaccinations:**

**Other Medications:** AMLODIPINE, HYDROCHLOROTHIAZIDE, CAMRESE, ICAR-C, LEXAPRO, ACZONE, RETIN A MICRO PUMP

**Current Illness:** NONE

**Preexisting Conditions:** ANEMIA

**Allergies:** NORCO, SPIRONOLACTONE

**Diagnostic Lab Data:**

###写-up:
SNEEZING, STUFFY NOSE, LIP SWELLING, TINGLING MOUTH, THROAT CLOSING, UVULA SWOLLEN 1. Allergic reaction (Allergy, unspecified, initial encounter). Pt.
received Moderna COVID vaccine the morning of 12/22/20 and developed angioedema reaction the afternoon of 12/23. Vaccine is only new medication reported by pt. - denies any new products, foods, etc. History of hives with spironolactone 2.5 months ago; taking HCTZ now - unknown if reaction is related to this med rather than vaccine? Due to severity of her reaction and uncertainty if all attributable to vaccine versus some other culprit I would recommend Epi pen at time of discharge. Has received IM epinephrine, racemic epi neb, Solu-Medrol, Benadryl, Pepcid in the ED. Continue with Benadryl 25mg IV q6h, Pepcid 20mg IV q12h, and Solu-Medrol 40mg IV q6h. 2. Angioedema (Angioneurotic edema, initial encounter). Arrived to the ED with R. side lip, tongue, and uvula and oral cavity edema. Airway patent, room air O2 sats WNL - monitor throughout the night for any worsening of angioedema or airway involvement. Treatment as above.

VAERS ID: 910948 (history)  
Vaccinated: 2020-12-23  
Onset: 2020-12-23  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2020-12-28

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<td>EL0140 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Dyspnoea, Erythema

SMQs: Anaphylactic reaction (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness: None known
Preexisting Conditions: Asthma
Allergies: Green beans, cinnamon, shrimp, coconut, egg, iodine, latex, naproxen, oseltamivir, sesame seed, guaifenesin
Diagnostic Lab Data:

CDC Split Type:

Write-up: Difficulty breathing 5 minutes after receiving first dose of Covid-19 vaccine by Pfizer/BioNTech, small erythematous spots to bilateral arms.
VAERS ID: 910959 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-23
Age: 33.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: California  Entered: 2020-12-28

Vaccination / Manufacturer | Lot / Dose | Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK#5730 / UNK | LA / IM

Administered by: Private  Purchased by: ?
Symptoms: Alanine aminotransferase increased, Angiogram cerebral normal, Arteriogram carotid normal, Aspartate aminotransferase increased, Blood albumin normal, Blood alkaline phosphatase normal, Blood bilirubin normal, Blood chloride normal, Blood creatinine normal, Blood glucose normal, Blood potassium decreased, Blood sodium decreased, Blood urea normal, Carbon dioxide decreased, Computerised tomogram head normal, Confusional state, Electroencephalogram normal, Eosinophil count normal, Haematocrit decreased, Haemoglobin decreased, Head discomfort, Hypoaesthesia, Hypokalaemia, Language disorder, Magnetic resonance imaging brain normal, Mean cell haemoglobin concentration normal, Mean cell volume normal, Mean platelet volume decreased, Migraine, Peripheral coldness, Platelet count normal, Red blood cell count decreased, Salivary hypersecretion, Troponin I normal, White blood cell count normal

SMQs: Liver related investigations, signs and symptoms (narrow), Haematopoietic erythropenia (narrow), Peripheral neuropathy (broad), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hyponatraemia/SIADH (narrow), Chronic kidney disease (broad), Myelodysplastic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Hypokalaemia (narrow), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: No
Current Illness: No
Preexisting Conditions: No
Allergies: No known allergies
Diagnostic Lab Data: CMP: Recent Labs 12/23/20 1525 12/23/20 1650 NA 135* -- K 3.3* -- CL 101 -- CO2 20.3 -- GLUCOSE 124 106 BUN 11.0 -- CREATININE 1.1 -- ALBUMIN 3.8 -- ALKPHOS 67 -- ALT 37 -- AST 41* -- BILITOT 0.4 -- ? ? CBC: Recent Labs 12/23/20 1525 WBC 10.00 EOSABS 0.2 RBC 4.51 HGB 13.5 HCT 39.1 MCV 86.7 MCHC 34.6 PLT 343 MPV 7.1* ? Results from last 7 days Lab Units 12/23/20 1525 TROPONIN I ng/mL <0.017 ? Results from last 7 days Lab Units 12/23/20 1525 TROPONIN I ng/mL <0.017? ? Lab Results Component Value Date ? HGB 13.5 12/23/2020 ? ? Lab Results Component Value Date ? HGB 13.5 12/23/2020 ? ?

CDC Split Type:

Write-up: 33 y.o.?male?with no significant past medical history except for obesity who has been working as a nurse in the emergency room department in our hospital and today he received COVID-19 vaccine and 30 minutes later patient started having increased saliva, cold hands and feet, left-sided pressure-like headache and some numbness in his legs at the same time he suddenly started talking only in first language and lost his ability to speak in second language. ?He understand second language but replying first language stating that he is talking in second language. ?On exam he was alert oriented confused by people not understanding his second language stating that his numbness and cold feeling in the hands and feet have improved. ?Initially patient received 10 mg of Decadron for possible allergic reaction he had a head CT scan that was negative and his labs were remarkable only for hypokalemia. ?Patient had no prior history of any neurological symptoms he was advised admission to the hospital for observation ? ? Patient symptoms resolved next day, he is alert oriented able to communicate in second language he had a head MRI and head neck MRA that came back negative and had an EEG that showed no seizure activities. Patient was seen in neurology consultation who felt that patient most likely had an episode of migraine headache. Patient is going to be discharged home and to have a follow-up with his primary care physician next week ?

VAERS ID: 910996 (history) Vaccinated: 2020-12-24
Form: Version 2.0 Onset: 2020-12-24
Age: 64.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: California Entered: 2020-12-28

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</table>

Administered by: Private Purchased by: ?

Symptoms: Asthma, Chest discomfort, Condition aggravated, Dizziness, Malaise, Palpitations, Supraventricular tachycardia

SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (narrow), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypersensitivity (broad)

Life Threatening? No Birth Defect? No Died? No
Permanent Disability? No  
Recovered? Yes
Office Visit? No  
ER Visit? No
ER or Doctor Visit? No  
Hospitalized? Yes, 1 days
• Extended hospital stay? No

Previous Vaccinations:
Other Medications: Advair Diskus 500 mcg-50 mcg inhalation powder 1 inhal, inhalation, BID amLODIPine 5 mg oral tablet 5 mg = 1 tab, PO, daily calcium carbonate 1 tab, PO, daily
cyclobenzaprine 10 mg oral tablet 10 mg = 1 tab, PRN, PO, QHS Euthyrox 112 mcg (0
Current Illness: Asthma exacerbation, started oral steroids 12/21
Preexisting Conditions: Asthma, hypertension, dyslipidemia, hypothyroidism,
appendectomy, history of uterine fibroids status post endometrial ablation
Allergies: Tape-Blisters sulfa drugs-Hives Toradol-Itching Vicodin-Rash

Diagnostic Lab Data:

Write-up: Patient reports taking Pfizer Covid vaccine and 2 hours after that she reports
feeling not well. She recorded that one of the side effects was heart arrhythmias and hence
she had her coworker checked her rhythm and she reported that her heart rate was in 180s
and hence she was brought to the emergency department for further evaluation. She reports
at the time she had palpitations and felt mild lightheadedness and dizziness. She was found
to be in SVT with heart rate in the range of 1 80-220 and she received 1 dose of 6 mg
Adenoscan after which she converted to normal sinus rhythm. At the time of my evaluation
she is in normal sinus rhythm with heart rate in the range of 90-100. She denies any further
palpitations. She reports she had chest tightness for the last 3 days which was assumed to be
secondary to asthma and for which she was prescribed prednisone. Currently with the
prednisone she does not feel any further chest tightness. She denies any chest pain
shortness of breath, fever or chills. She reports remote history of arrhythmia following her foot
surgery in the past however does not recall what arrhythmia she had at that time.

VAERS ID: 911025 (history)  
Vaccinated: 2020-12-20
Onset: 2020-12-20
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2020-12-28

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Administered by: Private  
Purchased by: ?

Symptoms: Chest X-ray abnormal, Chills, Cough, Diarrhoea, Headache, Hypotension,
Laboratory test normal, Lung opacity, Myalgia, Occupational exposure to SARS-CoV-2,
Pyrexia, SARS-CoV-2 test positive, Tachypnoea

SMQs: Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (narrow),
Asthma/bronchospasm (broad), Interstitial lung disease (narrow), Neuroleptic malignant
syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Noninfectious diarrhoea (narrow), Respiratory failure (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: amLODIPine 10 mg PO daily ascorbic acid 250 mg PO dailyJardiance 25 mg oral tablet 25 mg = 1 tab, PO, daily Jardiance 25 mg PO daily losartan 100 mg PO daily metformin 1000 mg PO BID Omega-3 1 cap PO daily simvastatin 20 mg oral tablet PO Q
Current Illness: none
Preexisting Conditions: Type 2 diabetes, hypertension
Allergies: Lactose-diarrhea
Diagnostic Lab Data: 12/26 SARS-CoV-2 PCR positive In the emergency department the patient was mildly hypotensive 97/54, low-grade fever 37.4, tachypneic, saturating 90% on room air, labs showed no leukocytosis, normocytic anemia, hyponatremia and hypochloremia, chest x-ray showed bilateral groundglass opacities.

 Write-up: Patient presents to the emergency department 12/26 complaining of dry cough associated with fever and chills and headache associated with myalgia and diarrhea for 1 week duration. She had Covid vaccine 12/20 and the symptoms started the same night, she denied any sick contacts at home however she works at the Covid unit and reports constant exposure to sick Covid patients.

VAERS ID: 911035 (history)
Form: Version 2.0
Age: 47.0
Sex: Female
Location: Alabama
Vaccinated: 2020-12-22
Onset: 2020-12-22
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2020-12-28

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<th>Site / Route</th>
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Administered by: Private Purchased by: ?
Symptoms: Angiogram cerebral normal, Arteriogram carotid normal, Blindness, Cerebrovascular accident, Computerised tomogram head normal, Electrocardiogram normal, Eye irritation, Frustration tolerance decreased, Full blood count normal, Incoherent, Loss of consciousness, Metabolic function test normal, Migraine, Panic reaction, Posture abnormal,
Posturing, Seizure, Transient ischaemic attack

SMQs: Torsade de pointes/QT prolongation (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Convulsions (narrow), Embolic and thrombotic events, arterial (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Dystonia (broad), Psychosis and psychotic disorders (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Glaucoma (broad), Optic nerve disorders (broad), Corneal disorders (broad), Retinal disorders (broad), Hypotonic-hypo responsiveness episode (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  - Extended hospital stay? No
Previous Vaccinations:
Other Medications: Vitamin D weekly Fluoxetine Daily
Current Illness:
Preexisting Conditions: Depression
Allergies: No known food or medication allergies Seasonal Allergies ~ 5-6 years
Diagnostic Lab Data: CTA- head/ neck- normal CT Scan head unremarkable EKG- sinus rhythm without ischemic changes CBC/CMP fully unremarkable
CDC Split Type:
Write-up: Approximately 7 hours after receiving the vaccine patient who is a L&D Nurse return to work in her area. She describes that after finishing with a C-section she felt burning in both of her eyes (she thought this feels like an allergic reaction, but I am not sweating and haven't rubbed my eyes). She went to the restroom to get a cloth to wash her eyes; afterwards she reports her vision went totally black in both eyes. She reports feeling frustrated that no one came to help and some panic in trying to figure out how to get out of the restroom. She did make it out of the bathroom. Her Staff reports she postured and turned arms inward, head going to one side and passed out. They also report ~ 10 minutes of incoherent conversation and stating "I got the vaccine, maybe I was given the wrong thing and now I'm blind". Upon waking, patient vision fully restored and patient does not remember incoherent conversation. Differential diagnosis- TIA vs. CVA $g seizure disorder$g$g$g complex migraine
I received my vaccine on 12/22 around noon. I woke up at 4am this morning 12/25 with tingling in my lips and tongue, in addition to the left side of my face being swollen. Not entirely sure what these side effects are from exactly but thought it best to report my experiences I was hospitalized on 12/25 to 12/26 because my reaction did get worse. I was experiencing numbness on the left side of my body and swelling, numbness, and redness on the left side of my face as well. The hospital didn’t really give any explanations but I’m only now have mild swelling and numbness on the left side of my face. Everything else has resolved at this point in time.
VAERS ID: 911829 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-29
Age: 80.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Michigan Entered: 2020-12-29

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<td>RA / IM</td>
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Administered by: Senior Living  Purchased by: ?
Symptoms: Asthenia, Decreased appetite, Unresponsive to stimuli
SMQs: Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponse episode (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:

Other Medications: Aspirin Tablet 81 MG Give 1 tablet by mouth in the morning Bisoprolol Fumarate Tablet 5 MG Give 1 tablet by mouth in the morning for HTN Flomax Capsule 0.4 MG (Tamsulosin HCl) Give 1 capsule by mouth in the evening Levothyroxine Sodium Ta

Current Illness: U07.1 COVID-19
Preexisting Conditions: F03.91 UNSPECIFIED DEMENTIA WITH BEHAVIORAL DISTURBANCE R26.9 UNSPECIFIED ABNORMALITIES OF GAIT AND MOBILITY M62.81 MUSCLE WEAKNESS (GENERALIZED) Z74.1 NEED FOR ASSISTANCE WITH PERSONAL CARE N13.9 OBSTRUCTIVE AND REFUX UROPATHY, UNSPECIFIED N13.2 HYDRONEPHROSIS WITH RENAL AND URETERAL CALCULOUS OBSTRUCTION R45.4 IRRITABILITY AND ANGER F06.34 MOOD DISORDER DUE TO KNOWN PHYSIOLOGICAL CONDITION WITH MIXED FEATURES G93.41 METABOLIC ENCEPHALOPATHY I25.10 ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITHOUT ANGINA PECTORIS F06.2 PSYCHOTIC DISORDER WITH DELUSIONS DUE TO KNOWN PHYSIOLOGICAL CONDITION F06.0 PSYCHOTIC DISORDER WITH HALLUCINATIONS DUE TO KNOWN PHYSIOLOGICAL CONDITION R26.2 DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED I10 ESSENTIAL (PRIMARY) HYPERTENSION K21.9 GASTROESOPHAGEAL REFUX DISEASE WITHOUT ESOPHAGITIS E11.9 TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS E78.5 HYPERLIPIDEMIA, UNSPECIFIED E03.9 HYPOTHYROIDISM, UNSPECIFIED F41.9 ANXIETY DISORDER, UNSPECIFIED E11.40 TYPE 2 DIABETES MELLITUS WITH DIABETIC NEUROPATHY, UNSPECIFIED E66.01 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES J30.9 ALLERGIC RHINITIS, UNSPECIFIED F33.9 MAJOR DEPRESSIVE DISORDER, RECURRENT, UNSPECIFIED
VAERS ID: 912137 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-21
Age: 32.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Florida Entered: 2020-12-29

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Administered by: Private Purchased by: ?
Symptoms: Eye swelling, Swelling face
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Trazodone 50mg, Wellbutrin 300mg, lexapro 20mg, AirDuo Respliclick, Albuterol prn
Current Illness:
Preexisting Conditions: asthma, depression, migraines
Allergies: Lobster, hymenoptera
Diagnostic Lab Data:
CDC Split Type:
Write-up: Was given the vaccine and about 5 minutes later started having swelling and my eyes and face. It was watched for a few minutes and was assessed by EMS and taken to the emergency department. I was given epinephrine, Benadryl, Solu-Medrol, Pepcid, IV fluids, DuoNebs and observed overnight. I was given multiple rounds of Benadryl, steroids, Pepcid, DuoNebs
VAERS ID: 912271  (history)  Vaccinated: 2020-12-16  
Form: Version 2.0  Onset: 2020-12-17  
Age: 50.0  Days after vaccination: 1  
Sex: Male  Submitted: 0000-00-00  
Location: Louisiana  Entered: 2020-12-29

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Administered by: Private  
Purchased by: ?

Symptoms: Dyspnoea, Intensive care, Pyrexia

SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? Yes

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? Yes, 4 days

Extended hospital stay? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type:

Write-up: Subject received vaccination Wednesday Dec 16th in the afternoon. He became symptomatic (shortness of breath, low grade fever) the next day. Went to the Emergency room on Saturday Dec. 26th, 2020 due to shortness of breath, had an O2 Sat of 60%, and was hospitalized in the ICU at another hospital (due to bed unavailability).

VAERS ID: 912574  (history)  Vaccinated: 2020-12-28  
Form: Version 2.0  Onset: 2020-12-29  
Age: 97.0  Days after vaccination: 1  
Sex: Female  Submitted: 0000-00-00  
Location: Ohio  Entered: 2020-12-29
**Vaccination / Manufacturer**  
**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**  
**Lot / Dose**  
- / UNK  
**Site / Route**  
- / -

Administered by: Public  
Purchased by: ?

**Symptoms:** Cardiac arrest, Endotracheal intubation, Intensive care

**SMQs:**; Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Angioedema (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Cardiomyopathy (broad), Respiratory failure (broad)

**Life Threatening?** Yes

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, ? days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:** COVID-19 positive on 12/4/2020. Was still symptomatic at last check

**Preexisting Conditions:** Hypertension

**Allergies:**

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** Rushed to ER. Has now been tubed and put into the ICU and has had full-cardiac arrest less than 24 hours after receiving the vaccine.

---

**VAERS ID:** [912602](https://vaers.hhs.gov/vaers/medicalsummary) (history)

**Vaccinated:** 2020-12-28

**Form:** Version 2.0

**Onset:** 2020-12-29

**Age:** 83.0

**Days after vaccination:** 1

**Sex:** Male

**Submitted:** 0000-00-00

**Entered:** 2020-12-29

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Administered by: Senior Living  
Purchased by: ?

**Symptoms:** Endotracheal intubation, Intensive care

**SMQs:**; Angioedema (broad), Respiratory failure (broad)

**Life Threatening?** Yes

**Birth Defect?** No
VAERS ID: 912609 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-28
Age: 46.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Indiana  Entered: 2020-12-29

Vaccination / Manufacturer | Lot / Dose | Site / Route
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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK5730 / 1 | - / IM

Administered by: Private  Purchased by: ?

Symptoms: Cardiac monitoring abnormal, Dizziness, Flushing, Heart rate increased, Supraventricular tachycardia, Tachycardia
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypersensitivity (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Preexisting Vaccinations:
Other Medications:

Current Illness: COVID-19 positive 11/30 with fever, sore throat, dyspnea and difficulty breathing
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Hospitalized 12/29, has now been tubed and put into the ICU
Current Illness: None
Preexisting Conditions: Migraines, Arthritis
Allergies: Flexril
Diagnostic Lab Data: EKG, Troponins, CT, Cardiac Cath - all negative, 12/23/2020
CDC Split Type: 
Write-up: Patient observed for 15 minutes in the clinic after vaccine with no issues. Patient is a NP and left clinic. 10 min after leaving, was in physician lounge and had tachycardia, dizziness, flushing. Hospitalist in lounge recorded pulse as 180 normal rhythm. Patient taken to ED. In SVT - heart rate eventually reduced. Patient released on cardiac monitor to home. Later that night, patient had increased heart rate again - 160"s - while in bed. Admitted to hospital.

VAERS ID: 912669 (history)  
Vaccinated: 2020-12-22  
Onset: 2020-12-23  
Days after vaccination: 1

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Administered by: Private  
Purchased by: ?

Symptoms: Catheterisation cardiac normal, Chest pain, Computerised tomogram normal, Dyspnoea, Electrocardiogram normal, Troponin normal

SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad)

Life Threatening? No
Birth Defect? Yes
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: None
Current Illness: None
Preexisting Conditions: Migraines, Arthritis
Allergies: Flexril
Diagnostic Lab Data: EKG, Troponins, CT, Cardiac Cath - all negative, 12/23/2020
CDC Split Type: 
Write-up: Chest pain, short of breath. Morphine, sublingual Nitro, IV Nitro drip & Heparin drip
VAERS ID: 912701 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-23
Age: 82.0 Days after vaccination: 5
Sex: Male Submitted: 0000-00-00
Location: Arizona Entered: 2020-12-29

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Administered by: Private Purchased by: ?
Symptoms: Angiogram abnormal, Aspartate aminotransferase increased, Blood albumin increased, Blood alkaline phosphatase increased, Blood creatinine increased, Blood glucose increased, Blood urea increased, COVID-19 pneumonia, Carbon dioxide decreased, Cardiopulmonary failure, Cognitive disorder, Dyspnoea, Eosinophil count decreased, Glomerular filtration rate decreased, Hypernatraemia, Hypoxia, Lymphocyte count decreased, Neutrophil count increased, Protein total increased
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Cardiac failure (narrow), Liver related investigations, signs and symptoms (narrow), Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Haematopoietic leukopenia (narrow), Hyperglycaemia/new onset diabetes mellitus (narrow), Systemic lupus erythematosus (broad), Retroperitoneal fibrosis (broad), Dementia (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Acute central respiratory depression (broad), Biliary system related investigations, signs and symptoms (broad), Pulmonary hypertension (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Dehydration (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: glipizide 2.5 mg/d - metformin ER 2000 mg/d - insulin sliding scale - lisinopril 10 mg/d - amlodipine 2.5 mg/d - furosemide 20 mg/d - Na Bicarb 650 mg TID added 5/23 by nephrology - atorvastatin 20 mg/d - ASA 81 mg/d - levoth
Current Illness:
Preexisting Conditions: CKD 3 HNT Dementia DMII Hypothyroidism
Allergies: none
VAERS ID: 912713 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-28
Age: 70.0 Days after vaccination: 0
Sex: Female
Location: California Submitted: 0000-00-00

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Administered by: Private purchased by: ?

Symptoms: Asthenia, Ataxia, Consciousness fluctuating, Dizziness, Palpitations

SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Hydrocodone/acetaminophen (nausea/vomiting)

Write-up: Patient reported dizziness, weakness, in and out of consciousness, palpitation and ataxia approximately 10 minutes after vaccination. Sent to ED and diagnosed with potential cerebral mass. Palpitations has occurred more frequently in the last 4 months when she ran out of metoprolol for the treatment of SVT since her PMH retired and she has not established new care yet. Dizziness, palpitations and ataxia resolved by next AM. Follow up with outpatient Neuro and cardiology. Given prescription for metoprolol XL 75 daily.
**VAERS ID:** 912766  
**Vaccinated:** 2020-12-28  
**Form:** Version 2.0  
**Onset:** 2020-12-28  
**Age:** 27.0  
**Days after vaccination:** 0  
**Sex:** Male  
**Location:** Kentucky  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-29

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**Administered by:** Public  
**Purchased by:** ?

**Symptoms:** Arrhythmia, Atrial fibrillation, Cardiac flutter, Cardiac telemetry, Dizziness, Hyperhidrosis, Nausea

**SMQs:** Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Supraventricular tachyarrhythmias (narrow), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Cardiac arrhythmia terms, nonspecific (narrow), Tachyarrhythmia terms, nonspecific (narrow), Vestibular disorders (broad), Hypoglycaemia (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 2 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** OTC zinc, magnesium, and MVI

**Current Illness:** none

**Preexisting Conditions:** none

**Allergies:** none

**Diagnostic Lab Data:** The client reports that he was hooked to telemetry. Any other tests/labs are unknown.

**CDC Split Type:**

**Write-up:** Client was vaccinated approx 10:00am at the Health Dept. Client left after 15min without incident. Client went to report to work and began feeling nauseated, dizzy, and feeling as if was going to faint. Client returned to Health Department approx 12:30. Client was diaphoretic, HR was 140bpm, and BP was 178/120. Client was given 50mg/20mL of diphenhydramine PO and EMS was called and client taken to local ER. Client remained A+Ox3 at time of EMS transport. Spoke with client evening of 12/28/2020. He reports he was transferred to another facility and was told was in a-fib. He reports that he is feeling much better but heart still fluttering. Spoke with client afternoon of 12/29/2020. He reports that he is being discharged in a few hours and is being sent home on metoprolol and a baby ASA. He reports they had been working on getting his BP down. He reports that he is feeling better and is going to be scheduled for a heart cath outpatient. He reports that he was initially in a-fib, then a-flutter, and then arrhythmia. He reports that he has been seen by Dr. a Cardiologist,
while hospitalized.

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>LA / SYR</td>
</tr>
</tbody>
</table>

Administered by: Other       Purchased by: ?

Symptoms: Electrocardiogram abnormal, Heart rate increased, Hypoaesthesia, Miosis, Mydriasis, Neurological examination, Peripheral coldness, Pyrexia, Tachyarrhythmia

SMQs: Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Tachyarrhythmia terms, nonspecific (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad), Hypokalaemia (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Amoxicillin

Diagnostic Lab Data: EKG Showed heart was tachycardic and irregular. Raised fever-99.5. Neurological test to explain dilated and constricted pupils.

CDC Split Type:
Write-up: With five minutes of vaccine Increased heart rate shot up to 198 bpm. Regular resting heart rate for me is in the 50s. Left pupil dilated completely, right people constricted to pin size. Extremities went numb and ice cold. Went to emergency room Per request of EMTs at vaccination center. Was given high-dose Benadryl and Saline IV. Heart rate return to normal and all other symptoms disappeared after treatment.
VAERS ID: 912883 (history) Vaccinated: 2020-12-01
Form: Version 2.0 Onset: 2020-12-23
Age: 41.0 Days after vaccination: 22
Sex: Male
Location: Missouri Submitted: 0000-00-00
Enter: 2020-12-29

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA - / 1 LA / SYR

Administered by: Private Purchased by: ?
Symptoms: Dyspnoea, Joint stiffness
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Arthritis (broad), Tendinopathies and ligament disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: -Seroquel 1-300 mg -Gabapentin 2-300 mg -Depakote 3-250 mg
-Escitalopram (Lexapro) 10 mg -Copaxone 1-40 mg MWF Vitamin B6 1-100 mg Vitamin D3 3-1000 IU
Current Illness:
Preexisting Conditions: Multiple Sclerosis, Bipolar
Allergies: Zyprexa, Trazadone
Diagnostic Lab Data:
CDC Split Type:
Write-up: Difficulty catching my breath, stiff joints in legs

VAERS ID: 912954 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-29
Age: 102.0 Days after vaccination: 1
Sex: Female
Location: North Dakota Submitted: 0000-00-00
Enter: 2020-12-29

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 025J20-2A / 1 RA / IM

Administered by: Private Purchased by: ?
Symptoms: Activated partial thromboplastin time normal, Adjusted calcium, Alanine
aminotransferase normal, Anion gap normal, Aortic valve calcification, Arteriosclerosis coronary artery, Aspartate aminotransferase normal, Atelectasis, Atrial enlargement, Basophil count normal, Basophil percentage, Blood albumin normal, Blood alkaline phosphatase normal, Blood bilirubin increased, Blood calcium, Blood chloride normal, Blood creatinine normal, Blood glucose normal, Blood lactic acid, Blood potassium normal, Blood sodium normal, Blood urea nitrogen/creatinine ratio, Blood urea normal, Brain natriuretic peptide increased, C-reactive protein increased, Carbon dioxide decreased, Cardiac failure congestive, Cardioactive drug level, Cardiomegaly, Computerised tomogram thorax abnormal, Cough, Eosinophil count normal, Eosinophil percentage, Fibrin D dimer, Fluid overload, Glomerular filtration rate normal, Haematocrit decreased, Haemoglobin decreased, International normalised ratio increased, Intervertebral disc degeneration, Lymphocyte count decreased, Lymphocyte percentage decreased, Mean cell haemoglobin concentration normal, Mean cell haemoglobin increased, Mean cell volume increased, Mean platelet volume increased, Monocyte count normal, Monocyte percentage, Neutrophil count normal, Neutrophil percentage increased, Osteoarthritis, Platelet count normal, Pleural effusion, Protein total normal, Prothrombin time prolonged, Pulmonary oedema, Pyrexia, Red blood cell count decreased, Red blood cell distribution width increased, SARS-CoV-2 test positive, Serum ferritin increased, Spinal disorder, Staphylococcus test negative, Tachycardia, Tachypnoea, Troponin, White blood cell count normal

SMQs: Cardiac failure (narrow), Liver related investigations, signs and symptoms (narrow), Liver-related coagulation and bleeding disturbances (narrow), Anaphylactic reaction (broad), Acute pancreatitis (broad), Asthma/bronchospasm (broad), Haematopoietic erythropenia (narrow), Haematopoietic leukopenia (narrow), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Biliary system related investigations, signs and symptoms (narrow), Pulmonary hypertension (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Other ischaemic heart disease (narrow), Chronic kidney disease (broad), Arthritis (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Infective pneumonia (broad), Dehydration (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: tylenol aspirin Atorvastatin B12 Folate Diltiazem Docusate Digoxin Furosemide Potassium Chloride Levothyroxine Lisinopril Protonix Vitamin D3 Warfarin Polyethylene Glycol
Current Illness: COVID-19 (Diagnosed 10/26/20)
Preexisting Conditions: Diabetes Type II Atrial Fibrillation Hypothyroidism CHF Hypertension Osteoporosis Anemia Cerebrovascular disease Aphasia
Allergies: ibuprofen Lactose

VAERS ID: 912957 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 42.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Oklahoma Entered: 2020-12-29

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
</table>

Administered by: Private Purchased by: ?
Symptoms: Anxiety, Chest pain, Dysphagia, Dyspnoea, Oropharyngeal discomfort, Pruritus
SMQs: Anaphylactic reaction (narrow), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Hypersensitivity (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Zyrtec 10 mg; estradiol 1mg; atrovent; singular 10mg; ventalin Advair;
Lexapro 20mg; melatonin 6 mg; vitamin D; Quercitin, Vitamin C; Vitamin B1; Zinc; ASA 81 mg;
daily vitamin

Current Illness: None
Preexisting Conditions: Mast Cell Activation; Asthma
Allergies: Cats; Pork; Dilaudid; Nubain
Diagnostic Lab Data: unknown at this time

CDC Split Type:
Write-up: Received vaccine at 13 15. At 1351 c/o mild chest pain. 1353 c/o throat fullness and anxiety; 1354 bp 148/81 HR 99 O2 sat 100% c/o difficulty swallowing, SOB and itching. Rapid response called. Benadryl 50 mg IVP given at 1355. 1356 Solumedrol 125mg given IV; 1357 Epinephrine given; 1358 Pepcid 20 mg given. 1400 Normal saline 250 mg IV; 1415 transported by ambulance to local ER. In waiting area in local ER no attention. Came back to Hospital and admitted to observation

VAERS ID: [913106](history)  Vaccinated: 2020-12-26
Form: Version 2.0  Onset: 2020-12-27
Age: 82.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: New York  Entered: 2020-12-29

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0140 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Blood pressure increased, Breath sounds abnormal, Chills, Pneumonia, Tremor, Vomiting
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Parkinson-like events (broad), Acute central respiratory depression (narrow), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypertension (narrow), Eosinophilic pneumonia (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Amlodipine 2.5mg, aspirin 81mg, atorvastatin 10mg, bacid tablet, namenda 5mg, keppra 500mg, meclizine 12.5, mirtazapinr 15mg, tylenol 325

Current Illness:
Preexisting Conditions: Alzheimers, hyperlipidemia, thrombocytopenia, TIA, major depressive disorder
Allergies: None

Diagnostic Lab Data: BP 213/159; 92% oxygen saturation on room air

CDC Split Type:
Write-up: The morning after getting vaccine, patient had high BP 213/159, 92% on room air, shaking, chills, LCTAB with diminishment at bases, emesis. Admitted to hospital for pneumonia.

VAERS ID: 913218 (history)  Vaccinated: 2020-12-27
Form: Version 2.0  Onset: 2020-12-27
Age: 25.0  Days after vaccination: 0
Sex: Female
Location: Texas  Submitted: 0000-00-00
Entered: 2020-12-30

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>037K20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Pharmacy  Purchased by: ?
Symptoms: Dizziness, Headache, Nausea, Peripheral swelling
SMQs: Cardiac failure (broad), Acute pancreatitis (broad), Angioedema (broad), Anticholinergic syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Haemodynamic oedema, effusions and fluid overload (narrow), Vestibular disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: acetaminophen 1000mg and 25mg diphenhydramine

Current Illness:
Preexisting Conditions: lupus, asthma, ulcerative colitis
Allergies: none

Diagnostic Lab Data:
CDC Split Type:
Write-up: headache, nausea, light headed, swelling of the hands. Patient was given 1000mg of acetaminophen and 25mg diphenhydramine. Patient was monitored for 60 minutes.

<table>
<thead>
<tr>
<th>VAERS ID: 913445 (history)</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-27</td>
</tr>
<tr>
<td>Age: 24.0</td>
<td>Days after vaccination: 0</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Unknown</td>
<td>Entered: 2020-12-30</td>
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<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>UN / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Chest discomfort, Intensive care, Lip swelling, Pruritus, Urticaria
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: Influenza vaccine = hives
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Pt reports having hives to the influenza vaccine
Diagnostic Lab Data:
CDC Split Type:

Write-up: Pt developed anaphylaxis, was given IM Benadryl, and was sent to the ED. Pt spent 1 night in the hospital, went home, and has come back and is in the ICU. Pt had hives, itching, chest tightness, swollen lips.

<table>
<thead>
<tr>
<th>VAERS ID: 913560 (history)</th>
<th>Vaccinated: 2020-12-18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-18</td>
</tr>
<tr>
<td>Age: 53.0</td>
<td>Days after vaccination: 0</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Illinois</td>
<td>Entered: 2020-12-30</td>
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</table>

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
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</tbody>
</table>
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private  
Purchased by: ?

Symptoms: Chest discomfort, Electrocardiogram normal, Myocardial necrosis marker normal

SMQs: Anaphylactic reaction (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 1 days  
Extended hospital stay? No  

Previous Vaccinations: 

Other Medications: Sertraline 100 mg twice daily

Current Illness: None

Preexisting Conditions: Lupus, RA

Allergies: PCN, Toradol, Bees, Biaxin

Diagnostic Lab Data: EKG, cardiac enzymes. All negative for cardiovascular event. 12/18/20.

CDC Split Type:

Write-up: Approximately 15 minutes after IM injection, patient developed chest tightness. Patient was taken to the Emergency Department for treatment. Was given sublingual nitroglycerin and subsequently admitted to the hospital for observation. Patient discharged home the following morning in good condition.

VAERS ID: 913764 (history)

Form: Version 2.0

Age: 47.0

Sex: Male

Location: New Mexico

Vaccinated: 2020-12-20

Onset: 2020-12-21

Days after vaccination: 1

Submitted: 0000-00-00

Entered: 2020-12-30

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Chest pain, Condition aggravated, Coronary artery disease, Headache, Laboratory test, Migraine

SMQs: Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Other ischaemic heart disease (narrow)

Life Threatening? No  
Birth Defect? No
Write-up: About 3 am after the injection I woke up with severe chest pains and headache and went to the ER. I was admitted for 2 days and was released with a prescription of Isosorb Monoer, Metropol, aspirin which is used as a blood thinner. The diagnosis and prognosis was severe migranes and cardioartery disease.

VAERS ID: 913807  (history)  Vaccinated: 2020-12-20
Form: Version 2.0  Onset: 2020-12-20
Age: 49.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Washington  Entered: 2020-12-30

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Hypoaesthesia, Paraesthesia oral, Tongue dry
SMQs: Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Dehydration (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:  
Other Medications: No  
Current Illness: No  
Preexisting Conditions: High blood pressure Arthritis.  
Allergies: Lisinopril.  
Diagnostic Lab Data:  
CDC Split Type: vsafe  

Write-up: Left side of my face went numb. 5 minutes later tongue was dry and tingly. Went back to place of work and went to monitoring room. Went to ER to be checked out. Got better over that day. I was admitted the same day and discharged the next day.

VAERS ID: [913866](https://www.vaers.org/history)  
Vaccinated: 2020-12-29  
Onset: 2020-12-29  

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?  

Symptoms: Dyspnoea, Intensive care, Localised oedema, Pharyngeal swelling, Pruritus, Rash macular, Skin burning sensation, Throat irritation, Urticaria  
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)  
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, ? days  
  
  Extended hospital stay? No

Previous Vaccinations:  
Other Medications: Prenatal Multivitamin  
Current Illness: NA  
Preexisting Conditions:  
Diagnostic Lab Data:
Patient administered Pfizer-BioNtech vaccine, dose #1 in series at 810AM, without notable concerns for 10 minutes. At 10 minutes post vaccination, patient developed itching and some blotching, throat becoming scratchy. No known allergies to components listed in vaccine, though does have a listed allergy to contrast dye, does not carry an epi-pen. Patient was walked to urgent/emergency care in the clinic, where she was seen immediately. Patient was given diphenhydramine 25 mg IV, pantoprazole 40 mg IV, with mild urticaria continuing. Patient notes she feels her "back is on fire". Patient was then given methylprednisolone 125 mg IV. At this time, no SOB is noted, urticaria is still present. 0930 patient reports swelling in throat and respiratory difficulties at this time with visible edema in the neck. 0.3 mg Epinephrine given at 0935, epinephrine drip and racemic epinephrine neb given. 1006 Patient on epinephrine drip 2.5 mics/hour. Patient transferred to Medical Center ICU, where she remains at the time of this report.

VAERS ID: 914139 (history)

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>UN / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Hypoesthesia

SMQs: Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Sexual dysfunction (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 1 days  
Extended hospital stay? No  

Previous Vaccinations:  
Other Medications:  
Current Illness:  
Preexisting Conditions:  
Allergies:  
Diagnostic Lab Data:  

Write-up: Facial numbness radiating down left side of neck to left arm, elbow and chest. Went to ED, admitted for observation overnight.
VAERS ID: 914280 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-26
Age: 63.0 Days after
Sex: Female vaccination: 9
Location: Illinois Submitted: 0000-00-00
Entered: 2020-12-30

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?

Symptoms: Anosmia, Blood magnesium, Brain natriuretic peptide, C-reactive protein, Chest X-ray, Chills, Cough, Diarrhoea, Dyspnoea, Electrocardiogram normal, Fibrin D dimer, Full blood count, Influenza virus test negative, Metabolic function test, Nausea, Paranasal sinus hypersecretion, Pyrexia, Red blood cell sedimentation rate, SARS-CoV-2 test positive, Troponin T

SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Taste and smell disorders (narrow), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), Immune-mediated/autoimmune disorders (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: aspirin 81mg, nitro 0.4 sublingual, hydrochlorothiazide 25mg, repatha 120mg, plavix 75mg, rotonix, torsemide 5mg, zetia 10mg, zoloft 100mg, bystolic 5mg, synthroid 100mcg, telmisartan 80mg, allopurinol 100mg,

Current Illness:

Preexisting Conditions: hypothyroidism, CAD, HTN, Hyperlipidemia, GERD, gout, osa,
Allergies: Codeine, erythromycin, augmentin

Diagnostic Lab Data: COVID swab - positive EKG, - normal Flu Swabs - negative CBC, CMP, Magnesium, CRP, LFH, ESR, BNP, Tropon T, D-Dimer, Chest xray

CDC Split Type:

Write-up: Patient presented to the ER on 12/26/2020 with complaints of fever, chills and SOB for about 3 days. Stated it was a gradual onset and has been intermittent. Also reported some
nausea and chronic loose stools, mild loss of smell and sinus drainage, non productive cough. Discharged to observation and then home on 12/27/2020. Patient readmitted to hospital on 12/30/2020.

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**VAERS ID:** 914474 (history)  
**Vaccinated:** 2020-12-29  
**Form:** Version 2.0  
**Onset:** 2020-12-29  
**Age:** 64.0  
**Days after vaccination:** 0  
**Sex:** Female  
**Location:** New Jersey  
**Submitted:** 0000-00-00  
**Entered:** 2020-12-30

**Vaccination / Manufacturer**  
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<th>COVID19</th>
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<th>EK9231 / UNK</th>
<th>LA / IM</th>
</tr>
</thead>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Abdominal pain, Dyspnoea, Headache, Oropharyngeal pain, Peripheral swelling, Pruritus, Rash

**SMQs:** Cardiac failure (broad), Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (broad), Retroperitoneal fibrosis (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 1 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**

**Other Medications:** Acetaminophen 650 Q8, Vit C, lactobacillus 20 billions daily, metaxalone 800 mg 3 times daily

**Current Illness:** Asthma

**Preexisting Conditions:** Asthma

**Allergies:** Benzonatate, iodine, guaifaresin

**Diagnostic Lab Data:** Benadryl 50 mg then 50 IV Q8 hours, epinephrine, Pepcid

**CDC Split Type:**

**Write-up:** headache 15 minutes after receiving vaccine, 3 to 4 hours later broke out in rash on upper extremities, ABD pain, itchy, and arm swelling, throat hurts. SOB
VAERS ID: 914479 (history)  Vaccinated: 2020-12-24
Form: Version 2.0  Onset: 2020-12-25
Age: 41.0  Days after vaccination: 1
Sex: Female
Location: New York
Submitted: 0000-00-00
Entered: 2020-12-30

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<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<td>011J20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Fatigue, Hemiparesis
SMQs: Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Noninfectious encephalitis (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Xyzal 5mg tab. Take 1 tab BID Amlodipine 10mg 1 tab PO QAM Kariva (Mircette) 1 tab PO QHS Mucinex (Guaifenesin) 600 mg 1tab PO BID Omega 3 Fatty acid 1cap PO QD Calcium + Vitamin D 600 mg 2 tabs PO Qhs Ocean spray BID to nostrils Nas
Current Illness: none
Preexisting Conditions: Mild to moderate Intellectual Disabilities Organic Anxiety Disorder Atypical Manic Disorder Frontal Lobe Disorder Chronic Bronchiectasis Hypothyroidism Mild sleep apnea CPAP at 6 cm Hyperlipidemia Hypertension Nasal Allergies Facial Acne Obesity , Short Stature Chronic Sinusitis Seizure Disorder
Allergies: NKA
Diagnostic Lab Data:
CDC Split Type:
Write-up: Left sided weakness, fatigue for 3 days post immunization. Patient was seen by health care provider on 12/30/2020. Provider transferred patient to Hospital ER for further evaluation.

VAERS ID: 914521 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-29
Age: 39.0  Days after vaccination: 1
Sex: Female
Location: Idaho
Submitted: 0000-00-00
Entered: 2020-12-30
Vaccination / Manufacturer Lot / Dose Site / Route

Administered by: Private        Purchased by: ?
Symptoms: Abdominal pain, Amphetamines positive, Anterograde amnesia, Antidepressant drug level, Atelectasis, Back pain, Bacterial test positive, Barbiturates positive, Blood culture, Blood lactic acid normal, Blood urine present, Chills, Cholelithiasis, Chromaturia, Coma scale abnormal, Computerised tomogram abdomen normal, Computerised tomogram head normal, Computerised tomogram pelvis, Computerised tomogram thorax normal, Condition aggravated, Cough, Culture urine, Drug screen, Dysarthria, Dysuria, Eye movement disorder, Flank pain, Gaze palsy, Glucose urine absent, Headache, Hypertonia, Hypopnoea, Incoherent, Influenza A virus test negative, Influenza B virus test, Influenza virus test negative, Intervertebral disc degeneration, Lethargy, Leukocytosis, Mental status changes, Migraine, Moaning, Myalgia, Nasal congestion, Nasal septum deviation, Nausea, Nitrite urine absent, Opiates negative, Oropharyngeal pain, Paranasal cyst, Pelvic pain, Protein urine absent, Pyrexia, Red blood cells urine negative, SARS-CoV-2 test positive, Scan with contrast normal, Seizure, Sinus disorder, Specific gravity urine normal, Unresponsive to stimuli, Urine abnormality, Urine analysis, Urine bilirubin decreased, Urine ketone body present, Urine leukocyte esterase, Urobilinogen urine, Vomiting, White blood cells urine negative, pH urine normal

SMQs:; Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Acute pancreatitis (broad), Haemorrhage terms (excl laboratory terms) (narrow), Haemorrhage laboratory terms (narrow), Hyperglycaemia/new onset diabetes mellitus (narrow), Neuroleptic malignant syndrome (narrow), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Dementia (broad), Convulsions (narrow), Parkinson-like events (narrow), Drug abuse and dependence (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (narrow), Psychosis and psychotic disorders (broad), Gallbladder related disorders (narrow), Gallstone related disorders (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Ocular motility disorders (narrow), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (narrow), Proteinuria (broad), Respiratory failure (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Hypoglycaemia (broad), Infective pneumonia (broad), Hypokalaemia (broad), Opportunistic infections (broad), COVID-19 (narrow), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: none on file
Current Illness: COVID-19 diagnosis 12/11/2020 asymptomatic
Allergies: NKDA

CDC Split Type:
Write-up: Patient presents with ? Altered Mental Status ? Headache ? ? HPI Patient presents to ER by EMS ambulance after family called 911 as patient was incomprehensible with slurred speech and moaning on the phone this evening. On arrival of EMS patient was asleep in bed and reportedly unresponsive other than to localize to pain. EMS transferred patient to ER. On arrival to ER patient had GCS 7. Reportedly patient is locum nurse who works in a Nursing Home and patient reportedly received COVID vaccination 2 days ago and that night reportedly began complaining to family on the phone of headache, nasal congestion, sore throat, cough, fever, chills, nausea, emesis, myalgias, and lethargy. Per the medical record patient has history of seizures, migraines, and sciatica. No other information is known on patient arrival to ER. 1. Peripheral IV right dorsal hand placed by EMS in route to ER. 2. On arrival to ER GCS 7 (E1M5V1) and roving eye movements with episodic lateral conjugate and at times disconjugate gaze concerning for seizure activity. Arms and legs with moderately increased tone but no clonic movements and patient able to localize bilaterally. 3. Ativan 1 mg IVP for seizure, then further 2 mg IVP for persistent seizure. 4. Fosphenytoin 1,000 mg IVPB in ER for loading dose of antiseizure medication. 5. Patient had significant improvement following completion of Ativan 3 mg IVP and GCS improved to 14 (E3M6V5) from GCS of 7 (E1M5V1). 6. Patient able to communicate after improvement as above and reports she has had headache or migraine for past several days as well as dysuria with bilateral CVA pain and has significant pain on percussion of bilateral CVA and moderate pain on palpation of bilateral flanks. No nuchal rigidity or pain with ROM of neck. Additionally, she complains of severe headache and diffuse pain of back and abdomen/pelvis. She reports a history of seizures in the past and reports she had one last month and was treated at a hospital in her home state. She denies antiseizure medications. Additionally, patient reports nonproductive cough, sore throat, nasal congestion, fever, chills, myalgias, lethargy, nausea, and episodic emesis over the past 2 days. She has anterograde amnesia following seizure and does not recall events. 7. Normal saline 1,000 mL IV bolus, then 100 mL/hour in ER. 8. CT of head with and without contrast performed and negative for intracranial hemorrhage, lesions, stroke, or other acute pathology. 9. CT of chest/abdomen/pelvis with IV contrast shows no acute pathology or notable abnormalities. 10. Lactic acid drawn and normal. 11. UA and urine microscopy collected by straight catheterization and culture collected and pending. 12. Blood cultures x 2 collected and pending. 13. Rocephin 2 mg IVPB in ER after blood cultures collected. 14. Vancomycin 20 mg/kg (1,500 mg) IVPB following Rocephin. 14. Dexamethasone 10 mg IVP in ER. 15. Duoneb nebulizer in ER. 16. Called to discuss with patient’s daughter and the family’s preferred contact who is 23 years old. She reports patient had COVID vaccination 2 days ago and beginning that night patient has complained of headache, fever, chills, nonproductive cough, sore throat, nasal congestion, myalgias, and lethargy. Additionally, she reports patient has history of seizures on at least 1 occasion in the past a few months ago but is not on antiseizure medications. She reports patient had MRI and MRA of her brain at that time and reportedly an intracranial aneurysm was identified at that time. 17. Called to request transfer to another facility and spoke with hospitalist who states there is no neurologist there and suggests transfer to larger tertiary care facility with neurology. 18. Called to request transfer and accepted by ER provider. 19. Transfer by ALS ground ambulance with telemetry, pulse oximetry, O2 to keep $g 02%, vitals every 30 minutes, normal saline at 100 mL/hour, Rocephin 2 grams IVPB, vancomycin 20 mg/kg (1,500 mg) IVPB in ER. ? DISPOSITION Patient Stabilized and Transferred Data Unavailable Wed Dec 30, 2020 2:12 AM CST
VAERS ID: 914730 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-17
Age: 44.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: California Entered: 2020-12-30

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<td>EK5730 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Computerised tomogram coronary artery normal, Dizziness, Electrocardiogram T wave inversion, Full blood count normal, Hyperhidrosis, Metabolic function test normal, Myocardial necrosis marker increased, Nausea, Presyncope, Troponin normal
SMQs:; Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (broad), Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Other ischaemic heart disease (broad), Vestibular disorders (broad), Hypotonic-hyposresponsive episode (broad), Hypoglycaemia (broad), Hypokalaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Bupropion HCl XL 300mg tablet QDay Bupropion HCl SR 100mg tablet QDay Escitalopram 20mg tablet QDay Buspirone HCL 7.5mg tablet TID
Current Illness: None
Preexisting Conditions: Scoliosis Depression
Allergies: None
Diagnostic Lab Data: EKG 12/17/2020, inverted T waves CBC, BMP, within normal limits Cardiac enzymes x 3, troponin was zero Coronary CT with contrast, WNL
CDC Split Type:
Write-up: Near syncopal episode approximately 2.5 hours after vaccination. Sudden onset of dizziness, nausea, and diaphoresis. Was admitted to ED and observed overnight. Full cardiac work up was done and shown to be within normal limits. I have no pre-existing conditions and considered to be a healthy adult.
VAERS ID: 914798 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-20
Age: 54.0 Days after vaccination: 2
Sex: Female
Location: California Submitted: 0000-00-00
Entered: 2020-12-30

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Administered by: Private Purchased by: ?

Symptoms: Bundle branch block right, Cardiac stress test normal, Chest X-ray, Chest pain, Depressed level of consciousness, Electrocardiogram abnormal, Full blood count, Heart rate decreased, Hyperhidrosis, Metabolic function test, Nausea, Pallor, Sinus bradycardia, Transcutaneous pacing, Troponin increased

SMQs: Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Disorders of sinus node function (narrow), Conduction defects (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypotonic-hypo-responsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypoglycaemia (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Amlodipine 10 mg daily
Current Illness: none
Preexisting Conditions: Hypertension
Allergies: No known allergies
Diagnostic Lab Data: EKGs, Chest X-rays, Serial Toponin Levels, CBC, CMP, Cariac Stress test

CDC Split Type:
Write-up: On Dec. 20, 2020 around 11:30 PM, 2 days after patient received her COVID-19 vaccination, she was found on the bathroom floor, obtunded, very pale, diaphoretic, nauseous, and complaining of severe chest pain. Paramedics was called and patient was transported to the nearest emergency room. According to paramedics, on the way to the ER while patient was in the ambulance, she was noted with a sudden drop in heart rate about 19 beats/minute and have to be given Atropine IV Push, oxygen and was connected to
transcutaneous pacing which improves her heart rate. In the ER patient continued to have chest pain and she was given Morphine, Oxygen, Nitroglycerine and Aspirin. IM had an EKG which showed Sinus Bradycardia with a Right Bundle Branch Block. She had serial ekgs, a chest x-ray, laboratory testing which included Troponin. Her first Troponin level came back elevated prompting her hospital admission to Telemetry. Her next 2 Troponin level improved and return to normal range and her chest pain has resolved. She underwent a Stress Test which came back negative. Patient was admitted for a total of 20 hours in the Telemetry unit with Cardiology consultation before being discharged home last. She was re-evaluated by the cardiologist yesterday which diagnosed her a chest pain of unknown origin.

VAERS ID: 914835 (history) Vaccinated: 2020-12-26
Form: Version 2.0 Onset: 2020-12-28
Age: 51.0 Days after vaccination: 2
Sex: Male Submitted: 0000-00-00
Location: Unknown Entered: 2020-12-30

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<td>- / IM</td>
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Administered by: Unknown Purchased by: ?
Symptoms: Dyspnoea, Hypoxia, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Went to Emergency room on 12/28/20 because he was short of breath. Tested positive for COIVD_19 and was admitted with hypoxia.
VAERS ID: 915119 (history) Vaccinated: 2020-12-24
Form: Version 2.0 Onset: 2020-12-29
Age: 58.0 Days after vaccination: 5
Sex: Male Submitted: 0000-00-00
Location: Wyoming Entered: 2020-12-30

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<td>037K20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: C-reactive protein increased, COVID-19 pneumonia, Chest X-ray abnormal, Computerised tomogram thorax abnormal, Dyspnoea, Fibrin D dimer increased, Hypoxia, SARS-CoV-2 test negative
SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Haemorrhage laboratory terms (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: albuterol, Zithromax, Advair
Current Illness: diagnosed with covid19 infection on 12/14/2020, had ulnar nerve and median nerve releases in November, 2020
Preexisting Conditions: tobacco abuse.
Allergies: no known allergies
Diagnostic Lab Data: CT of chest and CXR supported covid19 pneumonia diagnosis with marked elevation in D-dimer, CRP. Interestingly SARS-CoV2 rapid antigen was negative on 12/29/2020.
CDC Split Type:
Write-up: The patient had COVID19 infection diagnosed 12/14/2020, and he stated 5 to 10 days after this, he developed shortness of breath. Had vaccine on 12/24/2020. Hypoxic and short of breath with COVID19 pneumonia on 12/29/2020. I do not know if this is an adverse effect or temporally related or if the vaccine activated prior infection.
VAERS ID: 915161 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-19
Age: 34.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Oregon Entered: 2020-12-31

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<td>EH9899 / 1</td>
<td>- / -</td>
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Administered by: Private Purchased by: ?
Symptoms: Breast pain, Breast tenderness, Headache, Lymph node palpable, Lymphadenopathy, Musculoskeletal stiffness, Pain, Pain in extremity, Tenderness
SMQs: Dystonia (broad), Parkinson-like events (broad), Noninfectious encephalitis (broad), Noninfectious meningitis (broad), Lipodystrophy (broad), Arthritis (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020506596
Write-up: my left arm and breast were tender with some mild body aches and low grade headache/Arm soreness; my left arm and breast were tender with some mild body aches and low grade headache/left breast was increasingly painful with swollen palpable lymph nodes; my left arm and breast were tender with some mild body aches and low grade headache/ left breast was increasingly painful with swollen palpable lymph nodes; my left arm and breast were tender with some mild body aches and low grade headache/ left breast was increasingly painful with swollen palpable lymph nodes; my left arm and breast were tender with some mild body aches and low grade headache/ left breast was increasingly painful with swollen palpable lymph nodes; my left arm and breast were tender with some mild body aches and low grade headache/ left breast was increasingly painful with swollen palpable lymph nodes; my left arm and breast were tender with some mild body aches and low grade headache/ body soreness and stiffness; This is a spontaneous report from a contactable healthcare professional. A 34-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EH9899), via an unspecified route of administration on 18Dec2020 at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient stated, "the day after the injection, my left arm and breast were tender with some mild body
aches and low grade headache. Sunday Arm soreness went away but left breast was increasingly painful with swollen palpable lymph nodes, with body soreness and stiffness. Monday left breast is still remarkably tender with palpable lymph nodes" on 19Dec2020 (reported as Seriousness criteria-Caused/prolonged hospitalization: Yes, on an unspecified date in Dec2020). The outcome of the event was not recovered.; Sender"s Comments: The reported information is limited. Based on the close temporal relationship and the description of the events, there is a reasonable possibility that the events are related to BNT162 vaccine. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.

VAERS ID: 915478 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2020-12-31
Age: 55.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Georgia Entered: 2020-12-31

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<td>039K20A / 1</td>
<td>LA / IM</td>
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Administered by: Private Purchased by: ?
Symptoms: Dystonic tremor, Erythema, Headache, Tachycardia, Tachypnoea
SMQs: Anaphylactic reaction (narrow), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dystonia (narrow), Eosinophilic pneumonia (broad), Hypersensitivity (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Crestor, Allopurinol
Current Illness: N/A
Allergies: Iodine
Diagnostic Lab Data:
CDC Split Type:
Write-up: erythema, tachycardia, tachypnea, headache, uncontrolled dystonic shaking
VAERS ID: 915480 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-30
Age: 75.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Minnesota Entered: 2020-12-31

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<td>026L20A / 1</td>
<td>- / IM</td>
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Administered by: Senior Living  Purchased by: ?
Symptoms: Chest X-ray normal, Chills, Injection site erythema, Injection site induration, Laboratory test normal, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Vitamin D3 4,000 units daily, famotidine 20 mg daily, ferrous sulfate 325 mg daily, gabapentin 400 mg BID, levothyroxine 100 mcg daily, melatonin 9 mg at hs, metoprolol tartrate 12.5 mg BID, nortriptyline 10 mg at HS, Norvasc 10 mg daily, S
Current Illness: Had a uti 12/8/2020 finished abx on 12/10/2020; prior to admitting had COVID with multiple complications spent along time in the hospital recovering.
Preexisting Conditions: Type 2 diabetes, morbid obesity, hypertension, sleep apnea, anemia, GERD, chronic pain
Allergies: Benzalkonium, lisinopril, Percocet, Adhesive Tape
Diagnostic Lab Data: Sent to ER admitted to hospital under observation. Per Hospital notes "There does not appear to be a cellulitis or abscess at this time. Labs and chest x-ray in the ED did not reveal any origin to where her fevers may be coming from".
CDC Split Type:
Write-up: Developed sudden onset of shaking chills and fevers as high as 103.0. She has developed a small circular 5 x 5 area of erythema and firmness at the injection site of her left upper arm.
VAERS ID: 915613 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-19
Age: 33.0 Days after vaccination: 2
Sex: Male Submitted: 0000-00-00
Location: Illinois Entered: 2020-12-31

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<td>EJ685 / 1</td>
<td>LA / IM</td>
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Administered by: Unknown purchased by: ?
Symptoms: Angioedema, Blood glucose increased, Hyperglycaemia
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Hyperglycaemia/new onset diabetes mellitus (narrow), Oropharyngeal allergic conditions (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: angioedema. hospitalized overnight. During the hospitalization pt was started on an epi gtt and given MTP 125 mg. He had subsequent hyperglycemia, and increased his rate on his insulin pump to 2 U/hr (from 0.83 U/hr). Pt then decreased his rate to 1.4 U/hr while on the epi gtt, and then to 1.1 U/hr when off of the epi gtt. He also strengthened his carb ratio from 1:12 to 1:10 last night.Pt reports he had postprandial hyperglycemia overnight after his meal, but then BG corrected overnight. Pt reports fasting this morning is in the 110s. This morning''s breakfast on 1:10 CR with well controlled BG.

VAERS ID: 915690 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-21
Age: 28.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2020-12-31
**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**

Administered by: Work  
Purchased by: ?  
Symptoms: Consciousness fluctuating, Discomfort, Exposure during pregnancy, Fatigue, Headache, Nausea, Palpitations  
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Pregnancy, labour and delivery complications and risk factors (excl abortions and stillbirth) (narrow), Hypoglycaemia (broad)  
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? Yes  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 1 days  
Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: Maxalt 10mg Elavil 10mg  
Current Illness: Anxiety  
Preexisting Conditions:  
Allergies: NKDA  
Diagnostic Lab Data:  
CDC Split Type:  
Write-up: Due Date unknown/6-7 wks pregnant -nausea -Body felt heavy -headache -in & out consciousness -Fatigue, severe -Heart Racing

VAERS ID: 915813 (history)  
Vaccinated: 2020-12-30  
Onset: 2020-12-30  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2020-12-31

**Dysphagia, Full blood count normal, Metabolic function test normal, Paraesthesia**
oral, SARS-CoV-2 test negative, Swollen tongue

SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Anticholinergic syndrome (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Hydralazine 50mg BID last taken 3 days prior to vaccination Carvedilol 12.5mg BID last taken 3 days prior to vaccination Aspirin 81mg taken 12/30 AREDS multivitamin taken 12/30

Current Illness:

Preexisting Conditions: Macular degeneration HTN

Allergies: Previous experienced three episodes of angioedema. One episode was thought to be from losartan. Patient experienced 2 additional episodes while off losartan. Previously diagnosed with seasonal allergies. Patient stated all three episodes he had eaten some sort of salad/vegetable and thinks this could be related to environmental allergies.

Diagnostic Lab Data: CMP and CBC were unremarkable 12/30 COVID-19 PCR was negative 12/30

CDC Split Type:

Write-up: Patient stated he stopped his blood pressure medications 3 days prior to vaccination due to a previous reaction to losartan, a medication he was no longer taking. Patient took aspirin and a MVI on day of vaccination and drank lemon water. Patient developed tingling sensation in his mouth after eating dinner around 18:00. Patient stated he ate tacos with apple cider and noticed tingling after dinner. Patient stated he took two benadryl with no relief. His tongue continued to swell and he took two additional benadryl at 22:00. Once he developed difficulty swallowing he went to the emergency department. Patient presented to the ED with tongue swelling and difficulty swallowing. At 23:57 he was administered 0.3mg of epinephrine IM, diphenhydramine 25mg IV, famotidine 40mg IV, dexamethasone 10mg IV at 0114, methylprednisolone 60mg q6hrs started at 0417, diphenhydramine 25mg q6hrs IV started at 0416, albuterol 2.5mg via neb q6hrs started at 0710
VAERS ID: 915928 (history)

Form: Version 2.0

Age: 38.0

Sex: Female

Location: Missouri

Vaccinated: 2020-12-28

Onset: 2020-12-28

Days after vaccination: 0

Submitted: 0000-00-00

Entered: 2020-12-31

### Vaccination / Manufacturer

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<thead>
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<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / UNK</td>
<td>- / -</td>
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</tbody>
</table>

Administered by: Private

Purchased by: ?

Symptoms: Confusional state, Dizziness, Dysphagia, Dyspnœa, Endotracheal intubation, Immediate post-injection reaction, Palpitations, Paraesthesia oral, Pruritus, Rash, Rash erythematous, Tremor, Vision blurred, Wheezing

SMQs: Anaphylactic reaction (narrow), Angioedema (broad), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (narrow), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Glaucoma (broad), Cardiomyopathy (broad), Lens disorders (broad), Eosinophilic pneumonia (broad), Retinal disorders (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

Life Threatening? Yes

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? Yes

Hospitalized? Yes, 4 days

Extended hospital stay? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies: Percocet, reglan, and emgality migrain injection

Diagnostic Lab Data:

CDC Split Type:

Write-up: Started feeling a reaction immediately after the vaccine, felt blurred vision, dizziness, racing heartbeat, chest rash and face, itching all over, difficulty swallowing, tongue tingling and wheezing. Sent to ED. EPI and Benadryl. 1800 Went to see her in the ED, room 33. She has red rash to neck, shaky hands itching to neck and chest. ED Dr to discharge, she stated husband to pick her up and she will follow up with OH tomorrow.
ED gave her Epinephrine 0.3 mg, Methylprednisolone 125mg, Diphenhydramine HCL 50 mg, Zofran 4mg, Lorazepam 1 mg, Hydroxyzine HCL 50 mg Sumatriptan 6mg , Discharge from ED at 1902


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<th>VAERS ID: 915956 (history)</th>
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<tr>
<td>Form: Version 2.0</td>
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<tr>
<td>Age: 47.0</td>
<td>Days after vaccination: 1</td>
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<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: New Jersey</td>
<td>Entered: 2020-12-31</td>
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<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
</table>

Administered by: Work  
Purchased by: ?

Symptoms: COVID-19, SARS-CoV-2 test positive

SMQs:, Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications:

Current Illness: none

Preexisting Conditions:

Allergies: nkda

Diagnostic Lab Data: COVID PCR + 12/27/2020

CDC Split Type:

Write-up: Patient received dose 1 of COVID vaccine 12/24. He developed symptoms consistent with COVID infection on 12/25. He was seen in the emergency room at Hospital on 12/27, was diagnosed as COVID positive, and was discharged to home. He returned to the emergency room on 12/29 and was admitted to the hospital for treatment related to COVID infection. He is currently admitted to Hospital.
VAERS ID: **916042** (history)  Vaccinated: 2020-12-28  
Form: Version 2.0  Onset: 2020-12-31  
Age:  
Sex: Female  Days after vaccination: 3  
Location: California  Submitted: 0000-00-00  
Entered: 2020-12-31

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<tr>
<th>Vaccine / Manufacturer</th>
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Administered by: Work  
Purchased by: ?

Symptoms: Blood test, Dizziness, Feeling abnormal, Hypoesthesia, Paraesthesia  
SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Dementia (broad), Guillain-Barre syndrome (broad), Vestibular disorders (broad), Sexual dysfunction (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, ? days  
Extended hospital stay? No

Previous Vaccinations: Flu vaccine in Sept 2020 - Sore arm  
Other Medications: ibuprofen, tylenol  
Current Illness: no COVID- August 2020  
Preexisting Conditions: no  
Allergies: sulfa  
Diagnostic Lab Data: Went to ED and don't remember which one They did run blood work.

CDC Split Type:  
Write-up: 10 minutes after vaccine numbness and tingling in left foot, hand and left side of face. Spacing out feeling. Feel like I'm going to pass out.

VAERS ID: **916065** (history)  Vaccinated: 2020-12-27  
Form: Version 2.0  Onset: 2020-12-28  
Age: 37.0  Days after vaccination: 1  
Sex: Female  
Location: Washington  Submitted: 0000-00-00  
Entered: 2020-12-31

<table>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>037K20A / 1</td>
<td>LA / SYR</td>
</tr>
</tbody>
</table>

Administered by: Other  
Purchased by: ?

Symptoms: Exposure during pregnancy, Foetal monitoring, Hydrops foetalis, Premature
labour
SMQs: Pregnancy, labour and delivery complications and risk factors (excl abortions and stillbirth) (narrow), Foetal disorders (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Zofran 2weeks prior, Multivatamins
Current Illness: none
Preexisting Conditions:
Allergies: Sulfa, Vicodin, Neosporin
Diagnostic Lab Data:
CDC Split Type:
Write-up: EDD - 4/1/2021 - Contractions at 26 w 3 days sent to L&D to be monitored on 12/28/20. Covid-19 Sars Vaccine given 1st dose 12/27/20. Patient was diagnosed with Fetal Hydrops. Patient Hospitalized 12/28/20 - current MFM consulting in hospital & outpatient

<table>
<thead>
<tr>
<th>VAERS ID</th>
<th>Vaccinated</th>
<th>Onset</th>
<th>Age</th>
<th>Days after vaccination</th>
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<td>EJ1685 / UNK</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Blood pressure increased, Body temperature increased, Breast oedema, Injection site erythema, Injection site oedema, Localised oedema, Oedema peripheral
SMQs: Cardiac failure (broad), Angioedema (broad), Neuroleptic malignant syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypertension (narrow), Hypersensitivity (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Redness about 1 1/2 inches around injection site, edema to right arm, r side of neck, r breast, r shoulder, temp 99.3, increased blood pressure. Patient went to primary care physician. She was then sent to the ER. She was Covid (+) in July 2020

VAERS ID: 916473 (history)  Vaccinated: 2020-12-31
Form: Version 2.0  Onset: 2020-12-31
Age: 54.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Arizona  Entered: 2020-12-31

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<tbody>
<tr>
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<td>037K20A / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Cardiac assistance device user, Dyspnoea, Headache, Loss of consciousness, Seizure, Unresponsive to stimuli
SMQs: Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Convulsions (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: COPD, depression, pace-maker, diabetes, obesity, osteoarthritis, plantar fasciitis, localized edema, moderate persistent asthma, sleep apnea, and ovarian cyst.
Allergies: Penicillin and Blueberries
Diagnostic Lab Data:

Write-up: Patient complained of a headache, then patient was losing consciousness and gasp for air. EpiPen was utilized due to being unresponsive then began to seizing. Patient started to flatline and an AED was used while a paramedic came. Patient was put on her side then facility gave something for seizures. Lastly, ambulance took her to the hospital.

VAERS ID: 916497 (history) Vaccinated: 2020-12-27
Form: Version 2.0 Onset: 2020-12-28
Age: 65.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Massachusetts Entered: 2020-12-31

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<td>026L20A / 1</td>
<td>- / SYR</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: C-reactive protein increased, Catheterisation cardiac normal, Chest discomfort, Chills, Coronary artery disease, Echocardiogram abnormal, Ejection fraction decreased, Haematocrit normal, Haemoglobin normal, Hypokinesia, Left ventricular end-diastolic pressure increased, Myalgia, Nausea, Red blood cell sedimentation rate increased, Stress cardiomyopathy, Troponin increased, Ventricular hypokinesia, White blood cell count normal
SMQs: Rhabdomyolysis/myopathy (broad), Cardiac failure (narrow), Anaphylactic reaction (broad), Acute pancreatitis (broad), Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (narrow), Eosinophilic pneumonia (broad), Other ischaemic heart disease (narrow), Hypotonic-hyporesponsive episode (broad), Tendinopathies and ligament disorders (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Vitamin D3, omega-3, Vitamin A/C, psyllium
Current Illness: none
Preexisting Conditions: History of Renal Cell Carcinoma s/p nephrectomy, Hyperlipidemia, osteopenia, sinus bradycardia, cervical radiculopathy
Allergies: None
Diagnostic Lab Data: TTE 12/30: EF 35%. Regional variation with normal contraction at the base and hypokinesis of the mid and distal segments with perhaps some sparing of the apex. Pattern is consistent with Takotsubo cardiomyopathy. Cardiac Catheterization 12/30: Mild Coronary Disease in LAD. Otherwise minimal CAD. Mildly elevated left sided filling pressure. ESR: 24 CRP <5 WBC 6.46, H/H 13.7/39.7

CDC Split Type:
Write-up: Patient started having myalgia, chills, nausea on the next day of the vaccination. On 2nd day (12/29) patient had chest pressure which made her present to Hospital ED. She had troponin elevation to 1.14. Cardiac Catheterization was done which was negative. On Trans Thoracic Echocardiogram, patient was found to have hypokinesis of the mid and distal segment with some sparing of apex proving Takotsubo (stress induced) cardiomyopathy. Patient did not have any underlying emotional or physical stress going on in her life or family. Till now extensive infectious as well as inflammatory work up is done to rule out any secondary causes of cardiomyopathy which till date have remained negative. As a diagnosis of exclusion, her presentation seems to be COVID-19 vaccine induced Takotsubo Cardiomyopathy.

VAERS ID: 916508 (history)
Form: Version 2.0
Age: 81.0
Sex: Male
Location: Arizona

Vaccinated: 2020-12-29
Onset: 2020-12-29
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2020-12-31

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 026L20A / 1 UN / IM

Administered by: Private
Purchased by: ?

Symptoms: Acute kidney injury, Blood creatinine increased, Blood glucose increased, Blood potassium decreased, C-reactive protein increased, COVID-19 pneumonia, Chest X-ray abnormal, Cough, Decreased appetite, Hyperglycaemia, Hypokalaemia, Hypoxia, Intensive care, Malaise, Pneumonia, SARS-CoV-2 test positive, Troponin increased

SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (narrow), Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Myocardial infarction (narrow), Retroperitoneal fibrosis (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Dehydration (broad), Hypokalaemia (narrow), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: escitalopram 10mg QD lisinopril 10mg QD trazodone 100mg QHS
atorvastatin 20mg HS bupropion XL 150mg QD empagliflozin 10mg QD insulin 70/30 kwikpen
22units QAM, 20units QPM
Current Illness: COVID + pneumonia (this was undiagnosed at the time of vaccination b/c he had no symptoms upon vaccination prescreening)
Preexisting Conditions: Hypertension Benign prostatic hyperplasia Depression Uncontrolled diabetes mellitus Hyperlipidemia Latent tuberculosis
Allergies: Benzoin tincture
Diagnostic Lab Data: Pt is an 81 year old male with pmedhx of uncontrolled DM2, HTN, depression, BPH, HLD, insomnia, hx of EtOH w/d seizure. Pt states he called EMS because he had not had an appetite for 3 days and had not been eating much. EMS noted pt"s SpO2 was 62% on RA, increased to 90s after several min on 15L NRB. Pt denied shortness of breath at any point, denied sweats/chills, HA, vomiting/diarrhea. He did states he had a cough in addition to loss of appetite. CXR with finding of BL PNA, Abbott COVID + in ER. CRP 31.4. Pt was also noted to be hyperglycemic with glucose 408, trop elevated 0.12 but without chest pain, AKI creat 1.4 with baseline 0.9, and hypokalemic with K 3.0. Pt admitted to ICU for COVID related hypoxia. Notably, pt was vaccinated for COVID 19 with 1st Moderna vaccine today in am. Pt states he told screeners he felt well because he did not have shortness of breath or body aches. As of 12/31/2020, patient is still hospitalized in ICU.

CDC Split Type:
Write-up: Pt received 1st dose of Moderna vaccine in am at COVID vaccination clinic. On presentation to clinic he stated he was feeling well. Pt was brought to ER in pm with hypoxic, requiring 15L supplemental O2. Per pt"s family, pt was not feeling well for the last couple of days but didn"t think it was related to COVID. Abbott COVID + in ER. Possible vaccine reaction, though seems unlikely.

VAERS ID: 916710 (history)  Vaccinated: 2020-12-29
Form:  Version 2.0  Onset: 2021-01-01
Age: 23.0  Days after vaccination: 3
Sex: Female  Submitted: 0000-00-00
Location: Missouri  Entered: 2021-01-01

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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Appendicitis, Band neutrophil percentage increased, Surgery, White blood cell count increased
SMQs: Neuroleptic malignant syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Synthroid
Current Illness:
Preexisting Conditions: Hypothyroidism
Allergies: NKDA
Diagnostic Lab Data: WBCs 13k, 4% Bands, CT with acute appendicitis- taken to surgery
CDC Split Type:
Write-up: Acute appendicitis, onset morning of 1/1/2021 (Reporting this because Pfizer covid vaccine had 3-4x higher risk of appendicitis, although data not reported for Moderna covid vaccine)

VAERS ID: 916809 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 40.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Washington Entered: 2021-01-01

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<td>EK5730 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Blepharospasm, Chest discomfort, Computerised tomogram, Dizziness, Dyspnoea, Limb discomfort, Paraesthesia, Pyrexia, Tremor

SMQs: Anaphylactic reaction (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dystonia (broad), Parkinson-like events (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Periorbital and eyelid disorders (narrow), Ocular motility disorders (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
**Hospitalized?** Yes, 9 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** NA

**Current Illness:** None

**Preexisting Conditions:** NA

**Allergies:** None

**Diagnostic Lab Data:** 12/28/2020 CT SCAN 12/28/2020 PULMONOLOGY CONSULT

**CDC Split Type:**

**Write-up:** CAREGIVER RECEIVED FIRST VACCINE DOSE AND SOON AFTER BEGAN TO FEEL DIZZY AND HER EYES BEGAN TO TWITCH, FOLLOWED BY UNCONTROLLED SHAKING, WITH HIGH FEVER FOLLOWED BY SEVERE SHORTNESS OF BREATH AND GASPING, WITH TIGHTNESS AROUND THE CHEST. TRANSPORTED TO EMERGENCY DEPARTMENT. HAD MULTIPLE EPISODES OF ITEMS LISTED ABOVE WHILE IN ED, INCLUDING HEAVINESS IN HER LEGS AND TINGLING IN ARMS. SHE WAS DISCHARGED FROM ED AT 10:30PM BUT WAS READMITTED ON 12/24 TO ED FOLLOWING SIMILAR ISSUES. TO DATE SHE HAS HAD 5 RAPID RESPONSES IN HOSPITAL DUE TO REPEAT OF SIGNS/SYMPTOMS. CT AND PULMONOLOGY CONSULT SCHEDULED FOR 12/28/2020.

---

**VAERS ID:** 916836 (history)

**Vaccinated:** 2020-12-24

**Form:** Version 2.0

**Onset:** 2020-12-30

**Age:** 55.0

**Days after vaccination:** 6

**Sex:** Male

**Submitted:** 0000-00-00

**Entered:** 2021-01-01

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>AR / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Private

**Purchased by:** ?

**Symptoms:** Chest X-ray abnormal, Chest discomfort, Computerised tomogram thorax abnormal, Coronary artery disease, Diarrhoea, Discomfort, Echocardiogram normal, Ejection fraction normal, Electrocardiogram Q wave abnormal, Electrocardiogram abnormal, Electrocardiogram change, Epistaxis, Fatigue, Fibrin D dimer normal, Flushing, Full blood count normal, Glucose tolerance impaired, Glycosylated haemoglobin increased, Injection site pain, Lipase normal, Liver function test normal, Lung opacity, Metabolic function test normal, SARS-CoV-2 test negative, SARS-CoV-2 test positive, Sinus tachycardia, Troponin normal, Urine analysis normal

**SMQs:** Anaphylactic reaction (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Hyperglycaemia/new onset diabetes mellitus (narrow), Interstitial lung disease (narrow), Myocardial infarction (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Pseudomembranous colitis (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Other ischaemic heart disease (narrow), Lipodystrophy (broad), Hypersensitivity (broad), Noninfectious diarrhoea (narrow), Infective pneumonia (broad), Dehydration (broad), Opportunistic infections (broad), COVID-19 (narrow)

**Life Threatening?** No
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 1 days  
  Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: No current medications  
Current Illness: Pt reported frequent urination for several months  
Preexisting Conditions: None  
Allergies: No known allergies  
Diagnostic Lab Data: SARS-CoV-2 RNA - Detected A 12/30/2020 @1825  
CDC Split Type:  
Write-up: Patient is a 55 year old male with no past medical history who presents with complaint of sudden onset of left-sided nonradiating chest discomfort of sudden onset approximately 1 hour prior to presentation while doing administrative work at rest. He describes the pain as a dull heaviness sensation and approximate 3/10 pain severity. Chest discomfort was associated with a feeling of flushing that was quite transient but chest discomfort was persistent. Patient immediately presented to the ED for further evaluation. He denies experiencing any chest pain upon waking up this morning. Does note that he did have a transient episode of epistaxis on his way to work for which he had to pull over and apply pressure to his nose but this subsequently subsided and he attributed this to dry air as he has experienced epistaxis in the past but with less severity previously. In the ER, vital signs noted for BP 133/76, pulse ranging 91-114, respiratory rate 16-20, 96% on room air. Initial laboratory parameters were completely normal including normal CBC, CMP, LFT, lipase, UA, and normal D-dimer. Initial troponin was negative x1. EKG with sinus tachycardia, heart rate of 115. Noted Q waves inferiorly. No acute ST or T wave changes appreciated. Chest x-ray with mild increased density in the left lower lobe. Given this, patient was tested for rapid Covid which was negative but PCR was positive for COVID. CT of the chest noted for focal subsegmental groundglass infiltrate at the superior segment of the LLL, likely infectious versus inflammatory. Also noted small nonspecific groundglass attenuation with focal septal thickening at the right upper lobe which could be infectious or inflammatory, bibasilar atelectasis. Patient was treated with aspirin 324 mg in the ED. Of note, patient actually just received the COVID-19 vaccination on 12/24/20. He denies any shortness of breath, no cough, denies any nausea or vomiting, denies any change in taste or smell nor change in appetite. Does note 1 single episode of loose stool but otherwise denies any diarrhea. Does report that he had approximate 48 to 72-hour period of fatigue and soreness at the site of the left deltoid injection following the vaccination but otherwise no further symptoms. It is also noted that he does have a positive family history of coronary artery disease as his dad had an MI at the age of 49. Patient has never undergone a cardiac catheterization in the past but does report having a negative stress test at the age of 42. He is being admitted under the hospitalist service for further management Patient was initially admitted under observation for chest pain obs. However patient's Covid test came back positive and patient also had dynamic EKG changes concerning for possible unstable angina. Patient was treated with aspirin Plavix full-strength Lovenox along with beta-blocker and a cardiology consult. Serial troponins were negative. Echocardiogram revealed normal EF of 55 to 60% with no hemodynamically significant
valvular disease. Cardiology felt that patient likely has underlying coronary artery disease have recommended discharge home with aspirin and Plavix with outpatient stress testing given his positive Covid testing. At the time of discharge patient denied any chest pain or shortness of breath. Patient was borderline diabetic with a hemoglobin A1c of 6.1. Patient was discharged home with Metformin along with glucometer, glucose strip, lancets. Given patient's tachycardia patient"s Metformin 25 mg twice daily was changed to Toprol 25 mg daily. (Please note clarification in comparison to discharge home med list. Toprol XL 25 mg daily was called to pharmacy in place of the metoprolol.)

<table>
<thead>
<tr>
<th>VAERS ID: 916890 (history)</th>
<th>Vaccinated: 2020-12-01</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-22</td>
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<tr>
<td>Age: 39.0</td>
<td>Days after vaccination: 21</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<td>Location: Texas</td>
<td>Entered: 2021-01-01</td>
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**Vaccination / Manufacturer**

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<td>- / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

**Administered by:** Work  
**Purchased by:** ?

**Symptoms:** Chest X-ray, Dyspnoea, Laboratory test, SARS-CoV-2 test, Throat tightness, Urticaria, Wheezing

**SMQs:** Anaphylactic reaction (narrow), Angioedema (narrow), Asthma/bronchospasm (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

**Life Threatening?** Yes

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, 4 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Zoloft, vitamin d, vitamin b, zinc, Wellbutrin, singular

**Current Illness:** None

**Preexisting Conditions:** None until vaccine

**Allergies:** None

**Diagnostic Lab Data:** COVID TEST, LABS, Chest-X-Ray

**CDC Split Type:**

**Write-up:** HIVES, SOB, THROAT CLOSING UP, WHEEZING
VAERS ID: 917026 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-29
Age: 82.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: Louisiana  Entered: 2021-01-01

<table>
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<td>025J208 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Cerebrovascular accident, Drooling, Dysphagia, Facial paralysis, Gastrostomy, Mobility decreased, Musculoskeletal disorder
SMQs: Rhabdomyolysis/myopathy (broad), Anticholinergic syndrome (broad), Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Dyskinesia (broad), Dystonia (broad), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hearing impairment (broad), Tendinopathies and ligament disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Codeine Peanuts
Diagnostic Lab Data:
CDC Split Type:
Write-up: 12/28/2020, Pharmacy staff administered Moderna COVID Vaccine. 12/29/2020, he had not eaten breakfast or lunch but did consume fluids and take his medications. BP =150/70, Temp. = 101.6, Pulse= 102, Respirations= 18 and Oxygen saturation= 97%. Tylenol 650 mg given. It was difficult for him to swallow. Also had no use of right upper extremity and unable to move lower extremity, mouth was drooping and was drooling. Physician in attendance and ordered to send to ER. 1/1/2021, received information from nurse at hospital that patient received a Peg Tube this afternoon and Clinical indication of a stroke.
VAERS ID: 917042 (history) Vaccinated: 2020-12-27
Form: Version 2.0 Onset: 2020-12-28
Age: 43.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Michigan Entered: 2021-01-01

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<td>026L20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Computerised tomogram, Electrocardiogram, Electroencephalogram, Loss of consciousness, Magnetic resonance imaging, Nausea, SARS-CoV-2 test negative, Seizure, Vomiting
SMQs:; Torsade de pointes/QT prolongation (broad), Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: None
CDC Split Type:
Write-up: I received the vaccine at 6:30pm on 12/27. I worked at 7pm and took lunch at 2:00am. After lunch, I immediately felt sick to my stomach and threw up. I went home after my shift and went to bed. After 5 hours, I woke up and went to the couch to lay down while kids watched TV. Next, I woke to several people in my house. I had a seizure and my son had called 911. I was taken to emergency department. I was admitted and stayed 2 nights in the hospital.
VAERS ID: 917122 (history) Vaccinated: 2020-12-31
Form: Version 2.0 Onset: 2020-12-31
Age: 35.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: New York Entered: 2021-01-01

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<td>025J20A / 1 LA / SYR</td>
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</tbody>
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Administered by: Private  
Purchased by: ?


SMQs: Anaphylactic reaction (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Parkinson-like events (broad), Noninfectious encephalopathy/delirium (broad), Vestibular disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), COVID-19 (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? Yes  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 2 days  
  Extended hospital stay? No

Previous Vaccinations:  

Other Medications: Networking, Januvia, amlodopine, losartan  
Current Illness: None  
Preexisting Conditions: Crohns disease, diabetes, high blood pressure, sleep apnea  
Allergies: None  
Diagnostic Lab Data: 1/1/2021 covid test, bloodwork, CT scan, chest x ray, bloodgas test

CDC Split Type:  

Write-up: A little over an hour after receiving the vaccine I noticed a burning sensation in my sinuses. By 130am 1/1/2021 I awoke from my sleep terribly dizzy, shaking violently and experiencing a fever of 101.3 F. I took advil and tylenol and fell asleep about an hour later. I woke up with similar symptoms at approximately 830am on 1/1/2021 took an additional dose of advil and tylenol and slept till 12p. I woke up with a bad headache and coughing fits similar to when I had covid back in March. I went to an urgent care who assessed me and ordered me to the ER. medical center administered IV fluids, an inhaler, steroids, epinephrine and benadryl and a few hours later my symptoms had subsided for the most part and a dose of IV antibiotics was administered. I am currently admitted for observation with likely discharge on 1/2/2021.
VAERS ID: 917210 (history)   Vaccinated: 2020-12-21
Form: Version 2.0   Onset: 2020-12-27
Age: 30.0   Days after vaccination: 6
Sex: Female   Submitted: 0000-00-00
Location: Utah   Entered: 2021-01-02

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<td>EK5730 / UNK</td>
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Administered by: Private   Purchased by: ?
Symptoms: Blood lactate dehydrogenase increased, C-reactive protein increased, Chest X-ray abnormal, Chills, Computerised tomogram thorax, Cough, Diarrhoea, Dyspnoea, Fibrin D dimer normal, Lung consolidation, Lung infiltration, Lung opacity, Procalcitonin increased, Pyrexia, Respiratory viral panel, SARS-CoV-2 test negative, SARS-CoV-2 test positive, Serum ferritin increased, Skin lesion, Sputum culture, Tachycardia, Tachypnoea, White blood cell count increased
SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Pseudomembranous colitis (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Noninfectious diarrhoea (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Infective pneumonia (broad), Dehydration (broad), Sepsis (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: cyclobenzaprine 10mg po tid mirena 52mg IUD
Current Illness: COVID-19 Dec 2 Not hospitalized, mild symptoms
Preexisting Conditions: Acne Depression Anxiety Obesity BMI 35
Allergies: NKDA
Diagnostic Lab Data: see above
CDC Split Type:
Write-up: 30YO F ICU nurse obesity (BMI 35) COVID 19 on Dec 2 symptoms, Dec 3 tested positive for COVID-19. never hospitalized, outpatient only. 12/12 completed isolation 12/21 received vaccine 12/7 developed Fever chills diarrhea SOB cough Urgent care visit. RLL consolidation on CXR given doxycycline 100 mg po bid worse, fever 40 targetoid lesions to LE
WBC 22K tachycardic tachypneic admitted requiring 2-4L oxygen CT angio without clot, diffuse ground glass and RML dense infiltrate DDimer 7.8 LDH 599 CRP 41 procal 0.67 ferritin 500 Viral respiratory PCR negative Sputum cx with oral flora (pending) COVID ag testing neg COVID PCR 1/3 targets positive (called as indeterminate).

VAERS ID: 917375 (history)
Vaccinated: 2020-12-30
Form: Version 2.0
Onset: 2020-12-30
Age: 60.0
Days after vaccination: 0
Sex: Female
Submitted: 0000-00-00
Location: California
Entered: 2021-01-02

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<td>- / 1</td>
<td>UN / IM</td>
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Administered by: Private
Purchased by: ?

Symptoms: Chest X-ray, Chest pain, Dyspnoea, Echocardiogram, Wheezing
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Asthma/bronchospasm (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: none
Current Illness: none
Preexisting Conditions: none
Allergies: environmental allergies

Diagnostic Lab Data: CXR, echocardiogram-January 1, 2021

Write-up: Within 5 minutes of the vaccine, patient had wheezing, shortness of breath and chest pain. patient given epi x 4, decadron, fluids with some improvement and then hospitalized. IN the hospital, patient continued to have chest pain and satting well but with protracted course and is still in the hospital.
VAERS ID: 917497 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 30.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Georgia Entered: 2021-01-02

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<td>E20140 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Chest pain, Decreased appetite, Dyspnoea, Hypoaesthesia, Myalgia, Pain in jaw, Paraesthesia, Spinal pain
SMQs: Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Peripheral neuropathy (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Osteonecrosis (broad), Arthritis (broad), Tendinopathies and ligament disorders (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: No known
Diagnostic Lab Data: 
CDC Split Type: 
Write-up: Vaccine given at 7:05am 12:00noon, 5 hours later, I started experiencing severe chest pain, jaw pain and shortness of breath in which EMS was called and I was taken to the hospital. Since then, I lost feeling in my hands and feet, numbness and tingling. I've improved however, during my recovery suffered with spinal pain, shortness of breath, very winded, muscle pain and loss of appetite to especially meat.
VAERS ID: 921188 (history)  Vaccinated: 2020-12-17
Form: Version 2.0  Onset: 2020-12-21
Age: 22.0  Days after vaccination: 4
Sex: Male  Submitted: 0000-00-00
Location: Wisconsin  Entered: 2021-01-02

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<td>- / UNK</td>
<td>- / -</td>
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Administered by: Unknown  Purchased by: ?
Symptoms: Platelet count decreased, Thrombotic thrombocytopenic purpura
SMQs: Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (broad), Embolic and thrombotic events, arterial (narrow), Renovascular disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: None known
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: Platelet Count, 21-Dec-2020, 2000 cells per microlitre
CDC Split Type:
Write-up: 22 year old patient with no known allergies or medical history admitted 12/21 with TTP and currently being worked up. Currently unclear if related or unrelated to COVID vaccination, but received Pfizer vaccine Thursday 12/17.

VAERS ID: 917702 (history)  Vaccinated: 2020-12-24
Form: Version 2.0  Onset: 2020-12-29
Age: 36.0  Days after vaccination: 5
Sex: Female  Submitted: 0000-00-00
Location: Pennsylvania  Entered: 2021-01-03

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<td>026L20A / 1</td>
<td>RA / IM</td>
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Administered by: Private     Purchased by: ?
Symptoms: Blood potassium decreased, Chest discomfort, Cold sweat, Dizziness, Flushing, Hypoesthesia, Laboratory test normal, Paraesthesia
SMQs.: Anaphylactic reaction (narrow), Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Vestibular disorders (broad), Hypersensitivity (broad), Hypoglycaemia (broad), Hypokalaemia (narrow), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Vitamin D 2000 iu daily Melatonin 7.5mg daily Mirena (IUD inserted 4/2016)
Current Illness: None
Preexisting Conditions: None
Allergies: Percocet: itching
Diagnostic Lab Data: All tests WNL however my potassium level was low (2.9). Replaced with IV and PO but symptoms still present. Waxing and waning of symptoms.
CDC Split Type:
Write-up: On 12/29: lightheadedness, flushed, felt like I was going to pass out, numbness/tingling down arms and hands, chest tightness, clammy hands and feet.

VAERS ID: 917727 (history)     Vaccinated: 2020-12-29
Form: Version 2.0     Onset: 2020-12-30
Age: 38.0     Days after vaccination: 1
Sex: Male
Location: New York
Submitted: 0000-00-00
Entered: 2021-01-03

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<td>- / -</td>
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Administered by: Private     Purchased by: ?
Symptoms: Bile duct stone, Biliary dilatation, Blood bilirubin increased, Cholelithiasis, Computerised tomogram abnormal, Full blood count, Headache, Jaundice, Liver function test increased, Metabolic function test, Pain in extremity
SMQs.: Liver related investigations, signs and symptoms (narrow), Cholestasis and jaundice of hepatic origin (narrow), Acute pancreatitis (narrow), Biliary system related investigations, signs and symptoms (narrow), Gallbladder related disorders (narrow), Biliary tract disorders (narrow), Gallstone related disorders (narrow), Tendinopathies and ligament disorders
Patient with a history of thalassemia and Gilbert's disease, developed severe jaundice three days after vaccination. Had mild headache and sore arm but otherwise felt well. Had labs drawn - found to have highly elevated bilirubin (23) and LFTs in the 700s. Was admitted to the hospital and had CT showing Cholelithiasis, choledocholithiasis and minimal intrahepatic biliary ductal dilatation. Left hospital and was admitted to another facility where plan was for ERCP and cholecystectomy. Ultimately unclear if at all related to the vaccination - may be coincidental.

**VAERS ID:** 917784

**Form:** Version 2.0

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
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**Administered by:** Other

**Purchased by:** ?

**Symptoms:** Brain natriuretic peptide normal, Cardiac arrest, Cardioversion, Coronary arterial stent insertion, Haematocrit decreased, Haemoglobin normal, Intensive care, Red blood cell count decreased, Resuscitation, Syncope, Thirst, Troponin, White blood cell count increased

**SMQs:** Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Haematopoietic erythropenia (narrow), Haemorrhage laboratory terms (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Embolic and thrombotic events, arterial (narrow), Acute central respiratory depression (broad), Cardiomyopathy (broad), Other ischaemic heart disease (narrow), Hypotonic-hyporesponsive episode (broad), Respiratory failure (broad), Drug reaction with
eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: None

Diagnostic Lab Data: WBC 17.3, RBC 4.43, Hct 40.4, Hgb 14.2, Troponin 0.047, BNP 28

CDC Split Type:

Write-up: Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thirsty, so they stopped at a convenience store on the way home. While there, he felt worse and asked to go to the Emergency room. They chose Methodist to enter. Pt went to triage and while at triage, had syncopal episode, then full arrest. After short course of CPR and defib, he had ROSC. Was taken to cath lab for intervention (stents) and is now in ICU.

VAERS ID: 917835 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2020-12-31
Age: 18.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Minnesota Entered: 2021-01-03

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<td>- / UNK</td>
<td>RA / IM</td>
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</table>

Administered by: Senior Living Purchased by: ?

Symptoms: Chest X-ray normal, Chest pain, Culture urine negative, Electrocardiogram PR shortened, Electrocardiogram normal, Headache, Immunoglobulin therapy, Malaise, Pain, Pain in extremity, Paraesthesia, Pyrexia, SARS-CoV-2 antibody test, SARS-CoV-2 test negative, Troponin increased

SMQs: Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Conduction defects (narrow), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: COVID 19 Positive sept 82020 Few days of malaise headache, no respiratory symptoms or chest pain Seen By cardiology at College no ECHO or Troponins as no symptoms of chest pain or SOB
Preexisting Conditions: H/o Peri Myocarditis hospitalized 11/2/19-11/5/2019 with ST elevation and elevated Troponins, normal biventricular function treated with IVIG F/u in 2020 doing well also seen in Cardiology Clinic 12/1/2020 Doing well, no troponins but Holter placed x 24 hrs normal
Allergies: none H/o Cow’s milk hypersensitivity at 1 mos of age, no problems with milk now
Diagnostic Lab Data: Troponin 4.56 ng/ml after IVIG 2gm/kg 1/2-1/32021 Gammagard 10% (same as 11/2019)
CDC Split Type:
Write-up: Tactile fever, arm pain, headache and malaise in 24 hrs following injection Next day generalized achiness, retrosternal chest pain and bilateral forearm tingly pain similar to Nov 2019 and went to Hospital UC, CXR and EKG normal but with short PR interval on EKG, elevated troponin 3.5 Transferred to hospital troponin 12.1 ng/ml IVIG given SARS IGG positive on admission PCR negative

VAERS ID: 917855 (history) Vaccinated: 2020-12-31
Form: Version 2.0 Onset: 2021-01-01
Age: 47.0 Days after vaccination: 1
Sex: Female
Location: California Submitted: 0000-00-00
Entered: 2021-01-03

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<td>039K20A / 1</td>
<td>LA / IM</td>
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Administered by: Work Purchased by: ?
Symptoms: Chest X-ray, Differential white blood cell count, Electrocardiogram, Full blood count, Human chorionic gonadotropin, Metabolic function test, Palpitations, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No Died? No
Permanent Disability? No Recovered? No
Office Visit? No ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: NONE. HOWEVER I DID TAKE BENADRYL PROPHYLACTICALLY JUST IN CASE BECAUSE I HEARD OF PEOPLE HAVING ADVERSE REACTIONS TO BOTH MODERNA AND PFIZER COVID VACCINE.
Current Illness: NONE
Preexisting Conditions: NONE
Allergies: SULFA
Diagnostic Lab Data: CBC WITH DIFFERENTIAL, COMPREHENSIVE METABOLIC PANEL, HCG QUANTITATIVE, ECG 12 LEAD, CHEST X-RAY, TYLENOL, IV OF NORMAL SALINE
CDC Split Type:
Write-up: ON 1/1/21 THE DAY AFTER I RECEIVED THE VACCINE I WAS TAKING A NAP AND MY WATCH KEPT SENDING ME ALERTS. HOWEVER I DID NOT CHECK MY WATCH UNTIL 5:30 WHEN I WOKE UP AND I FELT LIKE I WAS HAVING HEART PALPITATIONS. I WENT TO THE EMERGENCY ROOM WHERE I WAS TREATED. I WAS TOLD THAT I WAS FEBRILE WITH A TEMPERATURE OF 102. I WAS GIVEN IV FLUIDS, CHEST X-RAY, EKG AND LAB WORK. I WAS RELEASED ON 1/2/21 AT APPROXIMATELY 0030 (MIDNIGHT).

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<td>011J20A / 1</td>
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Administered by: Private    Purchased by: ?
Symptoms: Anaphylactic reaction, Dizziness, Dyspnoea, Erythema, Flushing, Nausea, Palpitations, Respiratory distress, SARS-CoV-2 test negative, Swollen tongue, Wheezing
SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (narrow), Asthma/bronchospasm (broad), Arrhythmia related investigations, signs and symptoms (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Biotin 1 mg PO daily, Levothyroxine 112 mcg PO daily, MVI tablet PO daily, Paroxetine 20 mg PO QHS
Current Illness: none reported
Allergies: cefuroxime (shortness of breath), gadolinium (anaphylaxis, March 2018), iodine (anaphylaxis), quinolones (shortness of breath, "paralyze"), gabapentin (hallucinations), vancomycin (itching)
Diagnostic Lab Data: COVID-19 antigen negative, BP 126/52, pulse 96 on admission to ED
CDC Split Type:
Write-up: Patient is hospital employee who completed screening form for COVID-19 vaccine by answering "no" to all contraindication questions. Approx 10 minutes after receiving COVID-19 vaccine dose # 1, patient was still in vaccine clinic area and complained of dizziness, palpitations and flushing. I observed patient fanning herself with papers. She was escorted out of the immediate clinic room, and assessed by paramedics present as having an anaphylactic reaction. Epinephrine 0.3 mg IM and diphenhydramine 50 mg IV given in clinic, Rapid Response was called overhead and patient immediately transported down the hall to the Emergency Dept. In ED, pt was noted as having swollen tongue, large areas of erythema on face, arms and chest, shortness of breath, nausea, dizziness (per ED physician notes). Pt reported being hospitalized in ICU with COVID disease more than 3 months ago, including intubation (not treated at this hospital), and has been back at work since August 2020. ED physical exam noted bilateral wheezing and patient in acute distress. In ED, pt administered racemic epinephrine 2.25% 0.5 mL via neb, epinephrine 0.3 mg IM, diphenhydramine 50 mg IV, Solu-Medrol 125 mg IV, famotidine 20 mg IV and epinephrine 5 mg/250 mL IV drip (started at 0.118 mcg/kg/min). Acute symptoms reported to resolve in ED. COVID test was negative. ED physician discovered that pt had history of multiple medications, including previous anaphylactic reaction to radiocontrast dye requiring intubation (which was not disclosed on the vaccine screening form). Pt admitted to Telemetry floor for observation. Overnight course was unremarkable, and patient was discharged the following day with prescription for Prednisone taper and prescription for Epi-pen. Advised not to return for second dose of COVID vaccine. EMR updated to reflect possible anaphylactic reaction to Moderna COVID-19 vaccine.

VAERS ID: 917961 (history) Vaccinated: 2020-12-31
Form: Version 2.0 Onset: 2020-12-31
Age: 54.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: California Entered: 2021-01-03

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Administered by: Work  
Purchased by: ?

Symptoms: Angiogram cerebral, Aphasia, Arteriogram carotid, Blood magnesium, Blood thyroid stimulating hormone, Brain natriuretic peptide, C-reactive protein, Chest X-ray, Computerised tomogram head, Culture urine, Differential white blood cell count, Dyspnoea, Dyspnoea exertional, Electrocardiogram, Fibrin D dimer, Full blood count, Glycosylated haemoglobin, Lipids, Magnetic resonance imaging brain, Metabolic function test, Perfusion brain scan, Platelet count, Red blood cell sedimentation rate, Respiratory viral panel, SARS-CoV-2 test, Scan with contrast, Tachycardia, Tachypnoea, Troponin I, Ultrasound kidney, Urine analysis

SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Respiratory failure (broad), Infective pneumonia (broad), Dehydration (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
  Extended hospital stay? No
Previous Vaccinations:


Current Illness: June 22, 2020: COVID19 positive July 2020: Diagnosed with restrictive airway disease, small airway disease, lung nodules November 11, 2020: STEMI, required angioplasty and stent placement

Preexisting Conditions: HTN Conditions highly related to COVID19 infection per provider: Restrictive airway & small airway disease CAD Depression Anxiety

Allergies: Losartan


**CDC Split Type:**

**Write-up:** I suffer from lingering SOB with exertion after COVID infection. On the night of 12/31/2020 I began to feel more SOB than usual and was unable to correct my SOB with rescue inhaler. Became more SOB with exacerbated tachycardia and tachypnea, My family had to call 911 because I became aphasic and showing signs of possible stroke. I was taken to the ER and admitted for respiratory recovery and to rule out stroke. The stroke was ruled out and I recovered with IV prednisone therapy, twice daily and supplemental oxygen. Released after HR, BP, & respiratory effort returned to normal: 01/03/2021

---

**VAERS ID:** 918034 (history)

**Form:** Version 2.0

**Age:** 35.0

**Sex:** Female

**Location:** Michigan

**Vaccinated:** 2020-12-23

**Onset:** 2020-12-25

**Days after vaccination:** 2

**Submitted:** 0000-00-00

**Entered:** 2021-01-03

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<td>EJ1685 / 1</td>
<td>LA / IM</td>
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**Administered by:** Pharmacy  
**Purchased by:** ?

**Symptoms:** Exposure during pregnancy, Foetal death, Foetal heart rate abnormal, Foetal hypokinesia, Premature delivery, Stillbirth, Ultrasound Doppler, Ultrasound foetal

**SMQs:** Pregnancy, labour and delivery complications and risk factors (excl abortions and stillbirth) (narrow), Foetal disorders (narrow), Termination of pregnancy and risk of abortion (narrow)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, 1 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Advair, Pulmocort, levothyroxine, pepcid, prenatal vitamins, singulair, aspirin

**Current Illness:** None

**Preexisting Conditions:** Asthma

**Allergies:** None

**Diagnostic Lab Data:** Fetal doppler and fetal ultrasound on 12/26/2020

**CDC Split Type:**
I was 28 weeks and 5 days pregnant when I received the first dose of the COVID19 vaccine. Two days later (12/25/2020 in the afternoon), I noticed decreased motion of the baby. The baby was found to not have a heartbeat in the early am on 12/26/2020 and I delivered a 2lb 7oz nonviable female fetus at 29 weeks gestation. I was 35 years old at the time of the fetal demise and the only pregnancy history for this pregnancy included a velamentous cord insertion that was being closely monitored by a high risk OB. My estimated due was March 12, 2021.

VAERS ID: 918051 (history)  Vaccinated: 2020-12-30
Form: Version 2.0  Onset: 2021-01-01
Age: 33.0  Days after vaccination: 2
Sex: Female  Submitted: 0000-00-00
Location: New Jersey  Entered: 2021-01-03

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Administered by: Private  Purchased by: ?
Symptoms: Abdominal pain, Appendicectomy, Appendicitis, Computerised tomogram abdomen abnormal, Laboratory test, Liver function test, Ultrasound abdomen, Ultrasound pelvis
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: prenatal vitamin
Current Illness: n/a
Preexisting Conditions: n/a
Allergies: n/a
Diagnostic Lab Data: Liver panel and chemistry lab: 1/1/21 Abdominal ultrasound: 1/1/21 Abdominal CT scan: 1/1/21 Pelvic Ultrasound: 1/2/21

Write-up: At around 40 hours post vaccination, developed severe abdominal pain and went to an emergency room for evaluation on 1/1/21. Abdominal pain was eventually diagnosed as appendicitis requiring appendectomy on 1/2/21. Emergency room visit and hospital discharged patient early on 1/2/21. It was then determined that the on-call team covering misread the CT scan and acute appendicitis was found. Patient then went to Medical Center on 1/2/21 for appendectomy and was discharged later that night following operation.
**VAERS ID:** 918084 (history)  
**Vaccinated:** 2020-12-21  
**Form:** Version 2.0  
**Onset:** 2021-01-03  
**Age:** 61.0  
**Sex:** Male  
**Location:** California  
**Days after vaccination:** 13  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-04

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**Administered by:** Military  
**Purchased by:** ?

**Symptoms:** COVID-19 pneumonia, Chest X-ray abnormal, Exposure to SARS-CoV-2, Respiratory symptom, SARS-CoV-2 test positive  
**SMQs:** Cardiomyopathy (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 4 days  
**Extended hospital stay?** No

**Previous Vaccinations:**  
**Other Medications:** Micardis 40mg daily, Norvasc 10mg daily, Zocor 40 mg daily  
**Current Illness:** None reported  
**Preexisting Conditions:** HTN Hyperlipidemia  
**Allergies:** NKDA  
**Diagnostic Lab Data:** NP swab positive for COVID-19 by PCR on 29 Dec 2020. CXR c/w bilat pneumonia on 03 Jan 2021.

**CDC Split Type:**  
**Write-up:** Hospitalized with COVID-related pneumonia on 03 Jan 2021. Close contact exposure on 25 Dec, with positive COVID PCR test on 29 Dec... managed as outpatient until respiratory sxms prompted hospitalization on 03 Jan. Care team anticipates at least 4 inpatient days... but patient remains hospitalized at date of this report.

---

**VAERS ID:** 918086 (history)  
**Vaccinated:** 2021-01-04  
**Form:** Version 2.0  
**Onset:** 2021-01-04  
**Age:** 31.0  
**Sex:** Male  
**Location:** Unknown  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-04

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<th>Vaccination / Manufacturer</th>
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COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 025120-2A / 1 LA / IM

Administered by: Military    Purchased by: ?
Symptoms: Electrocardiogram abnormal, Intensive care, Sinus tachycardia, Supraventricular tachycardia
SMQs: Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
    Extended hospital stay? No
Previous Vaccinations: 2016, Age 27, Flu Vac QS 2016
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: Flu Vaccine
Diagnostic Lab Data: EKG- Intermittent SVT with sinus tachycardia
CDC Split Type:
Write-up: Patient developed SVT 15 minutes after receiving vaccine. Admitted to ICU. ER presentation: BP: 160/109 heart rate 132. No e/o anaphylaxis or allergic reaction.

VAERS ID: 918200 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 27.0 Days after vaccination: 0
Sex: Female
Location: Florida Submitted: 0000-00-00
Entered: 2021-01-04

Vaccination / Manufacturer | Lot / Dose | Site / Route
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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK9231 / 1 | LA / IM

Administered by: Private    Purchased by: ?
Symptoms: Anxiety, Blood chloride increased, Blood phosphorus decreased, Blood potassium decreased, Blood thyroid stimulating hormone normal, Cardiac telemetry normal, Chest X-ray normal, Computerised tomogram thorax normal, Condition aggravated, Dizziness, Echocardiogram normal, Ejection fraction normal, Electrocardiogram ambulatory, Fatigue, Feeling hot, Fibrin D dimer, Flushing, Gait disturbance, Haemoglobin decreased, Pallor, Palpitations, Presyncope, Tachycardia, Troponin normal
SMQs: Anaphylactic reaction (broad), Haematopoietic erythropenia (broad), Peripheral neuropathy (broad), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and
symptoms (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (broad), Tubulointerstitial diseases (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Unknown
Current Illness: Unknown

Preexisting Conditions: Patient with history of syncope which was attributed to anemia (6-8 episodes in the past). No history of syncope with injections. patient reports increased stress at home and anxiety.
Allergies: None

Diagnostic Lab Data: D- Dimer - 0.5 CT Scan for pulmonary embolism - negative TSH - 2.892 BNP with low potassium (3.3), high chloride (108) and low phos (2.6). All other values within normal limits. Echocardiogram - normal with normal EF Chest xray - normal Troponin negative x3 Hgb 11.7

CDC Split Type:
Write-up: Pfizer-BioNTech COVID-19 Vaccine EUA - Patient witnessed another patient with syncope prior to her injection. She was already anxious about receiving vaccination and this increased her anxiety, though she proceeded with immunization. Patient was in 15 min observation window in a chair and began to feel light-headed like she may pass out. A SWAT was called. With RN assistance, patient was lowered to the floor, with no loss of consciousness. Patient was pale and reported anxiety, racing /bounding heart, and felt hot with facial flushing. Patient was transferred to ED and was noted to be tachycardic (120s), but dropped to 80s. She noted that this episode felt different than her prior syncopal episodes associated with anemia. Patient was observed for 5 hours and discharged to home. Patient returned to ED roughly 2.5 hours later complaining of continued dizziness and unsteady gate. Patient was pale and anxious. Patient reported had not eaten/drank enough during her shift and received vaccine immediately post a stressful shift. Additionally, patient witnessed another patient have syncopal episode prior to her receiving her vaccine which made her anxious. Patient was given IV fluids and had electrolytes replacement. Patient additionally received diazepam. Patient was discharged at 2358 on 12/23. Patient returned to ED on 12/24 at 0239 complaining of near syncope and lightheadedness. Patient had tachycardia and self-reported palpitations. Received IV fluids and observation on telemetry with no rhythm disturbance. Patient discharged 1428 on 12/24. On 12/29, patient returned to ED at 0326 for continued dizziness, fatigue and near syncope. Was admitted for cardiac evaluation. Noted to have unprovoked tachycardia and was discharged with a Halter Monitor to evaluate cardiac symptoms. patient was discharged 12/31 at 1619
VAERS ID: 918211 (history) Vaccinated: 2020-12-31  
Form: Version 2.0 Onset: 2020-12-31  
Age: 52.0 Days after vaccination: 0  
Sex: Female Submitted: 0000-00-00  
Location: Florida Entered: 2021-01-04

**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK9231 / 1 | LA / IM

Administered by: Private  
Purchased by: ?

**Symptoms:** Dysphonia, Eyelids pruritus, Intensive care, Paraesthesia oral, Pruritus, Rash, Rash maculo-papular, Swelling face

**SMQs:** Anaphylactic reaction (broad), Angioedema (narrow), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Periorbital and eyelid disorders (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 2 days  
**Extended hospital stay?** No  

**Previous Vaccinations:**

**Other Medications:** Unknown  
**Current Illness:** Unknown  

**Preexisting Conditions:** Asthma, OSA, history of anaphylaxis, GERD

**Allergies:** Benzonatate - brochospasm and laryngospasm requiring intubation NSAIDS - petichiae Keflex - rash - tolerates cefepime Lanolin - rash Septra - rash

**Diagnostic Lab Data:** benadryl multiple rounds of epinephrine methylprednisolone famotidine

**CDC Split Type:**

**Write-up:** Pfizer-BioNTech COVID-19 Vaccine EUA - Patient with history of anaphylaxis requiring intubation to benzonatate. Patient answered "no" to questionnaire about allergic reactions prior to vaccination. 11 minutes after vaccination, patient reported tingling of lips and swelling of face. Developed hoarseness. SWAT was called and patient given benadryl and taken to ED (1055). Patient received steroids and H1/H2 blockers in addition to epinephrine. Patient brought to ICU for monitoring. Patient continued on therapy and was discharged 1/2 at 1113. Patient returned to ED on 1/3 at 1558 with macular papular rash on leg, chest and back with itching on eyelids and face. No respiratory involvement. Patient given benadryl and prednisone and discharged from ED at 2016.
VAERS ID: 918409 (history)  Vaccinated: 2020-12-18
Form: Version 2.0  Onset: 2020-12-25
Age: 38.0  Days after vaccination: 7
Sex: Male  Submitted: 0000-00-00
Location: California  Entered: 2021-01-04

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<th>Site / Route</th>
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<td>EH9899 / 1</td>
<td>LA / IM</td>
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Administered by: Private  Purchased by: ?
Symptoms: Asthenia, Cough, Dyspnoea, Fatigue, Intensive care, SARS-CoV-2 test positive, Sinus tachycardia
SMQs: Anaphylactic reaction (broad), Supraventricular tachyarrhythmias (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Infective pneumonia (broad), Dehydration (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 7 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: no known allergies
Diagnostic Lab Data: 12/24: SARS CoV 2 RNA, RT PCR (+)
CDC Split Type:
Write-up: Patient complained of increased shortness of breath, generalized weakness and fatigue with mild cough worsening today and was admitted on 12/25/20. Patient is an employee of the hospital in the ICU and received the covid-19 vaccine on 12/25/20. Patient believes symptoms started after the vaccination. On admission, patient was in sinus tachycardia with O2 saturation 91% on room air. Tested SARS CoV 2 RNA, RT PCR positive on 12/24/20. Transferred to ICU for closer monitoring after transitioning to high flow nasal cannula on 12/26. Patient recovered and discharged on 12/31/20.
**VAERS ID:** 918552  
**Form:** Version 2.0  
**Age:** 39.0  
**Sex:** Female  
**Location:** Illinois  
**Vaccinated:** 2020-12-30  
**Onset:** 2021-01-01  
**Days after vaccination:** 2  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-04

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**Administered by:** Private  
**Purchased by:** ?  
**Symptoms:** Chills, Diarrhoea, Influenza virus test negative, Nausea, Pyrexia, SARS-CoV-2 test negative  
**SMQs:** Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 1 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** None  
**Current Illness:** Lupus  
**Preexisting Conditions:** Lupus  
**Allergies:** NKA  
**Diagnostic Lab Data:** Pt was tested for Influenza and COVID and lab work was normal  
**CDC Split Type:**  
**Write-up:** Severe diarrhea, cold chills, 101 fever, and nausea

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**VAERS ID:** 918608  
**Form:** Version 2.0  
**Age:** 78.0  
**Sex:** Female  
**Location:** Ohio  
**Vaccinated:** 2020-12-28  
**Onset:** 2020-12-29  
**Days after vaccination:** 1  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-04

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<td>EL0140 / 1</td>
<td>LA / IM</td>
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</table>
Administered by: Senior Living    Purchased by: ?
Symptoms: Dyspnoea, Hyperhidrosis, Injection site cellulitis, Injection site erythema, Injection site pain, Injection site swelling, Injection site warmth, Pyrexia, Retching, SARS-CoV-2 test negative
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: OTC: vitamin D, cranberry caps, polycarbophil, senokot, duloxetine, estradiol VC, furosemide, metoprolol, mirabegron ER, rivaroxaban
Current Illness: none
Preexisting Conditions: HTN, T2DM, dementia, Hx PE/DVT
Allergies: codeine-N/V, darvan/sulfa drugs- no reaction documented
Diagnostic Lab Data: Rapid COVID-19 test on admission- Negative was COVID positive in July 2020
CDC Split Type:
Write-up: "Pfizer-BioNTech COVID-19 Vaccine" 12/29 patient developed SOB, fever tmax 103 degrees F, diaphoretic, dry heaves all started approximately 16 hours after vaccination given. patient then transferred to Hospital for further treatment and observation. 12/30 seen at injection site- erythema, swelling, warmth and tenderness Discharged back to home on 1/1 with RX for cephalexin to treat cellulitis of injection site

VAERS ID: 918740 (history)     Vaccinated: 2020-12-22
Form: Version 2.0     Onset: 2020-12-22
Age: 36.0     Days after vaccination: 0
Sex: Unknown
Location: Unknown     Submitted: 0000-00-00
Entered: 2021-01-04

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</table>
Symptoms: Lip pruritus, Throat irritation
SMQs: Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Food allergy (known allergies: Shrimp)
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020508654

Write-up: Scratchy throat; itching lips; This is a spontaneous report from a non-contactable nurse. A 36-year-old patient of an unspecified gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), lot number EK5730, via an unspecified route of administration on Right arm from 22Dec2020 to 22Dec2020 as single dose for COVID-19 immunization. Medical history included food allergy (Shrimp). The patient"s concomitant medications were not reported. The patient experienced scratchy throat and itching lips for approximately 1.5 hours starting 20 mins post vaccine on 22Dec2020. The event caused prolonged hospitalization. The outcome of the events was recovered on 22Dec2020. No follow-up attempts are possible. No further information is expected.; Sender"s Comments: Based on temporal association, a possible contributory role of suspect BNT162B2 vaccine cannot be excluded for reported events throat irritation and lip itching. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

VAERS ID: 918741 (history)
Form: Version 2.0
Age: 74.0
Sex: Male
Location: South Carolina
Vaccinated: 2020-12-15
Onset: 2020-12-15
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2021-01-04

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<td>- / UNK</td>
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Symptoms: Ataxia, Chills, Confusional state, Decreased appetite, Delirium, Fatigue, Headache, Hypoxia, Incontinence, Myalgia, Pyrexia, SARS-CoV-2 test

SMQs: Rhabdomyolysis/myopathy (broad), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (narrow), Noninfectious meningitis (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Dehydration (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Diabetes mellitus
Allergies:
Diagnostic Lab Data: Test Name: tested for COVID-19 via nasal swab; Result Unstructured Data: Test Result: Unknown Result

CDC Split Type: USPFIZER INC 2020509173

Write-up: delirious; hypoxic; fever; ataxic; incontinent; confused; Chills; HA; anorexia/had no appetite; myalgias; extreme fatigue; slept all and had no appetite; This is a spontaneous report from a contactable physician. A 74-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 15Dec2020 16:00 at single dose for COVID-19 immunization. Medical history included diabetes mellitus (DM). The patient has no known allergies. The patient's concomitant medications were not reported. He was an ER doctor and the medical director of his hospital. The patient was asymptomatic when he got the vaccine on 15Dec2020. 3 hours after the vaccine he began to get chills, HA, anorexia, myalgias, and extreme fatigue. This worsened and he slept all and had no appetite. On 19Dec2020 he woke up delirious with a fever and was ataxic, hypoxic, incontinent, and confused. The patient was hospitalized due to the events on 15Dec2020. The events also caused prolonged hospitalization due to the events. The patient was not diagnosed with COVID prior to vaccination. The patient was tested for COVID via nasal swab post vaccination with unknown results. The patient did not receive any other vaccines within 4 weeks prior to COVID vaccine. The outcome of the events was not recovered. Therapeutic measures were taken as a result of the events as the patient required oxygen, plasma, and remdisivir. The batch/lot numbers for the vaccine, BNT162B2, were not provided and will be requested during follow up.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of reported serious events might not be excluded, considering the plausible temporal relationship. Fever, chills, headache, fatigue and muscle
pain are the known adverse event profile of the suspect product. More information such as
detailed underlying medical conditions and concomitant medications are needed for fully
medical assessment. The impact of this report on the benefit/risk profile of the Pfizer product
is evaluated as part of Pfizer procedures for safety evaluation, including the review and
analysis of aggregate data for adverse events. Any safety concern identified as part of this
review, as well as any appropriate action in response, will be promptly notified to Regulatory
Authorities, Ethics Committees and Investigators, as appropriate.

| VAERS ID: | 918758 (history) | Vaccinated: | 2020-12-21 |
| Form: | Version 2.0 | Onset: | 2020-12-22 |
| Age: | 61.0 | Days after vaccination: | 1 |
| Sex: | Female | Submitted: | 0000-00-00 |
| Location: | New Hampshire | Entered: | 2021-01-04 |

**Vaccination / Manufacturer**

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<td>EH9899 / 1</td>
<td>LA / OT</td>
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**Administered by:** Private  
**Purchased by:** ?  
**Symptoms:** Lymphadenopathy, SARS-CoV-2 test negative, Small intestinal obstruction  
**SMQs:** Gastrointestinal obstruction (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 3 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** ; ; COLESTID; STELARA; B12 [CYANOCOBALAMIN]  
**Current Illness:**  
**Preexisting Conditions:** Medical History/Concurrent Conditions: Crohn's disease  
**Allergies:**  
**Diagnostic Lab Data:** Test Date: 20201223; Test Name: Nasal Swab; Test Result: Negative  
**CDC Split Type:** USPFIZER INC2020512697  
**Write-up:** Small bowel obstruction with diffuse bowel and pelvic lymphadenopathy 36 hours after injection; Small bowel obstruction with diffuse bowel and pelvic lymphadenopathy 36 hours after injection; This is a spontaneous report from a contactable physician (patient). A 61-years-old female patient (not pregnant) received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number: EH9899), intramuscularly on 21Dec2020 12:30 to at single dose on left arm for COVID-19 immunization in hospital. Medical history included crohn's disease. No known allergies. Concomitant medications within 2 weeks of vaccination included estradiol, progesterone, colestipol hydrochloride (COLESTID), ustekinumab
(STELARA), cyanocobalamin (B12). The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient experienced small bowel obstruction with diffuse bowel and pelvic lymphadenopathy 36 hours after injection on 22Dec2020 22:00 with outcome of recovered in Dec2020. The adverse events resulted in emergency room/department or urgent care, hospitalization for 3 days. Therapeutic measures were taken as a result of event included inpatient observation, nothing by mouth (reported as NPO), intravenous fluids. No COVID prior vaccination, COVID test nasal swab was negative on 23Dec2020 post vaccination. It was not reported as serious.; Sender"s Comments: There is not a reasonable possibility that reported events small bowel obstruction and lymphadenopathy are related to BNT162B2 vaccine. The patient had underlying Crohn"s disease, which put patient at risk of developing the event. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

VAERS ID: 918763 (history) Vaccinated: 0000-00-00
Form: Version 2.0 Onset: 0000-00-00
Age: Submitted: 0000-00-00
Sex: Female Entered: 2021-01-04
Location: Florida

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<td>- / UNK</td>
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Administered by: Unknown Purchased by: ?
Symptoms: Unevaluable event
SMQs:
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: Medical History/Concurrent Conditions: Guillain Barre syndrome (Caller had Guillain Barre in 2011 at age 65)
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: USPFIZER INC2020513681
Write-up: She was hospitalized for a month occurred after a flu two months prior and a stomach flu 2-3 weeks prior; She was hospitalized for a month occurred after a flu two months prior and a stomach flu 2-3 weeks prior; This is a spontaneous report from a contactable consumer. A 75-year-old female patient received bnt162b2 (BNT162B2, lot number and expiry date were not reported), via an unspecified route of administration on an unspecified date at a single dose for covid-19 vaccination. Medical history included guillain-barre syndrome from 2011 at the age of 65 and Levaquin allergy. The patient's concomitant medications were not reported. On an unspecified date, the patient was hospitalized for a month that occurred after a flu two months prior and a stomach flu 2-3 weeks prior. The outcome of the events was unknown. Information about lot/batch number has been requested.

VAERS ID: 918770 (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-22
Age: 54.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Georgia  Entered: 2021-01-04

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<td>ELO140 / 1</td>
<td>LA / OT</td>
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Administered by: Work  Purchased by: ?
Symptoms: Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020514065
Write-up: Difficulty breathing; This is a spontaneous report from a contactable pharmacist. A 54-year-old female patient received her first dose of intramuscular BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 22Dec2020 at 04:15 PM at single dose in left arm for COVID-19 immunisation at the age of 54-year-old. Lot number was ELO140. Medical history was unknown, concomitant medications were unspecified. Patient was not pregnant at the
time of vaccination. On 22Dec2020 at 04:30 PM, the patient experienced difficulty in breathing, and she was hospitalized for one day. The patient was treated with EPI for the event. The patient was recovering from the event.; Sender"s Comments: Based on the compatible temporal association, the Company considers the event difficulty in breathing is possibly related to vaccination with BNT162B2. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

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<td>Sex: Male</td>
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Administered by: Unknown   Purchased by: ?
Symptoms: Abdominal pain, Blood pressure increased, Hypertension, Nausea
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypertension (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: No
Other Medications: 
Current Illness: 
Preexisting Conditions: Medical History/Concurrent Conditions: Diabetic; Irritable bowel
Allergies: 
Diagnostic Lab Data: Test Date: 202012; Test Name: blood pressure; Result Unstructured Data: Test Result:high
CDC Split Type: USPFIZER INC2020514106
Write-up: abdominal pain; nausea; high blood pressure; This is a spontaneous report from a contactable consumer. A 93-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL0140), via an unspecified route of administration on 22Dec2020 at a single dose for COVID-19 immunization. Medical history included diabetic and irritable bowel. The patient"s concomitant medications were not reported. The patient
received the COVID vaccine and had abdominal pain, nausea and high blood pressure within 12 to 18 hours of vaccine received. The events lead to nursing home to emergency room and admitted to hospital. The patient was hospitalized due to events since 23Dec2020. Outcome of the events was recovering.

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<td>Days after vaccination: 0</td>
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<td>Submitted: 0000-00-00</td>
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<td>LA / OT</td>
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**Administered by:** Unknown  
**Purchased by:** ?  

**Symptoms:** Aphasia, Balance disorder, Cardiac assistance device user, Cardiac disorder, Cerebrovascular accident, Computerised tomogram, Dyskinesia, Dysphemia, Echocardiogram, Ejection fraction decreased, Hemiparesis, Hypoaesthesia, Impaired work ability, Magnetic resonance imaging, Muscle fatigue, Neurological examination abnormal, Occupational exposure to SARS-CoV-2, Paraesthesia, Speech disorder, Ventricular tachycardia  

**SMQs:** Torsade de pointes/QT prolongation (narrow), Rhabdomyolysis/myopathy (broad), Cardiac failure (narrow), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Ventricular tachyarrhythmias (narrow), Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Torsade de pointes, shock-associated conditions (narrow), Dementia (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Dyskinesia (narrow), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (narrow), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow), Vestibular disorders (broad), COVID-19 (narrow), Sexual dysfunction (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 4 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:**
Current Illness:

Preexisting Conditions: Comments: List of non-encoded Patient Relevant History: Patient

Other Relevant History 1: None

Allergies:

Diagnostic Lab Data: Test Name: CT; Result Unstructured Data: Test Result:Unknown result; Test Name: Echocardiogram; Result Unstructured Data: Test Result:Unknown result; Test Name: Ejection fraction; Test Result: 25 %; Test Name: MRIs; Result Unstructured Data: Test Result:Unknown result

CDC Split Type: USPFIZER INC2020516120

Write-up: left sided weakness; it has weakened his heart; stutter; severe stroke like symptoms; Ventricular tachycardia/help keep his heart rate at bay; Loss of balance; extreme numbness and tingling in left hand and foot; tingling in left hand and foot; oral motor impairment; mouth weakness and not coordinated/mouth is fatigued easily; Issues finding words and trouble speaking; Issues finding words and trouble speaking; Ejection fraction down to 25%; The initial case was missing the following minimum criteria: adverse event. Upon receipt of follow-up information on 28Dec2020, this case now contains all required information to be considered valid. This is a spontaneous report from a contactable other healthcare professional (HCP). A 29-years-old male patient received bnt162b2 (lot number: EJ1685), intramuscular (deltoid left) on 21Dec2020 at 05:30 at 0.3 mL single (first dose) for Covid. Medical history was reported as "none". Concomitant medications were not reported.

The patient previously received Flu vaccine in Oct2020 for immunization. The patient is an Occupational Therapist, and he called to report an adverse event that he experienced with the first dose of the COVID Vaccine. He received the vaccine last Monday, 21Dec2020 at 5:30AM before his shift at work, then 20 minutes later, he was having severe stroke like symptoms. He experienced severe left sided weakness, loss of balance, extreme numbness and tingling in his left hand and foot, he had issues finding his words and he couldn't speak, and he had an oral motor impairment where his mouth was weak and not coordinated. The staff at the hospital did a neurological exam on him, and he failed, so he had to go to the emergency room (ER). The patient added that he was already in the hospital when this happened, and the ER doctors suspected that he had a CVA, and they gave him TPA to prevent any permanent brain damage and it worked. The patient then added that due to the shock of this whole event, from everything that happened, it has weakened his heart. Reportedly, he is a healthy 29 year old man, with no preexisting conditions, and he works out, and he has no heart conditions, but he had to get a cardiology follow up a few days after he got the vaccine, because he started going in to Ventricular Tachycardia, which he had never had in his life. So, the doctors at the hospital went ahead and did an Echocardiogram and an EKG, and he was told that his Ejection Fraction is down to 25%. He stated his heart is so weak, that he cannot work right now, but the structure of his heart is fine and has not had any damage. The hospital staff thought that maybe the patient had a chronic heart issue that he just did not know about, and that the stress of this event maybe made it kick into overdrive, but he states that the cardiologist said that was not the case, because the structure of his heart is okay, it should be reversible. He stated that he is hoping he will heal up good, because he is young and has no pre-existing conditions. He added that his heart is in such a state right now; he has to wear an external defibrillator. The patient stated that all these happened about 20 minutes after he received the vaccine, and he was admitted to the hospital from 21Dec2020 to 25Dec2020. His neurological symptoms have resolved except that he has a stutter that he did not have before and his mouth is fatigued.
easily, so he has to slow down when he is eating, but now he can eat regular for the most part. The patient confirmed that he was not specifically prescribed the product; it was administered to him at his place of work, but it was optional. He stated he considered how he is working with COVID patients every day, and given the circumstance, he thought that it would be a best practice for him to get the vaccine. He had not gone to his primary care doctor in a while because he had been fine and healthy, but he called them and found out that his primary care had retired, so he has to find a new one now. Regarding the issues finding words and trouble speaking, he stated that he has improved, but it is still ongoing, he is just stuck in a plateau zone. With the Ventricular Tachycardia, he stated that this is an ongoing issue, as he has to wear the life vest even though he has no need to activate it yet. He did have one minor bought of the VTach, but because he is a therapist, he knows how to take care of it with relaxation techniques, he knows how to manage it. He had one bought of VTach the evening prior, but he was able to get it under control. The doctors have him on medication to help keep his heart rate at bay. He has never had to use medication before and is on the following medications to help keep his heart rate at bay: Metoprolol 25mg one tablet once daily by mouth and Lisinopril 5mg one tablet once daily by mouth. The VTach has improved, it was good enough he was able to discharge home, but it is still a concern. His cardiologist said that, basically his hope, is that once his body recover from the whole shock of everything, then his ejection fraction will heal, and his heart will heal. He again stated that the doctor told him that the structure of his heart is perfectly fine; he has thick walls in his heart, no leaking valves, and the heart was not conducting any abnormal signals. The doctor just said that right now, his heart is super weak and that it is an acute problem. With the Takotsubo Cardiomyopathy, he states that two doctors mentioned this diagnosis, but he confirmed that he was not actually diagnosed with this issue, he was just diagnosed with Ventricular Tachycardia. The outcome of the ejection fraction down to 25% was unknown to the patient at this time as he has not had another EKG or echocardiogram, but the cardiologist told him that the cardiologist expects that this will not be resolved quickly anyway. The patient confirmed that he did not receive any other vaccines on the same day he received the COVID vaccine. The only other vaccine he had this year was the flu vaccine which he got back in Oct2020. He has gone on to his online portal and there are the bloodwork results and all the imaging results on there from his CTs and MRIs, but he did not see the EKG or Echocardiogram results yet. He does not have this pulled up at this time, but he does have access to this stuff and can provide it later, if requested. He is curious about the next steps from here to how his case is processed. He is also curious if this information would help Pfizer make modifications to the vaccine if it is found that a lot of people are having the same reaction as he did. He is also wondering, given his situation, that probably he is not going to get the second dose, for his safety, but he is wondering what percentage of effectiveness the first dose does having just covered. The events left sided weakness, loss of balance, extreme numbness and tingling in left hand and foot resolved on 25Dec2020; severe stroke like symptoms and oral motor impairment; mouth weakness and not coordinated/mouth is fatigued easily resolved in 2020. The events ventricular tachycardia/help keep his heart rate at bay and issues finding words and trouble speaking were resolving, stutter had not resolved while the outcome of the events it has weakened his heart, and ejection fraction down to 25% was unknown.; Sender’s Comments: The reported information is unclear and does not allowa meaningful assessment of the case. It will be reassessed upon receipt of follow up information. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and
VAERS ID: 918789 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-01
Age: 30.0 Submitted: 0000-00-00
Sex: Female Entered: 2021-01-04
Location: Massachusetts

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
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</table>

Administered by: Unknown Purchased by: ?
Symptoms: Anxiety, Blood pressure increased, Echocardiogram, Heart rate increased, Immediate post-injection reaction, Myocardial necrosis marker increased, Palpitations
SMQs: Neuroleptic malignant syndrome (broad), Myocardial infarction (broad), Arrhythmia related investigations, signs and symptoms (broad), Hypertension (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Hypoglycaemia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: Test Date: 20201218; Test Name: blood pressure; Result Unstructured Data: Test Result:elevated; Test Date: 202012; Test Name: echocardiogram; Result Unstructured Data: Test Result:Unknown results; Test Date: 202012; Test Name: heart rate; Result Unstructured Data: Test Result:racing; Test Date: 20201218; Test Name: heart rate; Result Unstructured Data: Test Result:accelerated; Test Date: 202012; Test Name: heart enzymes; Result Unstructured Data: Test Result:elevated
CDC Split Type: USPFIZER INC2020516465
Write-up: She had an immediate reaction of accelerated heart rate and elevated blood pressure; She has very slightly elevated heart enzymes.; She had an immediate reaction of accelerated heart rate and elevated blood pressure; She"s very anxious and very anxious tonight being alone at the hospital.; This is a spontaneous report from a contactable consumer (patient"s father). A 30-years-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 18Dec2020 at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient had an immediate reaction of
accelerated heart rate and elevated blood pressure. She was monitored for an hour and it subsided. On unspecified date in Dec2020 at 1:00am in the morning she had racing heart rate and went to ER. She was still in hospital. Things were not entirely stabilized. She had very slightly elevated heart enzymes in Dec2020 with outcome of unknown. They keep her overnight for an echocardiogram in morning. The patient was very anxious being alone at the hospital. Caller questioned if this has been reported with the vaccine. Lot/Batch and Expiry date has been requested.

VAERS ID: 919036 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-28
Age: 89.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: Indiana  Entered: 2021-01-04

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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>- / IM</td>
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</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Bladder catheter replacement, Dehydration, Hyperhidrosis, Loss of consciousness, Nausea, Speech disorder, Vomiting
SMQs:; Torsade de pointes/QT prolongation (broad), Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypoglycaemia (broad), Dehydration (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: Unknown
Current Illness: unknown
Preexisting Conditions: Unknown
Allergies: Sulfa antibiotics
Diagnostic Lab Data:
CDC Split Type:
Write-up: Patient with extreme nausea and vomiting that started soon after receiving the Moderna vaccine. Patient with loss of consciousness, diaphoresis and garbled speech during
a foley catheter exchange thought to be from dehydration. Patient was admitted to Hospital for observation for 2 days

<table>
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<tr>
<th>VAERS ID: 919087 (history)</th>
<th>Vaccinated: 2020-12-23</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-27</td>
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<tr>
<td>Age: 50.0</td>
<td>Days after vaccination: 4</td>
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<tr>
<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
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<td>Location: California</td>
<td>Entered: 2021-01-04</td>
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**Vaccination / Manufacturer**

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<tr>
<th>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>UNKNOWN / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Other   Purchased by: ?

**Symptoms:** Antinuclear antibody negative, C-reactive protein increased, Fibrin D dimer increased, Hepatitis C antibody negative, Pericarditis, Red blood cell sedimentation rate normal, Troponin T increased

**SMQs:** Haemorrhage laboratory terms (broad), Systemic lupus erythematosus (broad), Myocardial infarction (narrow), Chronic kidney disease (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad)

**Life Threatening?** Yes
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** Yes
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** No
**Hospitalized?** Yes, 1 days
  **Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Aspirin daily

**Current Illness:** No illness one month prior to or at time of vaccination

**Preexisting Conditions:** None

**Allergies:** NKDA

**Diagnostic Lab Data:** 12/29 ANA negative. CRP 7.2 mg/dL. ESR 8 mm/hr. 12/28 Troponin T 67 ng/L. Hep C Ab = Non reactive. D-dimer 319 ng/mL.

**CDC Split Type:**

**Write-up:** Acute Pericarditis. Patient was admitted from 12/27-12/28/2020 at hospital by cardiology team who strongly felt the acute pericarditis was due to the Pfizer Vaccine (Dr. was senior cardiologist).
VAERS ID: 919129 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 46.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Hawaii Entered: 2021-01-04

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Blood test, Computerised tomogram, Hypoaesthesia, Magnetic resonance imaging, Paraesthesia
SMQs: Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Losortan HCTZ, Claritin
Current Illness: no
Preexisting Conditions: Hypertension
Allergies: Vicodin
Diagnostic Lab Data: Blood work, CT, MRI to rule out the possibility of a stroke
CDC Split Type: vsafe
Write-up: After the 15 min monitoring, I went back to work 15 min later. the left side of my face started tingling which went to a numbing feeling down the left side of my body affecting my neck, shoulder, arm, elbow and up the upper left torso. My face and neck was numb for about 48 hrs and the rest came back to sensation within 24 hrs. D/T the numbness I was admitted into the hospital for a 24hr observation.

VAERS ID: 919152 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-27
Age: 41.0 Days after vaccination: 6
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-04

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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</table>

VAERS ID: 919152 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-27
Age: 41.0 Days after vaccination: 6
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-04
**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**  
**Dose** | **Route**  
---|---  
EK5730 / 1 | - / IM

Administered by: Private  
Purchased by: ?

**Symptoms:** Appendicectomy

**SMQs:**
- Life Threatening? No
- Birth Defect? No
- Died? No
- Permanent Disability? No
- Recovered? No
- Office Visit? No
- ER Visit? No
- ER or Doctor Visit? No
- Hospitalized? Yes, ? days
  - Extended hospital stay? No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:**

**Preexisting Conditions:**

**Allergies:**

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** "Pfizer-BioNTech COVID-19 Vaccine EUA." Patient received first dose of vaccine on 12/21/2020. Patient called on 1/3/2021 to notify that she developed symptoms on 12/27/2020 and had an appendectomy on 12/28/2020 at another facility. Patient also reports that CDC V-Safe Application was used to report event as well. Patient reports that she is recovering well.

**VAERS ID:** [919154](https://vaers.hhs.gov/)  
**Form:** Version 2.0  
**Age:** 38.0  
**Sex:** Female  
**Location:** Iowa  
**Vaccinated:** 2020-12-29  
**Onset:** 2020-12-29  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-04

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<th>Site / Route</th>
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<tr>
<td><strong>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</strong></td>
<td>025J20-2A / 1</td>
<td>RA / IM</td>
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</table>

Administered by: Private  
Purchased by: ?

**Symptoms:** Computerised tomogram normal, Ear pain, Facial paralysis, Hypoesthesia, Hypoesthesia oral, Pain in extremity, Paraesthesia

**SMQs:** Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious meningitis (broad), Hearing impairment (broad), Tendinopathies and ligament disorders (broad), Sexual dysfunction (broad)

**Life Threatening?** No

**Birth Defect?** No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: N/A
Other Medications: Probiotic
Current Illness: N/A
Preexisting Conditions: Crohns Disease
Allergies: Azithromycin (patient has an upset stomach when taking), patient also has sensitivity when eating chocolate, pineapple or highly processed foods (due to Crohn's Disease)
Diagnostic Lab Data: CT scan done on 1-2-21 -negative for hemorrhage
CDC Split Type:
Write-up: Patients adverse reactions started day of vaccination with right arm pain up to right ear as well as complete tongue numbness. On 1-1-21 patient had increased Bell's Palsy symptoms including; inability to raise left eyebrow, inability to close left eye in its entirety, teeth being numb on left side, and numbness and tingling in left foot and left hand (from palm to fingers). ER physician prescribed on 1-1 Prednisone, Keflex and Valtrex. Patient went to ER again on 1-2-21 with lower extremity numbness on left side that is moving proximally toward her hip. Patient went home on 1-3-21 with an RX for Prednisone as well as Valtrex. Symptoms have improved but have not fully resolved at this time.

VAERS ID: [919230](history)
Form: Version 2.0
Age: 41.0
Sex: Female
Location: Texas
Vaccinated: 2020-12-18
Onset: 2020-12-26
Days after vaccination: 8
Submitted: 0000-00-00
Entered: 2021-01-04

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<tr>
<th>Vaccination / Manufacturer</th>
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Administered by: Other  
Purchased by: ?
Symptoms: SARS-CoV-2 test positive
SMQs: Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No
Previous Vaccinations: unknown
Other Medications: unknown
Current Illness: unknown
Preexisting Conditions: unknown
Allergies: NKA
Diagnostic Lab Data: EE was seen in the emergency room and admitted to Hospital. She remains inpatient today 1/4/21.
CDC Split Type: 
Write-up: Employee received COVID 19 vaccination at 9:45am on 12/30/20. ~15 min. later she developed a rash down her left arm, then down her Rt. arm. about 4 hours later she decided to go to the emergency room for Hearty Palpitations, Fever, Chest discomfort and

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

VAERS ID: [919252](history)  
Vaccinated: 2020-12-30  
Onset: 2020-12-30  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2021-01-04  

Administered by: Private  
Purchased by: ?  
Symptoms: Chest discomfort, Headache, Palpitations, Pyrexia, Rash, Skin discomfort  
SMQs: Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)  
Life Threatening? Yes  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 6 days  
Extended hospital stay? No  
Previous Vaccinations: unknown  
Other Medications: unknown  
Current Illness: unknown  
Preexisting Conditions: unknown  
Allergies: NKA  
Diagnostic Lab Data: She was hospitalized on 01/04 but exact situation unknown. COVID +. Hospitalized at Medical Center.
feeling of generalized sunburn. Later developed severe headache.

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**VAERS ID:** 919320  
**Vaccinated:** 2020-12-22  
**Onset:** 2020-12-22  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-04

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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011J20A / 1</td>
<td>RA / IM</td>
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</table>

**Administered by:** Work  
**Purchased by:** ?

**Symptoms:** Blood test, Dizziness, Hyperhidrosis, Immediate post-injection reaction, Peripheral swelling, SARS-CoV-2 test

**SMQs:** Cardiac failure (broad), Angioedema (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Vestibular disorders (broad), Hypersensitivity (narrow), Hypoglycaemia (broad), COVID-19 (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 1 days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Toperol (high blood pressure) Adderall - 20mg Calcitrol- .5mcg Soduim bycar-650mg

**Current Illness:** Stage 5 Kidney failure

**Preexisting Conditions:** Stage 5 Kidney failure

**Allergies:** Mushrooms Bactriun

**Diagnostic Lab Data:** Blood test, covid test

**CDC Split Type:** vsafe

**Write-up:** Right arm swelling very bad right after shot, next day woke up to get ready to work I started to get light headed, dizzy, sweating, felt like I was going to pass out. My husband then called 911. They took me to Hospital ,I stayed there for a couple hours then released. They told me to stay home and the next day I felt fine. I did a televisit with my Nephrologist (Kidney doctor) the following week.
VAERS ID: **919428**

**Form:** Version 2.0

**Age:** 58.0

**Sex:** Female

**Location:** Texas

**Vaccinated:** 2020-12-26

**Onset:** 2020-12-30

**Days after vaccination:** 4

**Submitted:** 0000-00-00

**Entered:** 2021-01-04

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**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
---|---|---
COVID19: COVID19 (COVID19 (MODERNA)) | MODERNA 037K20A / 1 | AR / IM

**Administered by:** Private

**Purchased by:** ?

**Symptoms:** Angiogram, Burning sensation, Catheterisation cardiac normal, Chest pain, Discomfort, Feeling hot, Myocardial infarction, Pain in extremity, Troponin increased

**SMQs:** Peripheral neuropathy (broad), Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Tendinopathies and ligament disorders (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, 1 days

  **Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** clopidogrel lisinoprel carvedilol rosuvastatin aspirin symbicort melatonin mvi vitamin d3

**Current Illness:** none

**Preexisting Conditions:** mitral valve takotsubo cardiomyopathy myocardial infarction 2011 migraines htn

**Allergies:** nka

**Diagnostic Lab Data:** Angiogram 12/31/2020 Troponin levels 12/30/2020 <0.02; 12/31/2020 1.7 PER PATIENT

**CDC Split Type:**

**Write-up:** Felt slight warmth throughout body about 5 minutes after vaccine. Disappeared 2 minutes later. Arm started to feel sore as the day went on and was very sore by nighttime. Next day, arm started to feel better and over the next 3 days was no longer sore. On the morning of the 30th, woke up feeling fine, took a 3.5 mile walk and felt fine. Around 12:30 pm, experienced sudden pain and a burning sensation in the chest and both upper arms. Thought it was possibly heartburn; took a Prilosec. The discomfort (mild but steady) continued so checked blood pressure which was 141/91. Called cardiologist and went to emergency room per instruction, around 1:30. Admitted overnight with the diagnosis of a mild heart attack and performed a heart catheterization where they found no major blockage. One artery noted 30% blocked but that overall heart function looked good. Discharged on 12/31/2020. -reported by patient via email, on 1/3/2021 @ 4:49pm
VAERS ID: 919436 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2021-01-01
Age: 29.0 Days after vaccination: 3
Sex: Male Submitted: 0000-00-00
Location: Illinois Entered: 2021-01-04

<table>
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<th>Vaccination / Manufacturer</th>
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<td>EJ1685 / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Unknown Purchased by: ?
Symptoms: Blood test, Computerised tomogram, Dysphagia, Eyelid function disorder, Facial paralysis, Hypoaesthesia, Magnetic resonance imaging
SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hearing impairment (broad), Periorbital and eyelid disorders (narrow), Ocular motility disorders (narrow), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: Strained neck resulting in numbness in extremities. This and facial numbness prompted me to see my PCP who urged me to go to the ER immediately. I went to Medical Center's ED, after which I was admitted to the neuro ICU for a possible brain bleed, which after an MRI was determined to be a cavernoma.
Preexisting Conditions: Depression, anxiety, seasonal allergies
Allergies:
Diagnostic Lab Data: Full bloodwork, CT, MRI as part of inpatient hospitalization 1/2/2021-1/3/2021 at Medical Center.
CDC Split Type:
Write-up: Bell's palsy, right side of face is numb, with difficulty closing eyes, smiling, raising eyebrows, eating, drinking, swallowing.
VAERS ID: 919546 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2021-01-01
Age: 51.0 Days after vaccination: 3
Sex: Female
Location: Alabama
Submitted: 0000-00-00
Entered: 2021-01-04

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011J20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?

Symptoms: Antinuclear antibody positive, Antiphospholipid antibodies, Aphasia, Blood cholesterol increased, Blood homocysteine, Coagulation time, Craniotomy, Low density lipoprotein increased, Mechanical ventilation, Thrombotic stroke

SMQs: Dyslipidaemia (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Systemic lupus erythematosus (narrow), Ischaemic central nervous system vascular conditions (narrow), Dementia (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Acute central respiratory depression (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Lipodystrophy (broad), Respiratory failure (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
   Extended hospital stay? No

Previous vaccinations:
Other Medications: Plaquenil Fioricet Midrin
Current Illness: PMH- Lupus; HTN; marked hyperlipidemia
Preexisting Conditions: Lupus Hypertension Hyperlipidemia
Allergies: None listed
Diagnostic Lab Data: Total cholesterol- 465 LDL- 351 ANA (+) Labs pending- Lupus AC; antiphospholipid AB, homocysteine levels; hypercoagulability profile

CDC Split Type:
Write-up: thrombotic stroke -necessitating hospitalization; and craniotomy; required mechanical ventilator for 2 days. Patient now extubated, breathing on her own. Patient remains hospitalized with marked deficits (aphasic)
VAERS ID: 919584 (history) Vaccinated: 2021-01-03
Form: Version 2.0 Onset: 2021-01-03
Age: 48.0 Days after
Sex: Female vaccination: 0
Location: Unknown Submitted: 0000-00-00
Entered: 2021-01-04

Vaccination / Manufacturer | Lot / Dose | Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA - / 1 - / -

Administered by: Private Purchased by: ?
Symptoms: Chest discomfort, Dizziness, Throat tightness
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Vestibular disorders (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanenct Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: none
Current Illness:
Preexisting Conditions: none
Allergies: azithromycin
Diagnostic Lab Data:
CDC Split Type:
Write-up: Lightheadedness, throat tightness. Increasing chest tightness. History of atrial fibrillation and bilateral breast implants. Received two doses of epinephrine and one dose of diphenhydramine.

VAERS ID: 919593 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2021-01-02
Age: 64.0 Days after
Sex: Male vaccination: 3
Location: Iowa Submitted: 0000-00-00
Entered: 2021-01-04

Vaccination / Manufacturer | Lot / Dose | Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA - / 1 RA / -

Administered by: Unknown Purchased by: ?
Symptoms: Arthritis bacterial, Culture wound positive
SMQs: Arthritis (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: none
Preexisting Conditions: hypertension, sleep apnea, osteoarthritis
Allergies: opioids
Diagnostic Lab Data: Positive wound cultures.

VAERS ID: 919604 (history)
Vaccinated: 2020-12-30
Form: Version 2.0
Onset: 2020-12-30
Age: 30.0
Days after vaccination: 0
Sex: Female
Submitted: 0000-00-00
Location: Mississippi
Entered: 2021-01-04

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>037K20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Alanine aminotransferase normal, Anion gap decreased, Aspartate aminotransferase normal, Basophil count normal, Basophil percentage decreased, Blood albumin normal, Blood alkaline phosphatase normal, Blood bilirubin normal, Blood calcium normal, Blood chloride normal, Blood creatinine normal, Blood glucose normal, Blood magnesium normal, Blood potassium decreased, Blood sodium normal, Blood thyroid stimulating hormone normal, Blood urea nitrogen/creatinine ratio, Blood urea normal, Carbon dioxide decreased, Chest X-ray normal, Chest discomfort, Cough, Dizziness, Eosinophil count decreased, Eosinophil percentage decreased, Glomerular filtration rate, Haematocrit normal, Haemoglobin normal, Hypoaesthesia, Immature granulocyte count increased, Immature granulocyte percentage increased, Injection site hypoaeesthesia, Injection site pain, Lymphocyte count decreased, Lymphocyte percentage decreased, Mean cell haemoglobin concentration normal, Mean cell haemoglobin normal, Mean cell volume normal, Mean platelet volume normal, Monocyte count normal, Monocyte percentage decreased, Nausea, Neutrophil count decreased, Neutrophil percentage increased, Pain in extremity, Platelet count normal, Protein total normal, Red blood cell count normal, Red blood cell nucleated morphology, Red cell distribution width increased, Throat tightness, Troponin normal, White blood cell count normal
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (broad), Haematopoietic leukopenia (narrow), Peripheral neuropathy (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad), Hypersensitivity (broad), Myelodysplastic syndrome (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypokalaemia (narrow), Sexual dysfunction (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Amitriptyline 25 mg PO QHS Bupropion XL 150 mg PO Daily
Cyanocobalamin 1000 mcg PO once weekly Ferrous sulfate DR 324 mg PO Daily
Levothyroxine 100 mcg PO Daily Methocarbamol 500 mg PO TID prn muscle spasms
Scopolamine 1.5 mg patch transfer

Current Illness:

Preexisting Conditions: Anemia Asthma Depression Hypothyroidism secondary to thyroid cancer s/p thyroidectomy Hypertension Migraines Vertigo

Allergies: No known allergies

Diagnostic Lab Data: Chest X-ray (12/30/20 @ 1737): The cardiac and mediastinal silhouette are unremarkable. The lungs are free of infiltrates and masses. I see no acute chest disease on today’s film. CBC w/diff (12/30/2020 @ 1658) WBC: 9.0 RBC: 4.38 Hemoglobin: 13.3 Hematocrit: 39.8 MCV: 90.9 MCH: 30.4 MCHC: 33.4 RDW SD: 40.4 Platelet: 264 MPV: 9 NRBC Percent: 0.0 NRBC Absolute: 0.000 Absolute Neutrophil: 8.4 (H) Lymphocyte Absolute: 0.4 (L) Monocytes Absolute, Automated: 0.11 Absolute Eosinophil: 0.00 (L) Basophil Absolute: 0.03 Absolute Immature Granulocytes: 0.03 (H) Neutrophil percent: 93.6 (H) Lymphocyte percent: 4.6 (L) Monocyte percent: 1.2 Eosinophil percent: 0.0 Basophil percent: 0.3 Immature Granulocytes percent: 0.30 (H) CMP (12/30/2020 @ 1658) Sodium: 136 Potassium: 3.3 (L) Chloride: 106 CO2: 21 Anion gap: 9 Glucose: 137 (H) BUN: 15 Creatinine: 1.01 BUN/Creatinine Ratio: 14.9 Calcium: 9.2 Protein total: 7.9 Albumin: 4.6 AST: 12 ALT: 17 ALP: 50 eGFR non-African American: $g60.0 eGFR African American: $g60.0 Bilirubin total: 0.4 Magnesium: 2.0 TSH: 2.52 Cardiovascular (12/30/2020 @ 1658) Troponin: <0.015

CDC Split Type:

Write-up: Presented to the ED after developing chest tightness, cough, lightheadedness, and throat closing sensation. She received the Moderna COVID-19 vaccine on the morning of presentation. Within 15 minutes of receiving the vaccine she developed pain and numbness, starting at the injection site traveling down the ulnar aspect of her arm, and nausea. Over the next several hours she continued to develop worsening nausea, chest tightness, cough, lightheadedness, and the sensation that her throat closing. She took PO Benadryl 25mg; however, her symptoms were not alleviated. She was subsequently evaluated in the ED.?
Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNeb x 3, Racepinephrine x 1.

VAERS ID: 919620 (history) Vaccinated: 2020-12-01
Form: Version 2.0 Onset: 2021-01-01
Age: 81.0 Days after vaccination: 31
Sex: Male Submitted: 0000-00-00
Location: Washington Entered: 2021-01-04

<table>
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<td>EL0140 / 1</td>
<td>LA / IM</td>
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<td>UNK: VACCINE NOT SPECIFIED (NO BRAND NAME) / UNKNOWN MANUFACTURER</td>
<td>EL0140 / 1</td>
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</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Body temperature increased, Cardiac failure, Pyrexia
SMQs: Cardiac failure (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations: Other Medications: Mucus Relief Tablet 400 MG (GuaiFENesin) Give 1 tablet by mouth every 8 hours as needed for congestion Prescriber Entered Active 01/02/2021. 01/04/2021
Omeprazole Capsule Delayed Release 40 MG Give 1 capsule by mouth in the morning for GERD Ph
Current Illness: N/A
Preexisting Conditions: Dementia, Urinary Incontinence, depression, Edema
Allergies: No
Diagnostic Lab Data:
CDC Split Type:
Write-up: Decompensation and temp 103.6.
VAERS ID: 919624 (history)
Form: Version 2.0
Vaccinated: 2020-12-29
Onset: 2020-12-29
Age: 29.0
Days after vaccination: 0
Sex: Female
Location: Pennsylvania
Submitted: 0000-00-00
Entered: 2021-01-04

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<td>011J20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Work
Purchased by: ?

Symptoms: Asthenia, Blood pressure decreased, Chills, Decreased appetite, Dizziness, Fatigue, Headache, Hot flush, Lymphadenopathy, Mobility decreased, Nausea, Pain in extremity, Paraesthesia, Speech disorder, Syncope

SMQs:; Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Acute pancreatitis (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Parkinson-like events (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: no
Current Illness: no
Preexisting Conditions: no
Allergies: Penicillin
Diagnostic Lab Data: no

Write-up: Around 10 or 11 pm, arm pain, chills, fatigue, headache, nausea, swollen lymph nodes, lightheadedness, fainted in tub. Next day, fatigue all day, couldn't talk, or eat. Went back to bed again. The following day hot flashes, weakness. went to ER. Felt like blood pressure was dropping, tingling in legs, difficulty lifting her head.
VAERS ID: 919633 (history) Vaccinated: 2020-01-04
Form: Version 2.0 Onset: 2020-12-30
Age: 49.0 Days after vaccination: 361
Sex: Female Submitted: 0000-00-00
Location: Mississippi Entered: 2021-01-04

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<td>LA / IM</td>
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Administered by: Private Purchased by: ?


SMQs: Rhabdomyolysis/myopathy (broad), Acute pancreatitis (broad), Haematopoietic leukopenia (broad), Peripheral neuropathy (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hearing impairment (broad), Hypersensitivity (narrow), Myelodysplastic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:

Other Medications: Albuterol 90 mcg/actuation 2 puffs inhaled q4h prn sob/wheezing Aspirin EC 81 mg PO Daily Bupropion SR 150 PO Daily Calcium carbonate + Vitamin D 600mg PO
Daily Cinnamon Bark 2 capsules PO Daily prn Clonazepam 0.5 mg PO Daily prn anxiety Cl

**Current Illness:** N/A

**Preexisting Conditions:** Asthma Fibrocystic breast disease Hyperlipidemia Irritable bowel syndrome Insomnia Migraines Polycystic ovarian syndrome

**Allergies:** Latex gloves - Anaphylaxis Iodine - Swelling Shellfish - Unknown Oseltamivir - Unknown Tramadol - Itching, N/V

**Diagnostic Lab Data:** CT Head w/o contrast (12/31/20 @ 1813) READING: I see no evidence of hemorrhage, mass effect, abnormal attenuation, extra-axial lesions, ventriculomegaly or other suspicious intracranial pathology. Included paranasal sinuses, mastoids and middle ears are clear. Calvarium intact. IMPRESSION: no acute intracranial pathology Chest X-Ray (12/31/20 @ 1821) READING: No suspicious cardiomegaly. No infiltrates or other suspicious pulmonary or pleural pathology. I see no acute abnormality. CT Angiogram w/o contrast (12/31/20 @ 1816) READING: Both common carotid arteries and the vertebral arteries are patent and normal. Do not see any plaque or stenosis. Both carotid bifurcations are normal. The internal carotid arteries remain patent throughout the course without stenosis or occlusion in the basal artery is normal. Anterior posterior cerebral arteries widely patent without stenosis or occlusion. No arterial venous malformation or aneurysm or other vascular abnormalities. IMPRESSION: No arterial stenotic or occlusive disease of the head or neck EKC 12-Lead (12/31/20 @ 1728) Systolic Blood Pressure: 172 Diastolic Blood Pressure: 96 Vent Rate: 93 Atrial Rate: 93 PR Interval: 150 QRS Interval: 78 QT Interval: 356 QTC Interval: 442 P Axis: 66 R Axis: 25 T Axis: 22 CBC w/diff (12/31/20 @ 1845) WBC: 6.4 RBC: 5.28 Hemoglobin: 14.2 Hematocrit: 43.7 MCV: 82.8 MCH: 26.9 (L) MCHC: 32.5 RDW SD: 37.8 Platelet: 197 MPV: 11 (H) NRBC Percent: 0.0 NRBC Absolute: 0.000 Absolute Neutrophil: 4.9 Lymphocyte Absolute: 1.1 Monocytes Absolute: 0.38 Absolute Eosinophil: 0.07 Basophil Absolute: 0.05 Absolute Immature Granulocytes: 0.01 (H) Neutrophil percent: 75.2 (H) Lymphocyte percent: 16.8 (L) Monocyte percent: 5.9 Eosinophil percent: 1.1 Basophil percent: 0.8 Immature Granulocytes percent: 0.20 (H) CMP (12/31/20 @ 1845) Sodium: 138 Potassium: 3.9 Chloride: 105 CO2: 28 Anion gap: 5 (L) Glucose: 82 BUN: 19 (H) Creatinine: 0.88 BUN/Creatinine Ratio: 21.6 Calcium: 9.8 Protein total: 7.8 Albumin: 3.9 AST: 24 ALT: 23 ALP: 71 eGFR non-African American: $g60.0 eGFR African American: $g60.0 Bilirubin total: 0.8

**CDC Split Type:**

**Write-up:** Presented to the ED with cc of left sided facial and LUE numbness and weakness x 1 days. Patient received her COVID-19 vaccination on 12/30/2020 around 1PM. Immediately after the injection in her left shoulder, she began to feel warmth and numbness in her left shoulder, arm, neck, face, and chest. She reports later experiencing nausea, palpitations, and left arm weakness. Her symptoms persisted, and her family noted a left sided facial droop which prompted her ED visit. In the ED, patient was noted to have some left sided facial droop and left arm and leg weakness. CT head and CTA showed no acute abnormalities. Tele-neurology was consulted who recommended admission to rule out acute stroke. Ultimately, work up was negative and symptoms resolved. Symptoms appear to be related to the vaccine.
VAERS ID: 919665 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 28.0 Days after vaccination: 0
Sex: Female
Location: New Jersey Submitted: 0000-00-00

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 011L20A / 1 LA / IM

Administered by: Private Purchased by: ?
Symptoms: Arthralgia, Blood test, Chest X-ray, Nausea, Pyrexia
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Arthritis (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Synthroid Claritin Dexilent Terbinafine Vitamin D & B12
Current Illness:
Preexisting Conditions: Hypothyroid GERD
Allergies: Bactrim
Diagnostic Lab Data: Blood work 12/30/20 Chest X-ray 12/30/20
CDC Split Type:
Write-up: Severe joint aches, fever-type symptoms, nausea

VAERS ID: 919827 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-23
Age: 45.0 Days after vaccination: 1
Sex: Male
Location: California Submitted: 0000-00-00

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 11J20A / 1 LA / IM

Administered by: Private Purchased by: ?
Symptoms: Abdominal pain lower, Abdominal pain upper, Appendicectomy, Appendicitis, Computerised tomogram abdomen abnormal, Discomfort, Nausea, Pain
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: none
Current Illness: none
Preexisting Conditions: none
Allergies: penicillin
Diagnostic Lab Data: evaluated by urgent care physicians and determined to likely be presenting with an appendicitis. Diagnosis of acute appendicitis confirmed and surgery performed to remove appendix.
CDC Split Type:
Write-up: Began experiencing nausea and general stomach pains the morning after receiving the vaccine. After one day of pain and discomfort I woke the following morning (~44hrs after receiving the vaccine) to extreme acute abdominal pain in the lower right abdomen. Went to Urgent Care facility and was diagnosed by CT scan as having acute appendicitis. An emergency appendectomy was scheduled and performed for later that evening. I stayed at the Hospital overnight on 12/24/2020 post operatively on IV antibiotics to recover from the appendectomy. Was discharged from the hospital on 12/25/2020 and have been recovering for about 10 days now with limited activity.

VAERS ID: 920224 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-01
Age: 35.0 Submitted: 0000-00-00
Sex: Male Entered: 2021-01-05
Location: Texas

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
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Administered by: Unknown Purchased by: ?
Symptoms: COVID-19, Chills, Computerised tomogram abnormal, Cough, Dyspnoea, Hypoxia, Intensive care, Lung infiltration, Myalgia, Pain, Pyrexia, SARS-CoV-2 test positive
SMQs: Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Tendinopathies and ligament disorders (broad), Drug
reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

**Life Threatening?** Yes  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  

**Previous Vaccinations:**  
**Other Medications:**  
**Current Illness:**  
**Preexisting Conditions:** Comments: List of non-encoded Patient Relevant History: Patient  
Other Relevant History 1: None  
**Allergies:**  
**Diagnostic Lab Data:** Test Date: 202012; Test Name: CT scan; Result Unstructured Data: Test Result: showed extensive infiltration in the lungs; Test Date: 20201218; Test Name: O2 saturation; Result Unstructured Data: Test Result: 80%; Test Date: 20201226; Test Name: COVID test; Test Result: Positive

**CDC Split Type:** USPFIZER INC2020518143

**Write-up:** had a positive COVID test; had a positive COVID test; O2 Saturation of 80% / Hypoxia; shortness of breath; He has a CT scan which showed extensive infiltration in the lungs; muscle pain; chills; body aches; low grade fever; cough; This is a spontaneous report from a contactable physician (pulmonary medicine). This physician reported similar events for 2 patients. This is 1st of 2 reports. A 35-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 18Dec2020 at single dose for covid-19 immunization. There were no medical history and concomitant medications. Caller stated that his close friend who was ER physician (front line worker) and within 24 hours after receiving the COVID vaccine, developed COVID or symptoms of COVID. Patient received the COVID vaccine on 18Dec2020 and the same night patient started with a low grade fever, body aches, chills, muscle pain, shortness of breath, cough, O2 saturation of 80% (hypoxia) and was in the intensive care unit now. Patient swore this was related to the vaccine. This patient tested positive for COVID. He had a CT (computerised tomogram) scan which showed extensive infiltration in the lungs in Dec2020. Patient was admitted to the hospital on 24Dec2020 and then was moved to the ICU 2 days later, on 26Dec2020. Caller thought patient had a positive COVID test at another hospital. Caller did know that tested positive for COVID at the current hospital on 26Dec2020 which was done to confirm the previous positive test. Caller thought patient had his first positive COVID test either the same day or the next day after receiving the vaccine. Event of O2 Saturation of 80% / hypoxia was reported as hospitalization from 24Dec2020 and life threatening; infiltration in the lungs and shortness of breath caused hospitalization from 24Dec2020, muscle pain, chills and positive COVID test was reported as medically significant; and other events were reported as non-serious. Outcome of O2 saturation of 80% / hypoxia and shortness of breath was not recovered, outcome of cough was recovering; and outcome of other events were unknown. Information about lot/batch number has been requested. ; **Sender's Comments:** Based on the information currently available, a lack of efficacy with suspected vaccine BNT162B2 in this patient cannot
VAERS ID: 920225 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 54.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: California Entered: 2021-01-05

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<td>- / 1</td>
<td>RA / OT</td>
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Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Viral test negative
SMQs: Anaphylactic reaction (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Hypersensitivity (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: VITAMIN C [ASCORBIC ACID]; VITAMIN D [COLECALCIFEROL]
Current Illness:
Preexisting Conditions: Comments: List of non-encoded Patient Relevant History: Patient
Other Relevant History 1: None
Allergies:
Diagnostic Lab Data: Test Date: 20201218; Test Name: Nasal Swab; Test Result: Negative
CDC Split Type: USPFIZER INC2020518186
Write-up: Anaphylactic reaction requiring two doses of Epinephren to control. Still having issues; other vaccine same date product received; This is a spontaneous report from a contactable nurse (patient). A 54-year-old female patient received her first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), intramuscularly on right arm at 12:30 PM on 18Dec2020 at single dose for COVID-19 immunization, and first dose of other Pfizer vaccine same date product (other vaccine same date lot number: elt9899) on right deltoid on 18Dec2020 for unknown indication. Medical history reported as none. Concomitant medication included vitamin C and colecalciferol (VITAMIN D). The patient experienced anaphylactic reaction at 12:30 PM on 18Dec2020 requiring two doses of epinephren to control. still having issues, resulted in: Doctor or other healthcare professional office/clinic visit, Hospitalization in Dec2020. days hospitalization: 1. The patient received treatment: 2 doses of epinephrine, solumedrol, benadryl, IV and O2 for event anaphylactic reaction to
vaccine. The outcome of anaphylactic reaction was not recovered. Lot/Batch and Expiration date has been requested.; Sender"s Comments: The information available in this report is limited and anecdotal and does not allow a medically meaningful assessment of the case. There is a plausible temporal association between vaccines administration and onset of the reported event. It is unclear what is the nature of the vaccine co-administered with BNT162b2. Currently no information is available on the co-administration of the Pfizer-BioNTech COVID-19 Vaccine with other vaccines.

VAERS ID: 920280 (history)  Vaccinated: 2021-01-04
Form: Version 2.0  Onset: 2021-01-04
Age: 54.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: Unknown  Entered: 2021-01-05

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</table>

Administered by: Military  Purchased by: ?
Symptoms: Asthenia, Dizziness, Hyperhidrosis, Hypertension
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Hypertension (narrow), Vestibular disorders (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Multivitamins
Current Illness: DENIES
Preexisting Conditions: DENIES
Allergies: DENIES
Diagnostic Lab Data:
CDC Split Type:
Write-up: 54yoM presented for a sudden-onset diaphoresis and loss of body strength. Pt had received COVID-19 vaccine this morning at the clinic and noted severe sweating all over the body while lying in bed @ approx 2030. Then pt described severe loss of body strength with dizziness as he was trying to sit up and get to his feet from the floor. Denied palpitation, chest pain, headache, N/V, LOC. His symptoms continued for 20mins until he drank a cup of water. At approx 2050, smoked E-cigarette and arrived at facility at 2100. On arrival, pt denied any symptoms, however, vitals indicated severe hypertension: BP 188/99, HR 56, T 97.6 F. Pt given 81mg ASA x2 and immediately transported to hospital.
VAERS ID: 920317 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-30
Age: 57.0 Days after vaccination: 1
Sex: Female
Location: New York Submitted: 0000-00-00
Entered: 2021-01-05

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<td>EL1284 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Heart rate increased, Pyrexia, Rhonchi, Sputum abnormal
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: buspirone, prednisone, Vit D3, Vit B1, Multivitamin, Ensure Plus, Fentanyl Patch, Levothyroxine, Metoprolol, Ipratropium-Albuterol SVN
Current Illness: Sepsis, Pneumonia, UTI, Respiratory Failure, COPD
Preexisting Conditions: CA lymph nodes, liver, brain lung and base of tongue, COPD, CKD, anemia, DM Type 2, Vit D3 Deficiency
Allergies: Bactrim DS, bupropion (bulk), fluoxetine, piperacillan-tazobactam, remeron, latez
Diagnostic Lab Data: none

CDC Split Type:
Write-up: Rhonchi, frothy sputum, low grade temp, elevated HR, 12/30 MD assessed 1:00PM and increased prednisone and added Cefdinir. Sent to hospital 12/30 at approximately 6:30PM with worsening symptoms

VAERS ID: 920388 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2020-12-16
Age: 57.0 Days after vaccination: 0
Sex: Female
Location: Florida Submitted: 0000-00-00
Entered: 2021-01-05
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Administered by: Unknown  
Purchased by: ?

Symptoms: Chills, Diarrhoea, Headache, Meningitis viral, Nausea, Photophobia, Pyrexia, Transaminases increased, Vomiting

SMQs: Liver related investigations, signs and symptoms (narrow), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Noninfectious meningitis (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Glaucoma (broad), Corneal disorders (broad), Retinal disorders (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, ? days  
Extended hospital stay? No  

Previous Vaccinations:  
Other Medications: unknown  
Current Illness: unknown  
Preexisting Conditions: craniotomy in 1998 due to meningioma  
Allergies: codeine  
Diagnostic Lab Data:  

VAERS ID: 920628 (history)  
Form: Version 2.0  
Age: 63.0  
Sex: Female  
Location: New York  
Vaccinated: 2021-01-02  
Onset: 2021-01-02  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2021-01-05  

Write-up: Patient received her Vaccine on 12/16/2020. Afterwards she developed symptoms of fever, chills, diarrhea, nausea, vomiting and headache that became worse over time and on day os presentation to our hospital on 1/2/2021 she was having photophobia. Current headache at time of admission had been persistent for over a week. Patient has no immunocompromising risk factors and was diagnosed with confirmed CMV meningitis. She was also admitted with transaminitis.
Administered by: Private Purchased by: ?
Symptoms: Abdominal pain, Chills, Colostomy, Computerised tomogram abdomen, Computerised tomogram abnormal, Intestinal resection, Large intestine perforation, Pain in extremity, Pyrexia
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Malignancy related therapeutic and diagnostic procedures (narrow), Gastrointestinal perforation, ulcer, haemorrhage, obstruction non-specific findings/procedures (broad), Gastrointestinal perforation (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Ischaemic colitis (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Tylenol 350 mg as needed Valium 5 mg as needed
Current Illness: pancreatic cysts colonic polyps last colonoscopy 9/2020 and one polyp removed ATM gene mutation hyperlipidemia DCIS of breast in 1/2015 s/p lumpectomy and xrt thyroid nodules vertigo
Allergies: Compazine led to restless leg syndrome Penicillin anaphylaxis Sulfamethoxazole rash
Diagnostic Lab Data: CT scan of abdomen and pelvis 1/3/2021
CDC Split Type:
Write-up: 6-7 hours after the vaccine she developed arm pain, fever and chills. About an hour later she started to have abdominal pain which worsened over the course of the day to excruciating. She went to the Emergency Room where a CT scan revealed a perforation of her sigmoid colon and had a resection of the area of the colon and a diverting colostomy surgery done the evening of 1/3/2021.

VAERS ID: 920719 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-28
Age: 36.0 Days after vaccination:
Sex: Female 5
Location: Pennsylvania Submitted: 0000-00-00
Vaccination / Manufacturer Lot / Dose Site / Route

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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private  Purchased by: ?
Symptoms: Asthenia, Blood test, Epistaxis, Immune thrombocytopenia, Lethargy, Menorrhagia, Oral blood blister, Petechiae, Platelet count decreased
SMQs: Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Immune-mediated/autoimmune disorders (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: none
Current Illness: none
Preexisting Conditions: none
Allergies: none
Diagnostic Lab Data: blood work
CDC Split Type:
Write-up: starting to feel lethargic and weak. Had menses with increased blessed. Called physician to have blood work done to see if I was experiencing anemia. Blood work complete on 12/31/2020. On 1/3/2021, I woke up with blood blisters all over the inside of my mouth and petechia on my trunk and bilateral upper and lower extremities. I called my primary physician to report the symptoms. He suggested to go to the ER if my symptoms worsened. Later that evening I started with a nose bleed and did go to the ER. Upon arrival to the ER, my platelet count was 9. I was admitted to the hospital and diagnosed with ITP.

VAERS ID: 920726 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-31
Age: 48.0 Days after vaccination: 2
Sex: Female Submitted: 0000-00-00
Location: Kentucky Entered: 2021-01-05

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<td>025J20A / 1</td>
<td>LA / IM</td>
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Administered by: Private  Purchased by: ?
Symptoms: Dysarthria, Electrocardiogram normal, Full blood count normal, Hypoesthesias,
Injection site rash, Lymphadenopathy, Magnetic resonance imaging brain normal, Magnetic resonance imaging neck, Platelet count normal, Troponin normal

SMQs: Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: None

Diagnostic Lab Data: 12/31/20 MRI of brain, Carotid Artery CBC, Platelet panel, Troponin, EKG

CDC Split Type:

Write-up: 12/31/20 around 11am Numbness in right hand and right cheek, 5 minutes later, slurred speech. Episode lasted approximately 10 minutes. Treated in ER. Labs, MRI, all normal 1/3/21 Swollen lymph node to left axilla 1/4/21 Rash to injection site

VAERS ID: 920771 (history)
Form: Version 2.0
Onset: 2020-12-30
Vaccinated: 2020-12-29
Age: 94.0
Sex: Female
Days after vaccination: 1
Location: Illinois
Submitted: 0000-00-00
Entered: 2021-01-05

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<td>RA / IM</td>
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Administered by: Senior Living  
Purchased by: ?

Symptoms: Tachycardia

SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: NKA
Diagnostic Lab Data: 
CDC Split Type:
Write-up: Tachycardia, resident was sent out to the hospital for evaluation on 12/30/2020 and came back to the facility on 12/31/2020.

VAERS ID: [920784](https://www.vaers.org/lookups/920784) (history) 
Form: Version 2.0 
Age: 44.0 
Sex: Female 
Location: Indiana 

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Administered by: Private 
Purchased by: ?

Symptoms: Anaphylactic reaction, Anxiety, Blood test, Burning sensation, Central nervous system lesion, Chest X-ray, Differential white blood cell count, Dizziness, Dysphagia, Ear pain, Electrocardiogram, Erythema, Flushing, Full blood count, Headache, Hypertension, Hypoesthesia, Hypoesthesia oral, Magnetic resonance imaging brain abnormal, Metabolic function test, Mobility decreased, Palpitations, Paraesthesia, Paraesthesia oral, Peripheral swelling, Pharyngeal swelling, Swelling face

SMQs: , Cardiac failure (broad), Anaphylactic reaction (narrow), Angioedema (narrow), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypertension (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: 12/23/20 EKG, X-ray of lungs, Lab Blood work 1/1/2021 Basic Metabolic Panel, blood count with auto diff, ECG 12- Lead, MRI Brain WO contrast
CDC Split Type:
Write-up: Anaphylactic Reaction, facial swelling, facial Redness, Face felt like it was burning, face flushing, throat swelling, heart palpitations, trouble swallowing, feet swelling, light headed, anxiety. Hospitalized from the 12/23/20 to 12/26/2020. Medications now on Epinephrine, diphenhydramine, cetirizine, famotidine, prednisone, lorazepam, cephalexin. on 1/1/2021 was taken to E.R. by ambulance around 11:00 am left hand was tingle started to go numb traveled up my arm into left side of my face, ear, tongue, and then down to the left side of my leg and into left foot, could not move left side of body for a good 7 to 8 mins then went away transferred to ambulance enroute to ER blood pressure was high and and started having right ear pain and right side frontal severe headache, arrived to ER and was given diphenhydramine, ketorolac, metoclopramide HCI, lorazepam. MRI was ordered and Neurologist found two small lesions on right side of frontal brain, following up now with neurologist. added more meds naproxen

VAERS ID: 920805 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 45.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-05

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Administered by: Private Purchased by: ?
Symptoms: Acute kidney injury, Alanine aminotransferase increased, Aspartate aminotransferase increased, Blood alkaline phosphatase increased, Blood creatine increased, Blood pressure increased, Chest discomfort, Head discomfort, Liver function test increased, Palpitations, Throat clearing, Throat irritation, Vision blurred
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (narrow), Liver related investigations, signs and symptoms (narrow), Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions
(broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Biliary system related investigations, signs and symptoms (broad), Glaucoma (broad), Hypertension (narrow), Cardiomyopathy (broad), Lens disorders (broad), Retinal disorders (broad), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: NKDA
Diagnostic Lab Data: AP 144, AST 51, ALT 178 Creatinine 1.41

CDC Split Type:
Write-up: palpitations, chest tightness/heaviness, scratchy throat/frequent throat clearing, head heaviness, blurred vision, elevated blood pressure. Evaluated in ED received solumedrol, benadryl. Discharged home and returned to hospital as direct admit due to continued symptoms. Pertinent labs reveled AKI, elevated LFTs. AKI and LFTs improved with IVFs.

VAERS ID: 920879 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-28
Age: 36.0 Days after vaccination: 5
Sex: Female Submitted: 0000-00-00
Location: Wisconsin Entered: 2021-01-05

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Administered by: Private Purchased by: ?
Symptoms: Abdominal pain, Appendicectomy, Appendicitis, Appendicolith, Computerised tomogram abdomen abnormal, Laboratory test, Ultrasound abdomen abnormal
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal obstruction (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: None
Other Medications: None
Current Illness: None
Preexisting Conditions: Back pain
Allergies: None
Diagnostic Lab Data: Labs drawn, abdominal ultrasound and ct scan performed. Stones found in appendix
CDC Split Type:
Write-up: Abdominal pain that proceeded to get worse into the next day. Connected with PCP, had labs drawn and ultrasound ordered. Ended up going to ER. Determined to have Appendicitis, needed and had appendectomy on 12/29/2020.

VAERS ID: 921053 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-28
Age: 46.0 Days after vaccination: 0
Sex: Female
Location: Indiana Submitted: 0000-00-00
Entered: 2021-01-05

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</table>

Administered by: Private Purchased by: ?
Symptoms: Cardiac monitoring abnormal, Flushing, Heart rate increased, Supraventricular tachycardia, Urticaria
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Write-up: Patient had SVT; flushing; hives; heart rate increased to 160"s (had been 180"s earlier in the day); This is a spontaneous report from a contactable pharmacist. A 46-year-old female patient received the first dose of BNT162B2 (lot number: EK5730), via intramuscular, on 28Dec2020 at single dose for COVID-19 immunization. Facility where the most recent COVID-19 vaccine was administered was hospital. The patient was not pregnant at the time of vaccination. The patient was not diagnosed with COVID-19 prior to vaccination. Since the vaccination, it"s unknown if the patient was tested for COVID-19. No other vaccines were received within 4 weeks prior to the COVID vaccine. The patient's medical history and concomitant medications were not reported. The patient had SVT, flushing, hives 20 min after receiving vaccine on 28Dec2020. Patient was taken to ED and evaluated. SVT resolved. Patient sent home on heart monitor. Later that night while in bed, heart rate increased to 160's (had been 180's earlier in the day) and patient was admitted to hospital. Patient is a NP. Treatment received for the adverse event included cold water to face, vagal massage. The outcome of the event"Patient had SVT" was recovered on 28Dec2020 and of other events was recovering.; Sender"s Comments: A causal association between BNT162B2 and the reported events supraventricular tachycardia, flushing, hives, heart rate increased cannot be excluded based on the compatible temporal relation. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.

VAERS ID: 921062 (history) Vaccinated: 2020-12-01
Form: Version 2.0 Onset: 2020-12-01
Age: Unknown Days after vaccination: 0
Sex: Unknown
Location: Unknown Submitted: 0000-00-00
Entered: 2021-01-05

Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | - / UNK | - / -

Administered by: Unknown Purchased by: ?
Symptoms: Fatigue, Intensive care, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2020520682
Write-up: a high fever; extreme fatigue; have allergies; This is spontaneous report from a non-contactable consumer. This consumer reported similar events for eight patients. This is the first of eight reports. Only this report is serious. A patient of unspecified age and gender received bnt162b2 (BNT162B2 also reported as Pfizer version of the vaccine, lot/batch number and expiry date were not reported), via an unspecified route of administration on unknown date in Dec2020 at single dose, for Covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient got the vaccine at a facility then had a high fever and extreme fatigue after getting the vaccine on Dec2020. The patient was admitted to the ICU. The patient had allergies, but it was unknown what the allergies are to. The outcome of events was unknown. No follow-up attempts are possible. Information on batch/Lot number can not be obtained. No further information is expected.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2020520700 same reporter/drug/AE, different patients;US-PFIZER INC-2020520703 same reporter/drug/AE, different patients;US-PFIZER INC-2020520699 same reporter/drug/AE, different patients;US-PFIZER INC-2020520704 same reporter/drug/AE, different patients;US-PFIZER INC-2020520705 same reporter/drug/AE, different patients;US-PFIZER INC-2020520701 same reporter/drug/AE, different patients;US-PFIZER INC-2020520702 same reporter/drug/AE, different patients;US-PFIZER INC-2020520700 same reporter, drug, events, and different patients

<table>
<thead>
<tr>
<th>VAERS ID: 921087 (history)</th>
<th>Vaccinated: 2021-01-05</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form: 2.0</td>
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<tr>
<td>Age: 42.0</td>
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<tr>
<td>Sex: Female</td>
<td></td>
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<tr>
<td>Location: Texas</td>
<td></td>
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<tr>
<td>Onset: 2021-01-05</td>
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<tr>
<td>Days after vaccination: 0</td>
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<tr>
<td>Submitted: 0000-00-00</td>
<td></td>
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<tr>
<td>Entered: 2021-01-05</td>
<td></td>
</tr>
<tr>
<td>Vaccination / Manufacturer</td>
<td>Lot / Dose</td>
</tr>
</tbody>
</table>
Administered by: Private  Purchased by: ?
Symptoms: Cough, Speech disorder, Stridor
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Dementia (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: lisinopril/HCTZ, albuterol MDI
Current Illness: no
Preexisting Conditions: asthma
Allergies: ibuprofen, IV contrast allergy
Diagnostic Lab Data:

Write-up: Pt received COVID Vaccine at 1055, 1120 pt began coughing severely and could not stop, unable to speak. 1120 25mg Benadryl liquid given, Pepcid 20 mg given PO, cough worsening. 1122 second dose of Benadryl given, called for MD. Brought pt to Private room via wheelchair. Upon arrival, audible stridor noted. Epinephrine 0.3 mg IM given at 1126. IV started, placed patient on monitor and O2 via 1L NC. MD at bedside along with RT and pharmacy. 1134 Solumedrol 125 mg IV given, 1 puff of Ventolin given. Lungs clear. 1140 Coughing stopped, pt able to speak now. Vital signs: 1130 SPO2 99% Pulse 142 1135 99% pulse 106 BP 168/102 1140 sats 100% HR 93 BP 157/105 1145 sats 100% HR 97 BP 159/93 1200 sats 99% HR 103 155/97 114

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VAERS ID: 921090 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-31
Age: 77.0  Days after vaccination: 8
Sex: Female  Submitted: 0000-00-00
Location: Minnesota  Entered: 2021-01-05

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Alanine aminotransferase increased, Aspartate aminotransferase increased,
Brain natriuretic peptide increased, COVID-19, Dyspnoea, Fatigue, Fibrin D dimer increased, International normalised ratio decreased, SARS-CoV-2 test positive, Troponin increased

SMQs: Cardiac failure (broad), Liver related investigations, signs and symptoms (narrow), Anaphylactic reaction (broad), Haemorrhage laboratory terms (broad), Myocardial infarction (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanant Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: Apixaban, ECASA, Atorvastatin, Labetalol, Multivitamin w/minerals, Pantoprazole, Diltiazem, Meclizine

Current Illness: Mitral valve surgery (surgery planned within days)
Preexisting Conditions: HTN, GERD, A Fib, Sleep apnea on CPAP, Lactose intolerance, allergies

Allergies: Sulfa/Trimethoprim

Diagnostic Lab Data: on 1/4/2021: COVID-19 Pos; D Dimer 243; BNP 400; Troponin 10; AST 47; ALT 42; INR 2

CDC Split Type:

Write-up: Pt vaccinated on 12/23. PCP notified that SOB and fatigue getting worse on 1/4. Unable to keep pre-op Dental work planned prior to mitral valve surgery on 1/14/2021. PCP referred her to our ED where she was diagnosed with COVID-19 and transferred to facility, which is where her surgery was planned.

VAERS ID: 921091 (history)  Vaccinated: 2020-12-31
Form:  Version 2.0  Onset: 2020-12-31
Age: 54.0  Days after vaccination: 0
Sex: Male
Location: New Hampshire  Submitted: 0000-00-00
Entered: 2021-01-05

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / UNK</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Public  Purchased by: ?

Symptoms: Defaecation urgency, Hyperhidrosis, Loss of consciousness, Nausea, Road traffic accident, Syncope

SMQs: Torsade de pointes/QT prolongation (broad), Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: none related
Current Illness:
Preexisting Conditions: diabetes
Allergies: neomycin
Diagnostic Lab Data:
CDC Split Type:
Write-up: Pt received vaccination and left after 15 min. observation symptom free. He drove a short distance away from the clinical site when he felt profuse sweating and had syncope (seconds) crashing into curb. He was aroused from impact and was able to stop car. He then developed profuse nausea and sudden urge to defecate. He went to restroom. Given these events he returned to the clinical site in another vehicle. Upon arrival he denied chest pain, shortness of breath or ongoing nausea or abdominal pain. He reported his AM blood sugar was 72 and does not take insulin. No history of coronary disease or syncope. EMS was activated and assumed care.

VAERS ID: 921151 (history)
Form: Version 2.0
Age: 43.0
Sex: Female
Location: New York
Vaccinated: 2020-12-28
Onset: 2020-12-29
Days after vaccination: 1
Submitted: 0000-00-00
Entered: 2021-01-05

<table>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  
Purchased by: ?
Symptoms: Blood HIV RNA below assay limit, CD4 lymphocyte percentage decreased, Condition aggravated, Endotracheal intubation, Intensive care, Mechanical ventilation, Seizure
SMQs: Angioedema (broad), Systemic lupus erythematosus (broad), Convulsions (narrow), Acute central respiratory depression (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised
convulsive seizures following immunisation (narrow), Respiratory failure (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: HIV DM HTN Seizure d/o Schizoaffective d/o Lipid d/o
Preexisting Conditions: As above
Allergies: Penicillin, Bactrim, Dapsone
Diagnostic Lab Data: None performed at the nursing home at the time of transfer. Last Keppra level = 19 (therapeutic range -10-40 ug/ml) , done on 12/11/20 Last CD4 count = 1123/43.2 % , HIV viral load <20; done on 6/20/20
CDC Split Type:
Write-up: The resident who was known to have seizures, and under control for many years with Keppra 1000 mg twice a day, on the second day after vaccination developed recurrent seizures requiring hospitalization to an intensive care unit, with intubation and mechanical ventilation until 1/5/21 (to be extubated today). She is still at the hospital.

<table>
<thead>
<tr>
<th>VAERS ID: 921171 (history)</th>
<th>Vaccinated: 2020-12-22</th>
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<tbody>
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<td>Form: Version 2.0</td>
<td>Onset: 2020-12-24</td>
</tr>
<tr>
<td>Age: 42.0</td>
<td>Days after vaccination: 2</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
</tr>
<tr>
<td>Location: Virginia</td>
<td>Entered: 2021-01-05</td>
</tr>
</tbody>
</table>

Vaccination / Manufacturer: COVID19 (COVID19 (MODERNA)) / MODERNA
Lot / Dose: 039K20A / 1
Site / Route: LA / IM

Administered by: Private
Purchased by: ?

Symptoms: Asthenia, Asthma, COVID-19 pneumonia, Computerised tomogram thorax abnormal, Condition aggravated, Diarrhoea, Dyspnoea, Gastrointestinal disorder, Lung consolidation, Lung opacity, PO2 decreased, SARS-CoV-2 test positive, Wheezing

SMQs: Anaphylactic reaction (broad), Angioedema (broad), Asthma/bronchospasm (narrow), Interstitial lung disease (narrow), Pseudomembranous colitis (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypersensitivity (broad), Noninfectious diarrhoea (narrow), Respiratory failure (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 5 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Famotidine, albuterol inhaler, xopenex
Current Illness: Asthma
Preexisting Conditions: asthma
Allergies: aspirin
Diagnostic Lab Data: COVID POSITIVE;" PO2 66.2; O2 SAT 88% ROOM AIR; Severe and diffuse ground-glass, patchy, and crazy paving airspace consolidations are seen throughout the lungs; Severe, diffuse, and bilateral COVID-19 pneumonia shown on CT of chest.
CDC Split Type:
Write-up: RECEIVED VACCINE ON 12/22; ON 12/24, STARTED FEELING WEAK AND HAVING GI ISSUES WITH DIARRHEA. ON 12/27, STARTED HAVING SHORTNESS OF BREATH AND WHEEZING MORE THAN HER NORMAL WITH HER ASTHMA ILLNESS AND CAME TO ER. WAS TESTED AND FOUND TO BE COVID POSITIVE.

VAERS ID: 921175 (history)  Vaccinated: 2021-01-03
Form: Version 2.0  Onset: 2021-01-03
Age: 77.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: New Jersey  Entered: 2021-01-05

Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EJ1686 / 1 | - / IM

Administered by: Senior Living  Purchased by: ?
Symptoms: Body temperature increased, Dyspnoea
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? Yes
  Date died: 2021-01-05
  Days after onset: 2
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
### Hospitalized?
Yes, ? days

### Extended hospital stay?
No

### Previous Vaccinations:

### Other Medications:

### Current Illness:
CHF, COPD, DM, heart failure, anemia, sleep apnea

### Preexisting Conditions:
CHF, COPD, DM, heart failure, anemia, sleep apnea

### Allergies:
NKA

### Diagnostic Lab Data:
Epi pen 0.3mg given, sent to ER

### CDC Split Type:

### Write-up:
Resident received Covid Vaccine, noted after 30 mins with labored breathing BP 161/77, HR 116, R 38, T 101.4,

### VAERS ID: [921465](history)  Vaccinated: 2020-12-27

| Form: Version 2.0 | Onset: 2020-12-30 |
| Age: 51.0 | Days after vaccination: 3 |
| Sex: Female | Submitted: 0000-00-00 |
| Location: Rhode Island | Entered: 2021-01-05 |
| Vaccination / Manufacturer | Lot / Dose | Site / Route |
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | - / UNK | - / IM |

### Administered by:
Private

### Purchased by:
?

### Symptoms:
Arthralgia, Back pain, Chest X-ray normal, Chills, Computerised tomogram normal, Computerised tomogram spine, Ear pain, Headache, Laboratory test, Myalgia, Nausea, Pain, Pain in extremity, Photophobia, Purpura, Pyrexia, Rash, Vomiting

### SMQs:
Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Acute pancreatitis (broad), Haemorrhage terms (excl laboratory terms) (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Noninfectious meningitis (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Glaucoma (broad), Corneal disorders (broad), Eosinophilic pneumonia (broad), Retinal disorders (broad), Hypersensitivity (narrow), Arthritis (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

### Life Threatening?
No

### Birth Defect?
No

### Died?
No

### Permanent Disability?
No

### Recovered?
No

### Office Visit?
No

### ER Visit?
No

### ER or Doctor Visit?
No

### Hospitalized?
Yes, ? days

### Extended hospital stay?
No

### Previous Vaccinations:

### Other Medications:

### Current Illness:

### Preexisting Conditions:

### Allergies:
Diagnostic Lab Data:

Write-up: 51-year-old female with history of intermittent asthma presented to the ED with 1 week of intermittent fevers, myalgias, arthralgias and headache. Patient reports receiving first dose of moderna vaccine last week. She initially developed arm soreness followed by chills and body aches. Subsequently developed frontal headache, photophobia, back pain, nausea and vomiting. She was seen in the ER on 1/1/21, when her work-up including labs, CT spine, chest x-ray were negative therefore she was discharged home. She continued to have symptoms and also developed bilateral intermittent ear pain. She also developed rash in her extremities and torso. Rash is pruritic but not painful. reports ongoing history of neck pain for which she sees PT. Denies sore throat, cough, chest pain or shortness of breath.

VAERS ID: 921557 (history) Vaccinated: 2021-01-03
Form: Version 2.0 Onset: 2021-01-04
Age: 74.0 Days after vaccination: 1
Sex: Male
Location: Minnesota Submitted: 0000-00-00

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 026L20A / 1 RA / IM

Administered by: Senior Living  Purchased by: ?
Symptoms: Asthenia, Blood pressure decreased, Body temperature increased, Chest X-ray normal, Heart rate increased, Hyponatraemia, Metabolic function test abnormal, Urine analysis normal

SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Hyponatraemia/SIADH (narrow), Chronic kidney disease (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications: cholecalciferol, iron, oxycodone, gabapentin
Current Illness:
Preexisting Conditions: obesity, GERD, allergic rhinitis, neuropathy, insomnia, ataxia, hyperlipidemia
Allergies: cosopt, weeds, soaps
Diagnostic Lab Data: Chest X-Ray--unremarkable, UA--unremarkable, BMP--mild hyponatremia
CDC Split Type:
Write-up: Began experiencing increased temp of 101.4 on 1/4/2021 at 0701. Temp did not resolve with the use of Tylenol. HR increased to $g100 and BP was decreasing below baseline. Increased weakness also noted. Temp increased to 102.9 on 1/4/2021 at 2220. Transferred from SNF to ER for evaluation.

VAERS ID: 921641 (history) Vaccinated: 2021-01-04
Form: Version 2.0 Onset: 2021-01-04
Age: 17.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2021-01-05

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0140 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living   Purchased by: ?
Symptoms: Acute respiratory failure, COVID-19, Hypoxia, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Eosinophilic pneumonia (broad), Hypersensitivity (broad), Respiratory failure (narrow), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: acetaminophen 160 mg/5 mL (5 mL) oral solution albuterol sulfate 2.5 mg/3 mL (0.083 %) solution for nebulization budesonide 0.5 mg/2 mL suspension for nebulization Certavite-Antioxidant 18 mg-400 mcg tablet ClearLax 17 gram/dose oral powder
Current Illness: Right lung atelectasis/infiltrate with right mediastinal shift on chest x-ray (12/25) that was treated with steroids and antibiotics
Preexisting Conditions: Chronic respiratory Failure Dependence on mechanical ventilation
Seizure disorder Spastic quadriplegic cerebral palsy Encephalopathy
Allergies: NKA
Diagnostic Lab Data: 1/5/21 COVID PCR result: Positive
CDC Split Type: Write-up: Administered first dose of COVID19 vaccine at 1:29pm on 1/4/21. At approximately
11:00pm resident exhibited acute respiratory decompensation with very limited air entry and hypoxemia. Patient received Benadryl, steroids, epinephrine, and Duoneb without improvement. Resident was referred to the emergency room and found to be COVID positive. No fever or rash were reported.

**VAERS ID:** 921786 (history)  **Vaccinated:** 2021-01-03
**Form:** Version 2.0  **Onset:** 2021-01-03
**Age:** 75.0  **Days after vaccination:** 0
**Sex:** Male  **Submitted:** 0000-00-00
**Location:** Michigan  **Entered:** 2021-01-05

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Senior Living  **Purchased by:** ?
**Symptoms:** Tremor
**SMQs:** Neuroleptic malignant syndrome (broad), Parkinson-like events (broad), Noninfectious encephalopathy/delirium (broad), Hypoglycaemia (broad)
**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** No
**Hospitalized?** Yes, 2 days
  **Extended hospital stay?** No
**Previous Vaccinations:**
**Other Medications:** Metformin, Keppra, Eliquis, Metoprolol Succinate, Mesalamine, Colace, bupropin ER and Ferrous Sulfate given at 10am on 1-3-21
**Current Illness:**
**Preexisting Conditions:** A-fib, HTN, Type 2 DM, Dementia and hyperlipidemia
**Allergies:** NKA

**Diagnostic Lab Data:**

**CDC Split Type:**
**Write-up:** tremors resident sent hospital facility.

**VAERS ID:** 921796 (history)  **Vaccinated:** 2021-01-02
**Form:** Version 2.0  **Onset:** 2021-01-02
**Age:** 49.0  **Days after vaccination:** 0
**Sex:** Female  **Submitted:** 0000-00-00
**Location:** Tennessee  **Entered:** 2021-01-05

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>
VAERS ID: 921829 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-29
Age: 81.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: Minnesota  Entered: 2021-01-05

Administered by: Senior Living  Purchased by: ?
Symptoms: Chest X-ray abnormal, Diarrhoea, Hypoxia, Lung infiltration, Nausea, Pyrexia, Vomiting, White blood cell count normal

VAERS ID: 921829 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-29
Age: 81.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: Minnesota  Entered: 2021-01-05

Administered by: Senior Living  Purchased by: ?
Symptoms: Cardiovascular evaluation, Chest X-ray, Chest discomfort, Chest pain, Dehydration, Feeling abnormal, Headache, Laboratory test, Nausea, SARS-CoV-2 test negative, Tinnitus, Urine analysis, Vaccination complication, Vomiting
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Dementia (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hearing impairment (narrow), Dehydration (narrow), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Wellbutrin, Microbid
Current Illness: no
Preexisting Conditions: ESBL
Allergies: Buspar
Diagnostic Lab Data: heart work up, COVID (negative) labs, chest xray, urine
CDC Split Type:
Write-up: Started out vague. Started with headache at the base of her head and then it felt like a web that covered her entire head. By 10:00 she did not feel good. Went to sleep instantly. Slept for about an hour. Began to have nausea. Sunday headache got worse. Started ringing, buzzing sound in her head. Took Zofran because of nausea. Sunday night chest discomfort. Monday had horrible chest pain, headache was horrible, then vomiting. went to ER, doctor felt it was a reaction to the vaccine. was give medicine for nausea and Decadron for the reaction. Gave fluids for dehydration. Got medicine for headache. Keep taking Zofran for nausea. Still has headache. Has appointment with pcp in the morning.
SMQs: Acute pancreatitis (broad), Asthma/bronchospasm (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Noninfectious diarrhoea (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Acetaminophen, Aspercreme Lidocaine Liquid 4 %, Biotene Dry Mouth Liquid (Mouthwashes, ,Calcium Antacid Tablet Chewable 500 MG (CalciumCarbonate Antacid) ,Carbidopa-Levodopa Tablet, Coumadin Tablet, Fiber formula, furosemide, gabapentin,Ins

Current Illness: COVID and pneumonia
Preexisting Conditions: CHF, COPD, parkinsons, diabetes, hyperlipidemia, obstructive sleep apnea, hypertension, dilated cardiomyopathy, hyperparathyroidism

Allergies: Lisinopril

Diagnostic Lab Data: Chest x-ray, CBC,

Write-up: Received COVID-19 Moderna vaccine on 12/28. Developed nausea, vomiting, diarrhea, fever, and hypoxia at facility the day follow vaccine administration (12/29). He was sent to the hospital on 12/29 and admitted for post vaccine fever where he had a chest x-ray that showed infiltrates but WBC count was normal and fever resolved upon admission to hospital. Provider documented "expected reaction to vaccination in a patient with previous COVID exposure". He returned to the facility on 12/30.

VAERS ID: 921920 (history)
Vaccinated: 2021-01-05
Form: Version 2.0
Onset: 2021-01-05
Age: 40.0
Days after vaccination: 0
Sex: Female
Submitted: 0000-00-00
Location: Michigan
Entered: 2021-01-05

Vaccination / Manufacturer | Lot / Dose | Site / Route
-------------------------------|-----------|-------------------
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 025J20A / 1 | UN / IM

Administered by: Senior Living
Purchased by: 

Symptoms: Dyspnoea, Oxygen saturation decreased, Posture abnormal, Somnolence

SMQs: Anaphylactic reaction (broad), Anticholinergic syndrome (broad), Dementia (broad), Dystonia (broad), Acute central respiratory depression (broad), Pulmonary hypertension
(broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Respiratory failure (broad), Hypoglycaemia (broad), Infective pneumonia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None known
Current Illness: None listed
Preexisting Conditions: None listed
Allergies: None listed
Diagnostic Lab Data: Decrease in O2 levels

CDC Split Type:
Write-up: Within 10 minutes of receiving the vaccine patient began to look sleepy and started to gasp for breath. She called for help and slouched over in a chair and was moved to lay on the floor. Her feet were elevated and 911 was called. Epinephrine was given, patient responded by being able to gasp for breath and her face returned to a more natural state. Within 5 min she began to struggle to breath and epi was given again. Some improvement did occur. EMS arrived and she was taken to the hospital.

VAERS ID: 921989 (history)  Vaccinated: 2021-01-04
Form: Version 2.0  Onset: 2021-01-04
Age: 46.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Florida  Entered: 2021-01-05

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Anaphylactic reaction, Dizziness, Dyspnoea, Erythema, Obstructive airways disorder, Swelling, Swelling face
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Asthma/bronchospasm (broad), Anticholinergic syndrome (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
VAERS ID: 922118 (history) Vaccinated: 2020-12-31
Form: Version 2.0 Onset: 2021-01-03
Age: 59.0 Days after vaccination: 3
Sex: Male
Location: Georgia Submitted: 0000-00-00
Entered: 2021-01-05

<table>
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<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Blood pressure increased, Feeling jittery, Insomnia
SMQs: Neuropileptic malignant syndrome (broad), Hypertension (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Edarbyclor, Allopurinol, Apple Cider
Current Illness: no
Preexisting Conditions: High blood pressure
Allergies: Lisinopril
Diagnostic Lab Data: no
CDC Split Type:
Write-up: After three days, couldn't sleep the whole night. The next day, went to work, came home felt jittery. Close to midnight bp 200/90. Took Clonidine 0.1 and went to ER, bp 180/90. waited for almost two hours bp came down to 141/80. Today, bp is back to normal. Took sleeping medication Zzzquil to go to sleep.

| VAERS ID: | 922177 (history) | Vaccinated: | 2020-12-26 |
| VAERS ID: | 922177 (history) | Onset: | 2020-12-26 |
| Form: | Version 2.0 | Age: | 28.0 |
| Form: | Version 2.0 | Sex: | Male |
| Age: | 28.0 | Location: | Connecticut |
| Location: | Connecticut | Days after vaccination: | 0 |
| Location: | Connecticut | Submitted: | 0000-00-00 |
| Location: | Connecticut | Entered: | 2021-01-05 |
| Vaccination / Manufacturer | Lot / Dose | Site / Route |
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 011J2OA / 1 | RA / IM |

Administered by: Private | Purchased by: ?

Symptoms: Alanine aminotransferase increased, Borrelia test negative, CSF culture negative, CSF glucose normal, CSF mononuclear cell count increased, CSF polymorphonuclear cell count increased, CSF protein normal, CSF red blood cell count positive, CSF virus no organisms observed, CSF white blood cell count increased, Cryptococcus test, HIV test negative, Headache, Hepatitis A virus test, Hepatitis B test negative, Hepatitis C test negative, Herpes simplex test negative, Influenza virus test negative, Magnetic resonance imaging brain normal, Meningitis aseptic, Mononucleosis heterophile test negative, Polymerase chain reaction, Pyrexia, SARS-CoV-2 test negative, Staphylococcus test positive, Treponema test negative, Varicella virus test negative

SMQs: Liver related investigations, signs and symptoms (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Noninfectious meningitis (narrow), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: none
Current Illness: none
Preexisting Conditions: none
Allergies: none

Diagnostic Lab Data: Done on 12/31/ (ALT is 124), Hepatitis A and B, and C are negative. Mono negative, COVID 19 PCR is negative Influenza PCR negative; Blood culture x 1 bottle + for Staph hemolyticus and Staph hominis 1/1/2021; Lumbar tap showed elevated WBC of 23, 76% polys and 24% mononuclear, 25 RBC. Glucose and protein are normal. Culture negative.
CSF PCR viral panel is negative, RPR negative, Lyme serology is negative, Crypto Antigen is negative. 1/2/2021 - HIV serology is negative 1/5/2021 - MRI of the brain is normal

CDC Split Type:
Write-up: Aseptic meningitis, prolonged fever for more than a week, headache, elevated transaminase (ALT is 124). Lumbar tap showed elevated WBC of 23, 76% polys and 24% mononuclear, 25 RBC. Glucose and protein are normal. CSF PCR viral panel is negative. Patient was initially given Acyclovir and was stopped when HSV and VZV PCR were negative. He was given vancomycin IV for Gram positive bacteremia which was later stopped because it was deemed a contaminant.

<table>
<thead>
<tr>
<th>VAERS ID: 922218 (history)</th>
<th>Vaccinated: 2020-12-23</th>
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</thead>
<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-26</td>
</tr>
<tr>
<td>Age: 41.0</td>
<td>Days after vaccination: 3</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
</tr>
<tr>
<td>Location: Colorado</td>
<td>Entered: 2021-01-05</td>
</tr>
</tbody>
</table>

Vaccination / Manufacturer Lot / Dose Site / Route

| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | - / 1 | LA / IM |

Administered by: Public     Purchased by: ?
Symptoms: Chills, Cold sweat, Dizziness, Feeling cold, Headache, Hypotension, Pain, Peripheral coldness, Pyrexia, Septic shock, White blood cell count increased
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Toxic-septic shock conditions (narrow), Vestibular disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (broad), Sepsis (narrow), Opportunistic infections (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Entyvio
Current Illness:
Preexisting Conditions: Crohns disease
Allergies: N/A
Diagnostic Lab Data:
CDC Split Type:
Write-up: 3 Days after the covid vaccine. I Started to have these symptoms around 1am: fever, chills, body aches, cold sweats. I took ibuprofen fell asleep. Around 330am. Woke up with dizziness, headache, chills. Took tylenol. Fell asleep body was extremely cold esp hands and feet. Woke up around 7am. Still had severe body aches and was extremely dizzy,
headache worsening. Took ibuprofen. Woke up around noon. Extremely dizzy with chills and body aches headache still severe. Took tylonol. I was not getting better. went to hospital. It was found I had extremely high wbc and had extremely low blood pressure. Diagnosed as septic shock.

VAERS ID: 923540 (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-22
Age: 46.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Unknown  Entered: 2021-01-05

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / UNK</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Anaphylactic reaction, Dizziness, Dysphagia, Dyspnoea, Erythema, Headache, Lip swelling, Peripheral swelling, Pharyngeal swelling, Stridor, Tachypnoea
SMQs: Cardiac failure (broad), Anaphylactic reaction (narrow), Angioedema (narrow), Asthma/bronchospasm (broad), Anticholinergic syndrome (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Anaphylaxis Narrative: 12/22 received COVID-19 vaccine at 1209 and developed
SOB at 12:15. Took her own albuterol inhaler without relief. Transported to ED. PE: red hands with swelling, throat and lip swelling with difficulty swallowing. Later developed headache and dizziness then tachypnea and stridor. Meds given - See section 5 PLUS epinephrine IM and infusion @ 0.05 mcg/kg/min, Alb and ipratropium negs, racemic epi nebs. Admitted to the hospital on 12/22 and still hospitalized at the time of this report on 12/23. She remains on an epinephrine drip and was given methylprednisolone 125 mg IV x 2. No previous history of anaphylaxis. History of Reye's syndrome as a child when given aspirin.

VAERS ID: 923554 (history)  Vaccinated: 0000-00-00
Form: Version 2.0  Onset: 2020-12-23
Age: 55.0  Submitted: 0000-00-00
Sex: Female  Entered: 2021-01-05
Location: Unknown

<table>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LL / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Agitation, Anaphylactic reaction, Hypotension, Rash, Sedation
SMQs: Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hostility/aggression (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: 
Write-up: Agitation, Sedation, Anaphylaxis, Rash & HYPOtension
VAERS ID: **922299** (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 58.0 Days after vaccination: 0
Sex: Female
Location: Massachusetts Submitted: 0000-00-00
Entered: 2021-01-06

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Work  Purchased by: ?
Symptoms: Blood pressure increased, Heart rate increased, Hypoesthesia, Hypoesthesia oral, Laboratory test, Sensation of foreign body, Tremor
SMQs: Anaphylactic reaction (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Hypertension (narrow), Hypoglycaemia (broad), Dehydration (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: prilosec 20mg q hs pseudofed 1 tablet at 7:15 am and 4:15pm that day. lo loestrin fe 1 tablet a day (days 1-26) off 2 days
Current Illness: cold symptoms that started 12/15/20. covid tested 12/16/20 negative. cold symptoms were diminished on 12/23/20 but still had slight runny nose. (used pseudofed 30mg tab)
Preexisting Conditions: mild asthma
Allergies: anaphylaxis to cipro- see ER visit 4/2012. throat swelling, facial and eye swelling , head to toe hives. lasted 5 days with prednisone taper, benedryl and pepcid.
Diagnostic Lab Data: md drew labs in ER
CDC Split Type:
Write-up: I was instructed to stay for 30min as i have been anaphylatic to cipro in past. at 30min was told i could leave. while driving home on rt 91 my cheekbones became numb. then slowly a few min later my cheeks became numb. a few min later my lips became numb. as i was driving off exit to rt 5 in longmeadow i developed a lump in my throat. i turned around at top of exit and went back to highway to go to ER. this was approx 1645-1650. i went to ER arrived approx 1655. i was shaking. my bp and pulse were elevated. no tingling or swelling in my face. nurse checked my pupils and my smile and were wnl. no history of bells palsy. i received iv fluids, solucortef 125mg ivp, pepcid 20mg ivp, and benedryl 25mg ivp approx 1840pm. approx 45 min after solucortef numbness better but not gone. it started to come back
a little more before discharge, which i let md know. she discharged me with scripts for epi-pen, prednisone, and otc pepcid and benedryl. follow up with my pcp's office in am 12/24 at 10am with his NP. total time with facial numbness/lip numbness 29 hours.

VAERS ID: 922673 (history) Vaccinated: 2020-12-19
Form: Version 2.0 Onset: 2021-01-02
Age: 67.0 Days after vaccination: 14
Sex: Female Submitted: 0000-00-00
Location: Minnesota Entered: 2021-01-06

<table>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>ELO140 / UNK</td>
<td>LA / SYR</td>
</tr>
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</table>

Administered by: Work  Purchased by: ?
Symptoms: Angiogram, Blood test, Computerised tomogram, Computerised tomogram abdomen, Echocardiogram, Electrocardiogram, Lacunar stroke, Magnetic resonance imaging, Parasthesia, Urine analysis
SMQs:; Peripheral neuropathy (broad), Ischaemic central nervous system vascular conditions (narrow), Guillain-Barre syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: No prescription medications Dietary supplements: Vitamin D3, Magnesium, Essential Fatty Acids, Glucosamine and Chondroitin
Current Illness: None
Preexisting Conditions: None
Allergies: Doxycycline allergy
Diagnostic Lab Data: January 2: CT scan, EKG, MRI (3 different studies), CT/angio, and lots of blood work January 3: Echocardiogram January 5: CT scan of abdomen, urinalysis and lots more blood work I will be wearing a Zia patch for two weeks after it arrives in the mail.
CDC Split Type:
Write-up: I woke up with tingling in my right hand and arm, my right side, and down my right leg. I went to the ER at Hospital, and was confirmed to have had a stroke in my left thalmus.
VAERS ID: 922767 (history) Vaccinated: 2021-01-02
Form: Version 2.0 Onset: 2021-01-03
Age: 87.0 Days after vaccination: 1
Sex: Female
Location: Tennessee Submitted: 0000-00-00
Entered: 2021-01-06

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025L20A / 1</td>
<td>AR / IM</td>
</tr>
</tbody>
</table>

Administered by: Public  Purchased by: ?
Symptoms: Anal incontinence, Asthenia, Confusional state
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Noninfectious diarrhoea (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: unknown
Current Illness: unknown
Preexisting Conditions: unknown
Allergies: unknown
Diagnostic Lab Data: Patient was transported to Medical Center on 1/3/2021 and is currently still in the hospital as of today. Patients so reports they have ruled out heart attack or stroke. Her son reports they will be doing a stress test today.
CDC Split Type:
Write-up: Patient woke on 1/3/2021 weak having uncontroled bowels and off and on confusion.

VAERS ID: 922990 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 54.0 Days after vaccination: 0
Sex: Female
Location: Nevada Submitted: 0000-00-00
Entered: 2021-01-06

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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>037K20A / UNK</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>
The patient received the vaccine indicated above. Immediately following vaccination the patient states that they began feeling lightheaded and dizzy.

VAERS ID: 923000 (history)  
Form: Version 2.0  
Age: 55.0  
Sex: Female  
Location: Pennsylvania  
Vaccination / Manufacturer: COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH  
Lot / Dose: EJ1685 / 1  
Site / Route: LA / IM  

Administered by: Private  
Purchased by: ?  
Symptoms: Abdominal pain lower, Appendicectomy, Appendicitis, Computerised tomogram abnormal, Decreased appetite, Laparoscopic surgery, White blood cell count increased  
SMQs: Neuroleptic malignant syndrome (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)  
Life Threatening? Yes  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, ? days  
Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: NKDA  
Current Illness:  
Preexisting Conditions:  
Allergies:  
Diagnostic Lab Data: EKG (12/29/20)  

Dizziness, Electrocardiogram, Immediate post-injection reaction  
Anticholinergic syndrome (broad), Vestibular disorders (broad), Hypersensitivity (narrow)  
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, ? days  
Extended hospital stay? No  

VAERS ID: 923000 (history)  
Form: Version 2.0  
Age: 55.0  
Sex: Female  
Location: Pennsylvania  
Vaccination / Manufacturer: COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH  
Lot / Dose: EJ1685 / 1  
Site / Route: LA / IM  

Administered by: Private  
Purchased by: ?  
Symptoms: Abdominal pain lower, Appendicectomy, Appendicitis, Computerised tomogram abnormal, Decreased appetite, Laparoscopic surgery, White blood cell count increased  
SMQs: Neuroleptic malignant syndrome (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)  
Life Threatening? Yes  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Valtrex Wellbutrin Abilify Fish Oil Multi-Vitamin Biotin
Current Illness: None
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: CT Scan showed acute appendicitis resulting in a laparoscopic appendectomy. Elevated WBCs.
CDC Split Type:
Write-up: Severe right lower quadrant pain, anorexia over 12 hours. Went to the emergency department. Lab results showed elevated WBC and CT scan showed acute appendicitis. Admitted for urgent surgery: laparoscopic appendectomy. Was hospitalized from 12/26/20-12/28/20.

<table>
<thead>
<tr>
<th>VAERS ID: 923459 (history)</th>
<th>Vaccinated: 2020-12-30</th>
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</thead>
<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-30</td>
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<tr>
<td>Age: 49.0</td>
<td>Days after vaccination: 0</td>
</tr>
<tr>
<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
</tr>
<tr>
<td>Location: Oklahoma</td>
<td>Entered: 2021-01-06</td>
</tr>
</tbody>
</table>

Vaccination / Manufacturer | Lot / Dose | Site / Route

Administered by: Public  Purchased by: ?
Symptoms: Flushing, Hypotension, Pyrexia, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Hypersensitivity (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: allopurinol 100mg QD, Dilantin 30mg 2 cap QD, escitalopram 10mg QD, Zetia 10mg QD, loratadine 10mg QD, meloxicam 7.5mg QD, omeprazole 20mg QD, phenytoin EX 100mg 3 tabs QHS, phenytoin EX 100mg 2 tabs QAM, polymyxin b/trimethoprim solution 1
Current Illness: None
Preexisting Conditions: gout, optic nerve problem, dry eye syndrome, seizure disorder,
depression, blepharitis, intellectual disability, Down syndrome, gingivitis, psychosis, myopia, seborrheic dermatitis, GERD, hypokalemia

**Allergies:** No known allergies

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** patient was noted to be flushed by residential home staff on 12/30/2020, approximately 2.5hrs after vaccination, fever present at that time. Prior to COVID19 vaccine administration, this patient did have exposure and was close contact with a known case of COVID19 in a residential care employee. Patient was taken to hospital for evaluation of febrile status, had positive COVID19 test at that time, and reported hypotension per residential care staff.

| VAERS ID: | 923510 (history) |
| VAERS ID: | Vaccinated: | 2021-01-04 |
| Form: | Version 2.0 |
| Onset: | 2021-01-05 |
| Age: | 85.0 |
| Days after vaccination: | 1 |
| Sex: | Male |
| Submitted: | 0000-00-00 |
| Location: | Tennessee |
| Entered: | 2021-01-06 |

**Vaccination / Manufacturer**

| COVID19: | COVID19 (COVID19 (MODERNA)) / MODERNA |
| Lot / Dose | 025L20A / 1 |
| Site / Route | LA / IM |

**Administered by:** Public  **Purchased by:** ?

**Symptoms:** Anaphylactic shock, Dyspnoea, Erythema, Injection site erythema, Injection site swelling, Peripheral swelling, Rash

**SMQs:** Cardiac failure (broad), Anaphylactic reaction (narrow), Angioedema (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 1 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** UNKNOWN

**Current Illness:** UNKNOWN

**Preexisting Conditions:** UNKNOWN

**Allergies:** PCN

**Diagnostic Lab Data:** UNKNOWN

**CDC Split Type:**

**Write-up:** PATIENT SPOUSE REPORTS THAT PATIENT RECEIVED VACCINE ON 1/4/2021
AND ON 1/5/2021 PATIENT'S ARM BEGAN TO TURN RED AND SWELL AT THE INJECTION SITE. THE SWELLING AND REDNESS BEGAN TO GO DOWN HIS ARM AND HE BROKE OUT INTO A RASH. PATIENT THEN BECAME SHORT OF BREATH. EMS WAS CALLED AND PATIENT WAS TRANSPORTED TO HOSPITAL, WHERE HE WAS TREATED FOR ANAPHYLACTIC SHOCK TO THE COVID MODERNA VACCINE.

---

**VAERS ID:** [923766](history)  
**Vaccinated:** 2020-12-23  
**Onset:** 2020-12-23  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-06

**Form:** Version 2.0  
**Age:** 26.0  
**Sex:** Female  
**Location:** New York

## Vaccination / Manufacturer

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / UNK</td>
<td>RA / -</td>
</tr>
</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Gastric disorder, Headache, Laboratory test, Lip swelling, Nausea, Swelling face, Urticaria

**SMQs:** Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** Yes  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 1 days  
  **Extended hospital stay?** No

**Previous Vaccinations:**  
**Other Medications:** ADDERALL

**Current Illness:**  
**Preexisting Conditions:** ADHD, Lyme disease.

**Allergies:** Latex, benzol peroxide

**Diagnostic Lab Data:** They did perform labs while I was in the hospital but I am not sure what they were.

**CDC Split Type:** vsafe

**Write-up:** Went to the ER on the 31st, my face swelled and chest was covered in hives. Lips swelled. I would get nauseated and I felt like there was acid in my stomach. I also had a headache. I have been taking Zyrtec, Benadryl as needed.
VAERS ID: 923822 (history)  Vaccinated: 2020-12-21
Form: Version 2.0  Onset: 2020-12-22
Age: 36.0  Days after vaccination: 1
Sex: Female
Location: Massachusetts
Submitted: 0000-00-00
Entered: 2021-01-06

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Work  Purchased by: ?
Symptoms: Altered state of consciousness, Chills, Diarrhoea, Dizziness, Fatigue, Headache, Hyperhidrosis, Pain, Pneumonia, Productive cough, Pyrexia, Vomiting
SMQs: Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: The day after the vaccine I had fatigue and body aches. Then on 12-23 fevers of 101.4, chills, body aches, diarrhea, vomiting, productive cough, and profuse sweating. Jan 1st I was in the shower and was dizzy with a headache. Loss of consciousness almost happened and that is when i got out of the shower and laid down. Went to the ED and was diagnosed with bilateral pneumonia
VAERS ID: 923892 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 49.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-06

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / SYR</td>
</tr>
</tbody>
</table>

Administered by: Work  Purchased by: 

Symptoms: Blood pressure increased, Blood test, Dizziness, Electrocardiogram, Fear, Feeling abnormal, Feeling hot, Flushing, Headache, Immediate post-injection reaction, Injection site reaction, Limb discomfort, Pain in extremity, Palpitations, Peripheral coldness, Tremor, Urine analysis

SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Parkinson-like events (broad), Noninfectious encephalopathy/delirium (broad), Hypertension (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypersensitivity (narrow), Tendinopathies and ligament disorders (broad), Hypoglycaemia (broad)


Previous Vaccinations: Other Medications: Ziac (blood pressure) Zoloft Levothyroxine (thyroid medication) Multi Vitamin Calcium Trisprintec (birth control) Generic Sudafed

Current Illness: Preexisting Conditions: Hypertension Throid  Allergies: Arithimycin Tetracycline

Diagnostic Lab Data: EKG Blood work Urine test

CDC Split Type: vsafe

Write-up: I did let the nurse know right after I got the vaccine. It did feel like a huge water balloon was sitting on my arm and very heavy at the site. I went to the waiting area and the last 5 minutes and I started feeling weird, kind of getting dizzy and my heart started racing really fast. Am I can tell I was getting really hot and my face was flushed and my heart was racing and my hands started shaking, trembling almost like I couldn't control it. I've never experienced something like this. The part that really scared me was my heart racing like it was going to come out of my chest. They called a code, put me in a wheelchair and took me to the ER (where I work). They took my blood pressure which was really high, they did EKG,
blood work and urine test. They kept me there for about five hours, while watching me. And the last weird thing that happened at one point I felt like liquid was running thru my body and my feet were really cold for several hours, It felt like someone was pouring liquid over me. I kept asking the nurse if this is normal and no one knew what to tell me. After everything started slowing back down and it had been a couple hours and the next day i felt like I had a slight head ache and felt out of it, kind of like I had a hangover and of course my arm was really sore. The Doctor in the ER did advise me not to get the second dose as it will be worse than the first one.

VAERS ID: **923901** *(history)* Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 54.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Wisconsin Entered: 2021-01-06

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>UN / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Chest pain, Dyspnoea, Feeling hot, Flushing
SMQs.: Anaphylactic reaction (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: ALBUTEROL INHALER AS NEEDED, ATORVASTATIN 20MG DAILY, CITALOPRAM 20MG DAILY, GLIMEPIRIDE 1 MG DAILY, LISINOPRIL 20MG DAILY. ASPIRIN 81MG DAILY
Current Illness:
Preexisting Conditions: DIABETES, HYPERTENSION, DEPRESSION, ASTHMA
Allergies: PENCILLIN (HIVES, GI UPSET), IODINE (HIVES, RASH), SULFA (UNKNOWN), IODINATED CONTRAST DYE (HIVES), LATEX (HIVES)
Diagnostic Lab Data:
CDC Split Type:
Write-up: LEFT SIDED CHEST PAIN, SHORTNESS OF BREATH, FELT WARM AND FLUSHED
VAERS ID: 923935 (history) Vaccinated: 2020-12-19
Form: Version 2.0 Onset: 2020-12-19
Age: 62.0 Days after vaccination: 0
Sex: Female
Location: Massachusetts Submitted: 0000-00-00
Entered: 2021-01-06

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / SYR</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Chills, Cytokine storm, Fatigue, Malaise, Nausea, Oxygen saturation abnormal, Pyrexia, Respiratory failure, SARS-CoV-2 test positive, Vomiting
SMQs:; Anaphylactic reaction (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Acute central respiratory depression (narrow), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypersensitivity (broad), Tumour lysis syndrome (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Hypokalaemia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 11 days
   Extended hospital stay? No
Previous Vaccinations: fever and chills post shingles shot
Other Medications: tylenol for arthritis
Current Illness: none
Preexisting Conditions: arthritis
Allergies: morphine, erythromycin, IV iron
Diagnostic Lab Data: rapid covid - positive labs - all normal now
CDC Split Type: vsafe
Write-up: I got my shot on the 19th and that evening it was like a light switch and I was so tired I went to sleep at 730pm I had severe chills and fever and had to go to bed. The next day I still wasn't feeling well and I was called in to get covid tested and I went to the ER on the 21st and took a rapid covid test that was positive. I was stable and had good oxygenation and was discharged. I have fever nausea vomiting I also had problems with O2 stat i was in the 80s and realized I was having respiratory failure so I was admitted on the 27th and I've been here ever since. I had kinetic storm and infusions my O2 stats were bad and I was sent to the
covid unit and put on high flow oxygen and negative for a PE, I'm still on the covid unit but I feel much better today

VAERS ID: 924029 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 53.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2021-01-06

<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>012620A / UNK</td>
<td>- / IM</td>
</tr>
</tbody>
</table>

Administered by: Public Purchased by: ?
Symptoms: Dizziness, Dysphagia, Heart rate increased, Throat tightness
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Vestibular disorders (broad), Hypersensitivity (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: plaquinel synthroid
Current Illness: Lupus Hypothyroidism
Preexisting Conditions:
Allergies: none
Diagnostic Lab Data: Benadryl 50 mg P.O. - I was taken via ambulance to the hospital where I received IV steroids & hydration.
CDC Split Type: N/A
Write-up: after 20-30 minutes my throat started to get tight, I could not swallow properly, I felt dizzy & my heart was beating fast.
VAERS ID: 924050 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-06
Age: 55.0  Days after vaccination: 0
Sex: Female
Location: Hawaii
Submitted: 0000-00-00
Entered: 2021-01-06

Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | - / UNK | - / -

Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction, Dyspnoea
SMQs: Anaphylactic reaction (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: unknown
Preexisting Conditions: unknown
Allergies: Zolpidem, chocolate
Diagnostic Lab Data:
CDC Split Type:
Write-up: anaphylaxis, dyspnea

VAERS ID: 924173 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-25
Age: 41.0  Days after vaccination: 2
Sex: Male
Location: Michigan
Submitted: 0000-00-00
Entered: 2021-01-06

Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EJ1685 / 1 | LA / IM

Administered by: Private  Purchased by: ?
Symptoms: Catheterisation cardiac, Chest pain, Electrocardiogram, Palpitations, Troponin
SMQs: Arrhythmia related investigations, signs and symptoms (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: metoprolol succinate XL 25 mg 24 hr tablet Commonly known as: Toprol XL
Learn more Take 1 tablet (25 mg total) by mouth daily. cholecalciferol 125 mcg (5,000 unit) tablet
Commonly known as: Vitamin D3 ferrous sulfate 325 mg (65 mg iron)
Current Illness: None
Preexisting Conditions: Coronary Artery Disease, Asthma
Allergies: None
Diagnostic Lab Data: I had cardiac troponin, ECG and a cardiac catheterization to rule out major adverse cardiovascular event. I am not sure if the vaccine caused the symptoms, but I strongly suspect it.
CDC Split Type:
Write-up: I started having intermittent chest pain moderate in intensity and palpitations.

VAERS ID: 924188 (history) Vaccinated: 2020-12-26
Form: Version 2.0 Onset: 2020-12-26
Age: 38.0 Days after vaccination:
Sex: Female
Location: Arizona Submitted: 0000-00-00
Entered: 2021-01-06

<table>
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<th>Site / Route</th>
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<tbody>
<tr>
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<td>EH9899 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other Purchased by: ?
Symptoms: Computerised tomogram, Migraine, Nausea, Paraesthesia, Swelling face
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (narrow), Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications: no
Current Illness: no
Preexisting Conditions: no
Allergies: no
Diagnostic Lab Data: CT Scan at Boswell Medical Center 10401 W. Thunderbird, Sun City, AZ
CDC Split Type:
Write-up: Migraines, right side of face swollen, nausea, tingling

VAERS ID: 924201 (history)   Vaccinated: 2020-12-24
Form: Version 2.0   Onset: 2021-01-03
Age: 94.0   Days after vaccination: 10
Sex: Male
Location: Maryland
Submitted: 0000-00-00
Entered: 2021-01-06

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / UNK</td>
<td>- / IM</td>
</tr>
</tbody>
</table>

Administered by: Private   Purchased by: ?
Symptoms: Acute coronary syndrome, Back pain, Catheterisation cardiac abnormal, Chest pain, Coronary arterial stent insertion, Coronary artery stenosis, Echocardiogram abnormal, Ejection fraction decreased, Electrocardiogram abnormal, Percutaneous coronary intervention, Troponin increased
SMQs:; Cardiac failure (narrow), Myocardial infarction (narrow), Arrhythmia related investigations, signs and symptoms (broad), Retroperitoneal fibrosis (broad), Embolic and thrombotic events, arterial (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (narrow), Other ischaemic heart disease (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications: Prilosec 20 mg qd Lipitor 20 mg qd Levothyroxine 100 mcg/d (inchr from 88 for TSH 4.78 8/26/20) Ativan 0.5-1 mg hs prn 10-15/month EC ASA 2 x 81 mg qd
Current Illness: Adjustment disorder/grief reaction
Preexisting Conditions: PAST MEDICAL HISTORY Surgical- T&A age 5 Appendectomy age 8 or 9 Rhinoplasty for deviated septum x 2 1960s Gas gangrene Right Leg- debridement 1972
Right inguinal hernia ~2002 Bilateral Cataracts/IOLs 2014 Umbilical Herniorrhaphy 2020 Medical- Hepatitis and possible malaria 1944 Hyperlipidemia GERD/Barretts- Lower GI bleed hospitalized ~1994; no Tx Hemorrhoids Anal fistula Herpes zoster Nov 2012 Left Trigeminal Hypothyroidism Dec 2013 (fatigue, elevated TSH 5.81, fT4 0.7) Childhood Diseases- Measles- yes; Mumps- yes; Rubella- yes; Varicella- yes; Rheumatic Fever- no; Pertussis- yes Habits- Tobacco- quit 1950; Alcohol- 0-2 night; Drugs- no Immunizations- Td- 3/08, 8/22/19; TdaP- ; Influenza- 8/25/20; Pneumovax- yes <2003, 3/08; PCV13- 12/19/14; Hep A- ; Hep B- ; Zostavax- 3/07; Shingrix- 2/21/18, 10/30/18; Covid 19 (Moderna) 12/24/20
Allergies: PCN- rash? Bee sting- swelling (has Epipen) (no hx food or latex allergy)
Diagnostic Lab Data: Elevated Troponin, NSST changes on ECG, Cardiac Catheterization showing 99% mid-LAD and 30-40% RCA lesions. Echocardiogram +hypokinesis of anterior wall/septum with reduced EF 45-50%
CDC Split Type:
Write-up: Patient tolerated the vaccine well with no apparent side effects. Ten days later awoke 12:30 AM with severe chest and upper back pain, presented to Med Center where he was found to have an Acute Coronary Syndrome. Transferred to Medical Center where he underwent successful PCI with two drug eluting stents for a 99% mid-LAD stenosis

VAERS ID: 924208 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2020-12-31
Age: 58.0 Days after vaccination: 1
Sex: Male
Location: Illinois Submitted: 0000-00-00
Entered: 2021-01-06

Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (MODERNA)) | MODERNA 037K20A | - / -

Administered by: Senior Living Purchased by: ?
Symptoms: Dyspnoea, Fatigue, Pyrexia
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Shortness of breath, fever, fatigue

VAERS ID: 924297 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 71.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: New York Entered: 2021-01-06

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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0140 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living Purchased by: ?

Symptoms: Blood glucose normal, COVID-19, Unresponsive to stimuli, Urinary tract infection
SMQs: Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyperresponsive episode (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
    Extended hospital stay? No

Previous Vaccinations:
Other Medications: Tylenol Tablet 325 MG (Acetaminophen) Aspirin EC Tablet Delayed Release 81 MG (Aspirin) Topamax Tablet 100 MG (Topiramate) Keppra Tablet 750 MG (LevETIRAacetam) Melatonin Tablet 10 MG Multi-Day Plus Iron Tablet (Multiple Vitamins-Iron) Refre

Current Illness: RIGHT LEG POSITIVE (+) EXAM FOR DVT

Preexisting Conditions: CHRONIC OBSTRUCTIVE PULMONARY DISEASE, UNSPECIFIED OTHER GENDER IDENTITY DISORDERS MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES OTHER SEIZURES INSOMNIA DUE TO OTHER MENTAL DISORDER ESSENTIAL (PRIMARY) HYPERTENSION UNSPECIFIED ATRIAL FIBRILLATION ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS SCHIZOPHRENIA, UNSPECIFIED BENIGN PROSTATIC HYPERPLASIA WITHOUT LOWER URINRY TRACT SYMP TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS

Allergies: No known allergies.

Diagnostic Lab Data: Transferred to hospital; diagnosed with COVID-19 and UTI.
At around 11:40am resident was observed to be unresponsive. Resident noted with pulse and respiration. Not in any distress. Lung sounds clear. Vital Signs BP162/82 P86 R18 T97.1 O2 Sat 96%, fingerstick is 133mg/dl. Resident received COVID 19 vaccine at 11:25am. O2 via 2l NC initiated. Nurse Stat call, 911 initiated, MD at Bedside. Resident awake and responsive. EMT responded and resident left with EMT to be transferred to hospital, remains awake and not in any respiratory distress.

VAERS ID: 924410

Form: Version 2.0

Age: 76.0

Sex: Male

Location: South Dakota

Vaccinated: 2020-12-28

Onset: 2021-01-05

Days after vaccination: 8

Submitted: 0000-00-00

Entered: 2021-01-06

COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA

Lot / Dose: 011J20A / 1

Site / Route: RA / IM

Administered by: Private

Purchased by: ?

Symptoms: Adult failure to thrive, Asthenia, Respiratory failure

SMQs: Anaphylactic reaction (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Acute central respiratory depression (narrow), Guillain-Barre syndrome (broad), Hypersensitivity (broad), Respiratory failure (narrow), Hypokalaemia (broad)

Life Threatening? No

Birth Defect? No

Died? No

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: AMLODIPINE BESYLATE 5MG TAB ASPIRIN 81MG EC TAB LEVOTHYROXINE (SYNTHROID) 88MCG TAB TAMSULOSIN HCL 0.4MG CAP FLUTICASONE 500MCG/SALMETEROL 50MCG INHL DISK 60 ROSUVASTATIN CA 20MG TAB CHOLECALCIFEROL 25MCG (1,000UNIT) TIOTROPIUM 2.5MCG

Current Illness:

Preexisting Conditions: Hypertension, COPD with oxygen dependence, hypothyroidism, osteoporosis

Allergies: None

Diagnostic Lab Data:

Write-up: Adult failure to thrive; Chronic hypoxemic respiratory failure; Generalized weakness
VAERS ID: 924524 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 31.0 Days after vaccination: 0
Sex: Female
Location: Minnesota Submitted: 0000-00-00
Entered: 2021-01-06

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>026L20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Pharmacy Purchased by: ?
Symptoms: Hypoaesthesia, Obstructive airways disorder, Pruritus, Throat irritation
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Asthma/bronchospasm (broad), Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Eosinophilic pneumonia (broad), Hypersensitivity (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Sexual dysfunction (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: ANAPHYLAXIS TO INFLUENZA VACCINE, UNKNOWN DATE
Other Medications: UNKNOWN
Current Illness: UNKNOWN
Preexisting Conditions: UNKNOWN
Allergies: ANAPHYLAXIS TO INFLUENZA VACCINES
Diagnostic Lab Data: UNKNOWN
CDC Split Type:
Write-up: PATIENT REPORTING ITCHING AT 30 MINUTES POST INJECTION. AT 1.5 HOURS POST INJECTION PATIENT REPORTED ITCHY THROAT AND NUMBNESS OF LEFT SIDE OF FACE. AT THAT TIME ADVISED TO GO TO EMERGENCY ROOM. NEXT DAY WHEN I FOLLOWED UP WITH PATIENT, SHE REPORTED HER AIRWAY STARTED TO CLOSE AND SHE RECEIVED EPINEPHRINE, AFTER 5 HOURS HER STARTED TO CLOSE AGAIN AND RECEIVED ANOTHER DOSE OF EPINEPHRINE, WAS RELEASED FROM HOSPITAL ROUGHLY 15-16 HOURS AFTER GOING TO ER.

VAERS ID: 924539 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 40.0 Days after vaccination: 0
Sex: Female
Location: California Submitted: 0000-00-00
Entered: 2021-01-06
Administered by: Public       Purchased by: ?
Symptoms: Blood test, Dizziness, Flushing, Nausea, Oropharyngeal pain, Retching, Throat tightness
SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 0 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Albuterol Inhaler, Nortriptyline, baclofen
Current Illness: none
Preexisting Conditions: osteo arthritis, joint hyper mobility, chronic migrans, fibromyalgia, IBS,
Allergies: Penicillin and mushrooms, and nsaid.
Diagnostic Lab Data: 01/06/21-Blood panels and vital signs.
CDC Split Type:
Write-up: At 10:12 am, Client c/o of sore throat, tightness in throat that relieve quickly, nausea, dry heaves, flushed, light headed and dizziness. Called for EMT. They arrive at 10:25 am and transported her to the local hospital for observation. 01/06/21-Treatment in hospital blood draw, medications given Zofran, Decadron, Benadryl, and Pepcid, and IV fluids. Discharged home at 1244.

VAERS ID: 924658  (history)       Vaccinated: 2020-12-26
Form: Version 2.0       Onset: 2021-01-05
Age: 92.0       Days after vaccination: 10
Sex: Female       Submitted: 0000-00-00
Location: Florida       Entered: 2021-01-06

Administered by: Senior Living       Purchased by: ?
Symptoms: Erythema, Hypotension, Oxygen saturation decreased, Sensitive skin, Skin
warm, Unresponsive to stimuli
SMQs: Anaphylactic reaction (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Acute central respiratory depression (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Caltrate, Vitamin B, Azopt, Ensure, Sertraline, Dulcolax, Benzonatate, Tylenol, Melatonin, Flonase, Imodium, Ativan.
Current Illness: L98.9 Disorder of the skin and subcutaneous tissue, unspecified-Scalp(Primary, Admission), R41.841 Cognitive communication deficit, R13.10 Dysphagia, unspecified, R13.12 Dysphagia, oropharyngeal phase, C44.311 Basal cell carcinoma of skin of nose, R26.81 Unsteadiness on feet, M62.81 Muscle weakness (generalized), R53.1 Weakness, Z74.09 Other reduced mobility, Z74.1 Need for assistance with personal care, D51.9 Vitamin B12 deficiency anemia, unspecified, D64.9 Anemia, unspecified, E87.6 Hypokalemia, F03.90 Unspecified dementia without behavioral disturbance, F32.9 Major depressive disorder, single episode, unspecified, G47.00 Insomnia, unspecified, H40.9 Unspecified glaucoma
Preexisting Conditions: L98.9 Disorder of the skin and subcutaneous tissue, unspecified-Scalp(Primary, Admission), R41.841 Cognitive communication deficit, R13.10 Dysphagia, unspecified, R13.12 Dysphagia, oropharyngeal phase, C44.311 Basal cell carcinoma of skin of nose, R26.81 Unsteadiness on feet, M62.81 Muscle weakness (generalized), R53.1 Weakness, Z74.09 Other reduced mobility, Z74.1 Need for assistance with personal care, D51.9 Vitamin B12 deficiency anemia, unspecified, D64.9 Anemia, unspecified, E87.6 Hypokalemia, F03.90 Unspecified dementia without behavioral disturbance, F32.9 Major depressive disorder, single episode, unspecified, G47.00 Insomnia, unspecified, H40.9 Unspecified glaucoma
Allergies: PCN, Sulfa
Diagnostic Lab Data: All assessment and laboratory data is being managed by the hospital, not this facility at this time, the resident is still admitted to the hospital and they are attempting to stabilize
CDC Split Type:
Write-up: Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation.
VAERS ID: 924722  (history)  Vaccinated: 2021-01-02
Form: Version 2.0  Onset: 2021-01-06
Age: 96.0  Days after vaccination: 4
Sex: Female
Location: Illinois  Submitted: 0000-00-00
Entered: 2021-01-06

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0142 / UNK</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Tylenol, amlodipine, ASA, Atorvastatin, combivent, cyclobensap
Current Illness: neck fracture, CKD 3, HTN, HL, edema, heart disease
Preexisting Conditions: asthma
Allergies: cortisone, morphine
Diagnostic Lab Data: None
CDC Split Type:
Write-up: Severe shortness of breath, administered inhaler, hydralazine with no improvement. Dr. notified. Sent to ER

VAERS ID: 927830  (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-22
Age: 71.0  Days after vaccination: 0
Sex: Female
Location: Florida  Submitted: 0000-00-00
Entered: 2021-01-06

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>RA / -</td>
</tr>
</tbody>
</table>
Administered by: Private  Purchased by: ?
Symptoms: Abdominal pain, Bilirubin urine present, Chills, Chromaturia, Laboratory test, Liver function test increased, Nausea, Vomiting
SMQs:; Rhabdomyolysis/myopathy (broad), Liver related investigations, signs and symptoms (narrow), Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Biliary system related investigations, signs and symptoms (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Synthroid, Tagamet, Lipitor, Protonix
Current Illness: None
Preexisting Conditions: Hypothyroid, GERD, Arthritis
Allergies: NKA
Diagnostic Lab Data: ongoing hospitalization with multiple tests
CDC Split Type:
Write-up: Abdominal pain, chills, n/v, dark urine, elevated LFT"s, Bilirubin in urine. Patient currently admitted to hospital

VAERS ID: 927938 (history)  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2020-12-30
Age: 73.0  Days after vaccination: 1
Sex: Male
Location: Hawaii  Submitted: 0000-00-00
Entered: 2021-01-06

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<tr>
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<td>039K20A / 1</td>
<td>- / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Chest X-ray abnormal, Pneumonia, Pyrexia, SARS-CoV-2 test positive
SMQs:; Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations: No
Other Medications: No
Current Illness: No
Preexisting Conditions: No
Allergies: PENICILLIN (UNKNOWN, REMOTE REACTION)
Diagnostic Lab Data: No
CDC Split Type: No
Write-up: Received Moderna vaccine on 12/29/2020. 12/30/2020 fever of 100.4 Tylenol given and monitored and fever went down. 12/31/2020 Chest x-ray completed and sent to the hospital and admitted with pneumonia. 1/3/2021 reported by the hospital that Covid-19 results were positive. He had had Covid-19 positive results back on 11/4/2020 prior to vaccine.

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<thead>
<tr>
<th>VAERS ID: 924820 (history)</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-02</td>
</tr>
<tr>
<td>Age: 81.0</td>
<td>Days after vaccination: 2</td>
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<tr>
<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Colorado</td>
<td>Entered: 2021-01-07</td>
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Administered by: Private  Purchased by: ?
Symptoms: Chills, Cough, Dysuria, Micturition urgency, Nausea, Pneumonia, Pollakiuria, Vomiting
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations: No
Other Medications: No
Current Illness: No
Preexisting Conditions: No
Allergies: PENICILLIN (UNKNOWN, REMOTE REACTION)
Diagnostic Lab Data:
CDC Split Type:
Write-up: COUGH, RIGORS, NAUSEA, VOMITING, URINARY URGENCY/FREQUENCY, DYSURIA - FOUND TO HAVE LLL PNEUMONIA, CONCERNING FOR POSSIBLE CYRPTOGENIC ORGANIZING PNEUMONIA

| VAERS ID: | 924822 (history) |
| VAERS ID: | Vaccinated: 2020-12-29 |
| Form: | Version 2.0 |
| Onset: | 2020-12-31 |
| Age: | 82.0 |
| Days after vaccination: | 2 |
| Sex: | Female |
| Submitted: | 0000-00-00 |
| Location: | Unknown |
| Entered: | 2021-01-07 |

| Vaccination / Manufacturer | Lot / Dose | Site / Route |
| COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 025J20-2A / 1 |

Administered by: Private  
Purchased by: ?

Symptoms: Chest pain, Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: ATIVAN METOPROLOL
Diagnostic Lab Data:
CDC Split Type:
Write-up: PATIENT DEVELOPED PROGRESSIVE NEW DYSPNEA, DIFFERENT FROM HER BASELINE. SHE HAS BEEN HOSPITALIZED TWICE FOR PERSISTENT DYSPNEA AND CENTRALIZED CHEST PAIN, WHICH HAS OTHERWISE HAD NEGATIVE WORK UP.
VAERS ID: 924835 (history) Vaccinated: 2021-01-04
Form: Version 2.0 Onset: 2021-01-05
Age: 23.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Massachusetts Entered: 2021-01-07

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<td>025520A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?

Symptoms: Blood test normal, Chest X-ray normal, Chills, Dizziness, Electrocardiogram normal, Headache, Injection site pain, Nausea, Pain, Pyrexia, Tachycardia, Troponin normal, Urine analysis normal

SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: None

Current Illness: Diagnosed with covid December 1st, recovered 3 and a half weeks prior to vaccine

Preexisting Conditions: None
Allergies: None

Diagnostic Lab Data: Troponin - normal Blood Panel - normal Chest x-ray- normal Urine analysis- normal EKG- normal showed tachycardia

CDC Split Type:
Write-up: 103.5 Fever that wouldn?t come down with Tylenol, chills, sharp headache, tachycardia, site pain, dizziness, body aches, nausea All symptoms started 11 hours after first dose of vaccine (3AM), went to hospital 15 hours after symptoms started and was treated for 9 hours until all symptoms abruptly stopped
VAERS ID: 925078  (history)  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2020-12-30
Age: 39.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: New York  Entered: 2021-01-07

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<td>EL0140 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Cardiac arrest, Hypotension, Oxygen saturation decreased
SMQs:; Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Cardiomyopathy (broad), Respiratory failure (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 10 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Reglan 5mg, Maalox Advance 20mg, Prednisone 2.5 mg, Metoprolol succinate ER 25mg, Prednisone Lisinopril 2.5 mg, Eliquis 5mg, Atorvastatin 80mg, Gabapentin300mg, Tylenol 325mg x2, multivitamin, iron 325mg, magnesium oxide 400mg, zinc 220mg,
Current Illness: N/A
Preexisting Conditions: acute cerebral vascular insufficiency, aphasia, cerebral infarction, gastro reflux, vitamin deficiency, long use systemic steroid, central pain syndrome, dermatitis, cardiomyopathy, crones disease, SOB
Allergies: N/A
Diagnostic Lab Data: Inpatient
CDC Split Type:
Write-up: 12/29/2020 2 hr after vaccination patient became hypotensive, decreased oxygen levels was transferred to Hospital currently inpatient at hospital - admitted for cardiac arrest
VAERS ID: 925254 (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-23
Age: 40.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Texas  Entered: 2021-01-07

<table>
<thead>
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<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>RA / SYR</td>
</tr>
</tbody>
</table>

Administered by: Work  Purchased by: ?

Symptoms: Chills, Fatigue, Full blood count normal, Heart rate irregular, Influenza like illness, Mobility decreased, Pain in extremity, Pyrexia, SARS-CoV-2 test negative, Septic screen
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Parkinson-like events (broad), Cardiac arrhythmia terms, nonspecific (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Levaquin
Diagnostic Lab Data: Covid test Sepsis test full panel blood work
CDC Split Type: vsafe

Write-up: I woke the next morning with flu like symptoms my arm was hurting, I was feelin tired and really couldn"t get out of bed. As the day progressed I got chills, started running a fever, It went up to 104 and my heart rate went up and down from 120-165 so I went to the ER. They gave me fluids and ran a whole bunch of test, tested me for Covid and Sepsis and everything came back normal and negative for Covid. They monitored my heart rate and once it started getting back to normal, they ended up letting me go home, I was there from 8pm to about 3am. After that I felt tired and felt like when I had Covid back in November. I started feeling better about Sunday, still a little tired but felt more back to normal. My heart rate is still getting back to normal so my Dr is following me on that.
VAERS ID: 925756 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-31
Age: 66.0 Days after vaccination: 2
Sex: Female Submitted: 0000-00-00
Location: Louisiana Entered: 2021-01-07

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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / 1</td>
<td>LA / -</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Computerised tomogram, Echocardiogram, Hypoaesthesia, Hypoaesthesia oral, Laboratory test, Magnetic resonance imaging, Pain, SARS-CoV-2 test negative
SMQs: Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), COVID-19 (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: ; BENTYL; ;
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Hypertension; Low back pain; Reflux gastritis
Allergies:
Diagnostic Lab Data: Test Name: Cat scan; Result Unstructured Data: Test Result:Unknown results; Test Name: ultrasound of heart; Result Unstructured Data: Test Result:Unknown results; Test Name: labs; Result Unstructured Data: Test Result:Unknown results; Test Name: MRI; Result Unstructured Data: Test Result: Unknown results; Test Date: 20210101; Test Name: Nasal Swab/ Covid 19; Result Unstructured Data: Test Result:Negative
CDC Split Type: USPFIZER INC2021003473
Write-up: Right sided facial & top lip Numbness & recurring pain; Right sided facial & top lip Numbness & recurring pain; Right sided facial & top lip Numbness & recurring pain; This is a spontaneous report from a contactable consumer reporting for herself. A 66-year-old female patient (not pregnant at the time of vaccination) received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number EK9231), via unspecified route of administration on 29Dec2020 13:30 on left arm at single dose for COVID-19 immunization. Facility where the most recent COVID-19 vaccine was administered in Hospital. Medical history included Hypertension, Reflux and low back pain. Concomitant medications included ibuprofen, dicycloverine hydrochloride (BENTYL), Valsartan and omeprazole. The patient
previously took codeine, Bactrim, Zyrtec and experienced allergies. The patient experienced Right sided facial and top lip Numbness, recurring pain on 31Dec2020 16:00. All events resulted in emergency room visit and Hospitalization on 31Dec2020 for 1 day. The patient underwent lab tests and procedures, which included Cat scan, MRI, ultrasound of heart and labs on unspecified dates, Nasal Swab/Covid 19 test on 01Jan2021 with negative result. The outcome of the events were not resolved.

VAERS ID: 925777  (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 39.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Michigan Entered: 2021-01-07

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Anion gap, Blood calcium decreased, Blood chloride increased, Blood creatinine normal, Blood glucose increased, Blood potassium normal, Blood sodium normal, Blood urea normal, Carbon dioxide decreased, Eye swelling, Haematocrit normal, Haemoglobin normal, Hypoesthesia, Mean cell haemoglobin concentration normal, Mean cell haemoglobin normal, Mean cell volume normal, Pain in jaw, Platelet count normal, Red blood cell count normal, Red cell distribution width normal, SARS-CoV-2 test negative, Swelling face, Swollen tongue, Throat tightness, White blood cell count increased
SMQs: Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (narrow), Angioedema (narrow), Peripheral neuropathy (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Neuroleptic malignant syndrome (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Osteonecrosis (broad), Chronic kidney disease (broad), Hypersensitivity (narrow), Tumour lysis syndrome (broad), Tubulointerstitial diseases (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: None
Current Illness: None
Preexisting Conditions: None, just tree nut allergy with history of anaphylaxis to tree nut last
episode 2011.

**Allergies:** Tree Nuts

**Diagnostic Lab Data:** Lytes: Na 137, K 4.8, Cl 107, CO2 21, Anion Gap 9, BUN 12, Creatinine 0.85, Calcium 8.6, glucose 223, WBC 11, RBC 4.41, hemoglobin 13.4, hematocrit 40.4, MCV 91.6, MCH 30.4, MCHC 33.2, RDW 13.3, Platelet Count 335, COVID PCR negative

**CDC Split Type:**

**Write-up:** Felt sharp pain under jaw, then facial numbness. Then quickly developed facial swelling, left eye swelling and tongue swelling. Then felt like throat closing up within 7 minutes of receiving vaccine. Received vaccine in the clinic, was transported to Emergency Room. In ER received Epinephrine, steroids, Benadryl and Pepcid.

---

**VAERS ID:** [925925](https://vaers.hhs.gov/vad/VAERS/VAERSDetail.aspx?VAERSID=925925) (history)

**Form:** Version 2.0  
**Age:** 52.0  
**Sex:** Male  
**Location:** New York

**VAERS ID:** [925925](https://vaers.hhs.gov/vad/VAERS/VAERSDetail.aspx?VAERSID=925925) (history)

- **Vaccinated:** 2020-12-28
- **Onset:** 2021-01-04
- **Days after vaccination:** 7
- **Submitted:** 0000-00-00
- **Entered:** 2021-01-07

**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
--- | --- | ---
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | - / 2 | LA / -

**Administered by:** Work  
**Purchased by:** ?

**Symptoms:** Computerised tomogram, Electroencephalogram, Magnetic resonance imaging, Pyrexia, Seizure

**SMQs:** Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 5 days  
**Extended hospital stay?** No  

**Previous Vaccinations:**

**Other Medications:** Leviteracetam for seizures because he had a first time seizure after testing positive for COVID-19. Gabapentin Osteo Bio Flex Vitamin D, Vitamin C

**Current Illness:** None

**Preexisting Conditions:** None

**Allergies:** None

**Diagnostic Lab Data:** EEG, MRI, CAT SCAN

**CDC Split Type:**

**Write-up:** 1 day after the vaccine he had a low grade fever... 1 week later he had a seizure
and then multiple ones in the ER...

**VAERS ID:** 926042 (history)  
**Vaccinated:** 2021-01-05  
**Form:** Version 2.0  
**Onset:** 2021-01-05  
**Age:** 41.0  
**Days after vaccination:** 0  
**Sex:** Female  
**Location:** Pennsylvania  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-07

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Cough, Dyspnoea, Swollen tongue

**SMQs:** Anaphylactic reaction (broad), Angioedema (narrow), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** Yes

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 1 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Famotidine, Protonix

**Current Illness:**

**Preexisting Conditions:** GERD

**Allergies:** Allergy to sulfa, latex, bee-stings

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** Developed shortness of breath, swelling of tongue, persistent cough within 5 minutes of vaccination. Was treated with EpiPen and kept in ER for observation overnight. Symptoms resolved.
VAERS ID: 926221 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-19
Age: 64.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-07

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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Blood immunoglobulin G, Cough, Diarrhoea, Fatigue, Full blood count, Liver function test, Metabolic function test, SARS-CoV-2 antibody test, SARS-CoV-2 test positive, T-lymphocyte count
SMQs: Anaphylactic reaction (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (narrow), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 8 days
   Extended hospital stay? No
Previous Vaccinations: Other Medications: Levothyroxine 50mcg daily, Aloglitpan Benzoate 25mg daily, alendronate 70mg once weekly.
Current Illness: 11/20/20 appointment for mid-thoracic back pain.
Preexisting Conditions: Essential Hypertension, Hyperlipidemia, Hypothyroid, Type 2 diabetes with renal complication, without insulin, Chronic renal disease., BMI 36.58
Allergies: NKA
Diagnostic Lab Data: Daily Hepatic function, Basic Metabolic Panel, complete blood count.
1/5: Immunoglobulin G, Covid 19 IGG Antibody, T-Cell Subset panel, T4/T8 T-Cell subset panel
CDC Split Type: Write-up: Patient contacted provider 12/26 with following symptoms: Dry cough, diarrhea, fatigue for 7 days. Covid test ordered and positive. presented to ED on 12/31 and admitted into hospital. Still inpatient as of 1/7/2021.
VAERS ID: 926230 (history) Vaccinated: 2021-01-04
Form: Version 2.0 Onset: 2021-01-04
Age: 40.0 Days after vaccination: 0
Sex: Female
Location: Pennsylvania Submitted: 0000-00-00
Entered: 2021-01-07

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>026L20A / 1</td>
<td>RA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Echocardiogram, Electrocardiogram, Full blood count, Laboratory test, Sinus tachycardia, Supraventricular tachycardia
SMQs: Supraventricular tachyarrhythmias (narrow), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Symbicort Levothyroxine Myrbetriq vitamin D vitamin C Calcium
Current Illness:
Preexisting Conditions: Asthma Hashimotos Thyroiditis Overactive bladder
Allergies: Penicillin Clindamycin
Diagnostic Lab Data: EKG CBC Chemistry ECHO
CDC Split Type:
Write-up: Patient experienced an episode of SVT and then sinus tachycardia for approximately 6 hours after injection

VAERS ID: 926433 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-31
Age: 88.0 Days after vaccination: 3
Sex: Female
Location: Florida Submitted: 0000-00-00
Entered: 2021-01-07

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<th>Site / Route</th>
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<td>039K20A / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Computerised tomogram abnormal, Haemorrhagic stroke, Intensive care, Neurologic neglect syndrome, Visual impairment
SMQs: Haemorrhage terms (excl laboratory terms) (narrow), Anticholinergic syndrome
(broad), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Glaucoma (broad), Optic nerve disorders (broad), Lens disorders (broad), Retinal disorders (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 5 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Elequis, Amiodoron, pravastatin, losartan, synthroid, timalol
Current Illness: high bp, high cholesterol,
Preexisting Conditions: deaf in rt ear - rt vestibular schwanoma,
Allergies: none
Diagnostic Lab Data: 2 CT scans showing large bleed.

Write-up: Hemmoragic Stroke. Began with vision difficulty in the morning. Then I noticed she had left sided neglect. Went to ER. Treated with Andresxa (to counteract Elaquis). In SICU for 2 nights then telemetry unit for 3 nights. Currently in Rehab.

VAERS ID: 926454 (history) Vaccinated: 2021-01-04
Form: Version 2.0 Onset: 2021-01-05
Age: 62.0 Days after vaccination: 1
Sex: Female
Location: Florida Submitted: 0000-00-00

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
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<td>- / IM</td>
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Administered by: Private Purchased by: ?
Symptoms: Abdominal adhesions, Abdominal pain, Surgery
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions: Hyperlipidemia DJD

Allergies: Avelox, Dilaudid, Percocet, Pylera

Diagnostic Lab Data: Surgery 1/6/2021

CDC Split Type:

Write-up: Following vaccination the patient had progressively worsening abdominal pain over the next 24 hours. Presented to the ER and was initially thought to have appendicitis. However, it was then discovered during surgery that the appendix was surgically absent. The surgeon did not that the patient did have a "Round, infarcted ligamentous tissue was wrapped around ascending colon."

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VAERS ID: 926462 (history)

Vaccinated: 2020-12-28

Onset: 2021-01-04

Days after vaccination: 7

Submitted: 0000-00-00

Entered: 2021-01-07

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<td>EL1042 / 1</td>
<td>UN / IM</td>
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</table>

Administered by: Unknown

Purchased by: ?

Symptoms: Absence of immediate treatment response, Death, Hypoxia

SMQs: Asthma/bronchospasm (broad), Lack of efficacy/effect (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Infective pneumonia (broad)

Life Threatening? No

Birth Defect? No

Died? Yes

Date died: 2021-01-05

Days after onset: 1

Permanent Disability? No

Recovered? No

Office Visit? No

ER Visit? No

ER or Doctor Visit? No

Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications: Lorazepam, pantoprazole, miralax, senna plus, carbodopa-levodopa, metoprolol, mirtazipine, quetiapine

Current Illness: dementia, Upper gastrointestinal bleed

Preexisting Conditions: Advanced dementia, Parkinson"s" disease, chronic kidney disease, sciatica, hyperlipidemia

Allergies: no known food or medication allergies
Diagnostic Lab Data:
CDC Split Type:
Write-up: Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021

VAERS ID: 926568 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2020-12-30
Age: 77.0  Days after vaccination: 2
Sex: Male  Submitted: 0000-00-00
Location: Unknown  Entered: 2021-01-07

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<td>EL1042 / 1</td>
<td>UN / IM</td>
</tr>
</tbody>
</table>

Administered by: Unknown  Purchased by: ?
Symptoms: Absence of immediate treatment response, Death
SMQs: Lack of efficacy/effect (narrow)
Life Threatening? No
Birth Defect? No
Died? Yes
  Date died: 2021-01-04
  Days after onset: 5
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:

Other Medications: alprazolam, amlodipine, ASA, cilostazol, advair, lamotrigine, losartan, metoprolol, omeprazole, simvastatin
Current Illness: chronic medical problems as noted below
Preexisting Conditions: dementia, peripheral vascular disease, COPD, hypertension, GERD, S/P CVA with stent of left carotid, right common iliac and right external iliac arteries, CDK, diabetes
Allergies: clopidigrel, sulfa, vicodin
Diagnostic Lab Data:
CDC Split Type:
Write-up: patient declined 12/30/2020 and was transferred to hospital where he did not respond to treatment and passed away 1/4/2020
VAERS ID: 926703 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 35.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Oklahoma Entered: 2021-01-07

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 025J202A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Public  Purchased by: ?
Symptoms: Blood test, Guillain-Barre syndrome, Immunoglobulin therapy, Magnetic resonance imaging, Neuralgia, Neurological examination, Paraesthesia
SMQs: Peripheral neuropathy (narrow), Guillain-Barre syndrome (narrow), Demyelination (narrow), Immune-mediated/autoimmune disorders (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: None
Other Medications: None
Current Illness: None
Allergies: None
Diagnostic Lab Data: MRI and bloodwork, neuro screening and tests.
CDC Split Type: Write-up
Guillain Barre syndrome/AIDP event. Paresthesia and nerve pain developed in bilateral legs 4 hours after shot and progressed slowly for 4 days in intensity and area involved. Symptoms progressed distally to superior. On the 5th day symptoms progressed rapidly and involved bilateral legs up to the groin, left arm up to lateral shoulder, and right hand. I went to the hospital and was admitted to start IVIG treatment for Guillain Barre Syndrome/AIDP.

VAERS ID: 926755 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 70.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New Mexico Entered: 2021-01-07

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 025J202A / 1</td>
<td>LA / IM</td>
<td></td>
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</tbody>
</table>

Administered by: Public  Purchased by: ?
Symptoms: Blood test, Guillain-Barre syndrome, Immunoglobulin therapy, Magnetic resonance imaging, Neuralgia, Neurological examination, Paraesthesia
SMQs: Peripheral neuropathy (narrow), Guillain-Barre syndrome (narrow), Demyelination (narrow), Immune-mediated/autoimmune disorders (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: None
Other Medications: None
Current Illness: None
Allergies: None
Diagnostic Lab Data: MRI and bloodwork, neuro screening and tests.
CDC Split Type: Write-up
Guillain Barre syndrome/AIDP event. Paresthesia and nerve pain developed in bilateral legs 4 hours after shot and progressed slowly for 4 days in intensity and area involved. Symptoms progressed distally to superior. On the 5th day symptoms progressed rapidly and involved bilateral legs up to the groin, left arm up to lateral shoulder, and right hand. I went to the hospital and was admitted to start IVIG treatment for Guillain Barre Syndrome/AIDP.
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 037K20A / 1 LA / IM

Administered by: Private  Purchased by: ?
Symptoms: Computerised tomogram, Electroencephalogram, Foaming at mouth, Incoherent, Laboratory test, Magnetic resonance imaging, Respiratory arrest, Resuscitation, Seizure, Speech disorder, Unresponsive to stimuli
SMQs: Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Dementia (broad), Convulsions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (narrow), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hypo responsiveness episode (broad), Generalised convulsive seizures following immunisation (narrow), Hypersensitivity (broad), Respiratory failure (narrow), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: warfarin, lisinopril, atenolol, Lasix, potassium, Tylenol
Current Illness: rheumatic heart disease, hx of stroke, brain hemorrhage, open heart X3 with valve replacement, VP shunt
Preexisting Conditions: rheumatic heart disease, hx of stroke, brain hemorrhage, open heart X3 with valve replacement, VP shunt
Allergies: codeine
Diagnostic Lab Data: CT, MRI and labs done, eeg conducted due to her previous medical HX.
CDC Split Type:
Write-up: Vaccine Candidate received vaccine approxat 2:30pm, was monitored for 15 min no complications at the time, went home. Around 5:30pm while walking into her home she became unresponsive, was assisted in a siting position, became incoherent, mumbling and started to convulse to the right side of her r upper extremity. Foaming at the mouth and stopped breathing, CPR was initiated for 1-2 min, EMS arrived was transported to Medical Center. She was admitted and is currently hospitalized. MD reports this event is highly unlikely related to the vaccine given her medical history but suggested to report being its a new vaccine. Current status: stable.
VAERS ID: 926778 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-07
Age: 63.0  Days after vaccination: 1
Sex: Male
Location: New York  Submitted: 0000-00-00
Entered: 2021-01-07

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<td>012L20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Public  Purchased by: 
Symptoms: Oedema peripheral, Pyrexia, Unresponsive to stimuli
SMQs:, Cardiac failure (broad), Angioedema (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypotonic-hyporesponsive episode (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness: none known, person did
Preexisting Conditions: Developmentally disabled, history of lower extremity edema
Allergies: None known
Diagnostic Lab Data: N/A
CDC Split Type:
Write-up: Person had a fever of 102.4, pulse rate of 118, he was non-responsive with edema of the right calf & ankle this morning when he was assessed.

VAERS ID: 926787 (history)  Vaccinated: 2020-12-30
Form: Version 2.0  Onset: 2020-12-31
Age: 53.0  Days after vaccination: 1
Sex: Female
Location: Minnesota  Submitted: 0000-00-00
Entered: 2021-01-07

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<td>037K20A / UNK</td>
<td>- / IM</td>
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Administered by: Senior Living  
Purchased by: ?

Symptoms: Asthenia, Blood glucose normal, Breath sounds abnormal, Confusional state, Consciousness fluctuating, Depressed level of consciousness, Dyspnoea, Fatigue, Heart rate increased, Lethargy, Muscle twitching, Oxygen saturation decreased, Pyrexia, Seizure like phenomena, Tremor

SMQs: Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (narrow), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Convulsions (narrow), Dyskinesia (broad), Dystonia (broad), Parkinson-like events (broad), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Dehydration (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 6 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: gabapentin, asa, oxycodone, fentanyl, flexiril, requip, omeprazole, keflex, symbicort, restasis, spiriva, synthroid, tylenol, simvastatin, lasix, aldactone

Current Illness:
Preexisting Conditions: DM2, COPD, chronic uti/ neurogenic bladder, CKD, obesity, depression,
Allergies: bee stings, abilify, flowers,

Diagnostic Lab Data: Completed in the ED hospital and then transferred.

CDC Split Type:

Write-up: Resident had the COVID vaccine 12/30/2020. 12/31/20, resident has been in bed all shift. Staff became concerned when resident was not easily aroused. Resident displayed signs of tremors, twitching, confusion, in and out of consciousness, low O2 sats, elevated pulse and fever, fatigue and weakness. Writer called NP. NP stated this is most likely a reaction d/t the COVID vaccine. She gave orders for Benadryl 25mg IM x1 now and Tylenol 1000 mg now. NP also stated resident will not be getting the second dose of vaccine. Will continue to monitor and update NP if worsening symptoms. After receiving Benadryl and Tylenol at 145pm, resident began to appear as though she was feeling better and was talking to talk, fever had gone down. Tonight resident is not easily aroused, lethargic, continues to have tremors and twitches, almost appearing as convulsions. When asked if she knows where she is or what day it is, resident can properly answer. Resident denies SOB but staff has noted loud squeals while breathing. NP was updated and gave new orders to give Benadryl 25 mg IM x1 if needed and Ok to send resident to ED. Resident currently refuses to go to the hospital. Will continue to monitor. BP 152/112, P 116, T 99.1, O2 87-91. Resident's O2 at 1205am was 80% on 3LPM. Resident unable to be aroused from sleep by writer. NAR called
to assist. NAR could not arouse resident. Writer and NAR attempted to reposition resident and resident"s breathing became more labored. Resident turned back to previous position and writer called on call MD at approx. 1220am. MD returned call approx. 1235am with orders to send resident to ED. 911 called and ambulance arrived about 1245am. History of present condition given to EMTs and they stated resident would be going to Hospital. Writer has attempted to contact Hospital ED x3 but have been unable to get through. An EMT did just call to clarify when vaccine was given, what symptoms have been present and when they started. She said she has everything she should need and she will let Hospital ED staff know to call if they need anything else. Writer will again attempt to contact them though. Resident"s temp was 97.5 and BG 128. When EMTs arrived they got an O2 reading of 60%. Resident did open her eyes a couple times during transfer from bed to stretcher and while stretcher was going outside but no responses from resident were made.

VAERS ID: 927006 (history) Vaccinated: 2020-12-31
Form: Version 2.0 Onset: 2021-01-01
Age: 68.0 Days after
Sex: Female vaccination: 1
Location: South Carolina Submitted: 0000-00-00
Entered: 2021-01-07

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<td>RA / SYR</td>
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Administered by: Private               Purchased by: ?
Symptoms: Arthropathy, C-reactive protein increased
SMQs: Arthritis (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: clopidogrel, carvedilol, atorvastatin, aspirin, albuterol, torsemide, bupropion
Current Illness: None
Preexisting Conditions: HFrEF, CAD, HTN, COPD, depression, OSA, ckd
Allergies: latex, nickel
Diagnostic Lab Data: CRP $g300
CDC Split Type:
Write-up: Diffuse polyarthropathy starting the day after vaccination and continuing for 7+ days. Currently treating with abx for concern of possible cellulitis, and prednisone 60mg for polyarthropathy. Currently admitted.
VAERS ID: 927065 (history) Vaccinated: 2020-12-21
Form: Version 2.0 Onset: 2020-12-21
Age: 39.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Mississippi Entered: 2021-01-07

Vaccination / Manufacturer | Lot / Dose | Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / | EA9899 / 1 | LA / IM
PFIZER/BIONTECH

Administered by: Private Purchased by: ?
Symptoms: Chest X-ray abnormal, Computerised tomogram normal, Laboratory test abnormal, Oropharyngeal pain, Pneumonia, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Flecinide 100 mg/day
Current Illness: none
Preexisting Conditions: vitriol fibrillation
Allergies: none
Diagnostic Lab Data: Pneumonia - chest x-ray-29th test for it CT scan - negative
CDC Split Type: vsafe
Write-up: woke up with fever and sore throat on 22nd; went to job and got tested and tested positive; on the 23rd developed right upper lobe pneumonia; on 27th was hospitalized with three lobe pneumonia; On 22nd received got zpack - azithromycin and sudafed; received at hospital doxicyclineIV ; ivermectin and went home with them, as well. Hospital

VAERS ID: 927096 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-29
Age: 60.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Massachusetts Entered: 2021-01-07
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<td>LA / IM</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Blood test, Chest X-ray, Chills, Computerised tomogram abdomen, Computerised tomogram head, Computerised tomogram thorax abnormal, Echocardiogram, Fatigue, Flushing, Generalised tonic-clonic seizure, Hyperhidrosis, Legionella test, Magnetic resonance imaging brain, Myalgia, Pulmonary embolism, Pyrexia, SARS-CoV-2 test, Scan with contrast, Streptococcus test, Ultrasound abdomen

SMQs: Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Convulsions (narrow), Embolic and thrombotic events, venous (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Generalised convulsive seizures following immunisation (narrow), Hypersensitivity (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), COVID-19 (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 5 days  
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Venlafaxine 150mg daily Ibuprofen 600mg 2x/week

Current Illness: None

Preexisting Conditions: Mild osteoarthritis

Allergies: N/A

Diagnostic Lab Data: CT head without contrast Blood work CT abdomen/pelvis with contrast Xray chest Covid-19 RT-PCR Legionella and Strep Urine Echo TTE MRI brain with and without contrast MRA head without contrast US abdomen CT chest Pulmonary embolism with contrast

CDC Split Type:

Write-up: Day 2 (12/29/20): Fever (<100 degrees), Mild muscle aches, Fatigue Day 3 (12/30/20): Fatigue, Muscle aches Day 4 (12/31/20): Alternating chills and profuse sweating starting at 8am, Full body flushing, Grand Mal Seizure at 4:30pm

VAERS ID: 927260 (history)  
Vaccinated: 2020-12-28  
Onset: 2021-01-06  
Days after vaccination: 9  
Submitted: 0000-00-00  
Entered: 2021-01-07
Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 037K20A / 1 | AR / IM

Administered by: Senior Living  
Purchased by: ?

Symptoms: Blood lactic acid increased, Bradycardia, Cardiac arrest, Computerised tomogram head normal, Death, Heart sounds abnormal, Pulse absent, Respiration abnormal, Resuscitation, SARS-CoV-2 test negative, Unresponsive to stimuli, White blood cell count increased

SMQs: Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Lactic acidosis (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyposensitive episode (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), COVID-19 (broad)

Life Threatening? No  
Birth Defect? No  
Died? Yes
  - Date died: 2021-01-06
  - Days after onset: 0

Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 1 days  
  - Extended hospital stay? No

Previous Vaccinations:

Other Medications: Vit D3, Miralax, Spironolactone, Tramadol, Metoprolol Succinate, MOM, Ferrous Gluconate, Ondansetron, Nitroglycerin Sublingual PRN, PreserVision AREDS, Fluticasone Propionate Suspension, Lisinopril, Clopidogrel Bisulfate, Campor-Methol-Met

Current Illness: Digestive Surgery for bowel obstruction

Preexisting Conditions: HTN, AAA, Chronic Diastolic Heart Failure, Diabetes Type 2, Paroxysmal atrial fibrillation, bradycardia, Hx of STEMI, Hx of CVA, HX of uterine cancer, Allergies: Codeine, Meperidine, Morphine, Estrogens, Penicillins, Tetanus Toxoids

Diagnostic Lab Data: Brain CT negative WBC and lactic acid increased. COVID 19 on 1/4/21 negative

CDC Split Type:

Write-up: No adverse effects noted after vaccination. Patient with cardiac history was found unresponsive at 16:45 on 1/6/21. Abnormal breathing patterns, eyes partially closed SPO2 was 41%, pulseless with no cardiac sounds upon auscultation. CPR and pulse was regained and patient was breathing. Patient sent to Hospital ER were she remained in an unstable condition had multiple cardiac arrest and severe bradycardia and in the end the hospital was unable to bring her back.
### Case 1

**VAERS ID:** 937030 (history)  
**Form:** Version 2.0  
**Age:** 58.0  
**Sex:** Male  
**Location:** Unknown  
**Vaccination:** 2020-12-23  
**Onset:** 2020-12-23  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-07  

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<td>RA / IM</td>
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**Administered by:** Other  
**Purchased by:** ?  
**Symptoms:** Hypoaesthesia, Hypoaesthesia oral, Laboratory test normal  
**SMQs:** Peripheral neuropathy (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Sexual dysfunction (broad)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 2 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:**  
**Current Illness:**  
**Preexisting Conditions:**  
**Allergies:**  
**Diagnostic Lab Data:**  
**CDC Split Type:**  

**Write-up:** LEFT FACIAL AND TONGUE NUMBNESS - WORK UP CVA NEG  
**Narrative:** Developed left facial and tongue numbness 4 hours after vaccine - went to ER and admitted for 2 days, negative workup for CVA or other acute etiology. Symptoms resolved prior to discharge from hospital

### Case 2

**VAERS ID:** 940544 (history)  
**Form:** Version 2.0  
**Age:** 42.0  
**Sex:** Female  
**Location:** Unknown  
**Vaccination:** 2020-12-29  
**Onset:** 2020-12-29  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-07  

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</table>
Administered by: Other        Purchased by: ?

Symptoms: Blood pressure increased, Heart rate increased, Hypertension, Nausea, Pharyngeal swelling, Tachycardia, Vomiting

SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypertension (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
    Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:

Write-up: NauseaVomiting, HYPERtension, Tachycardia, throat swelling Narrative: Went home after vaccine and starting vomiting, throat swelling. HR and BP elevated Went to ER was given beta blockers, in hospital for observation.

VAERS ID: 950443 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-30
Age: 43.0 Days after vaccination: 2
Sex: Male Submitted: 0000-00-00
Location: Unknown Entered: 2021-01-07

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Administered by: Other        Purchased by: ?

Symptoms: Angina pectoris, Malaise, Myalgia, Tachycardia, Tachypnoea

SMQs: Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Asthma(bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Eosinophilic pneumonia (broad), Other ischaemic heart disease (narrow), Respiratory failure (broad), Tendinopathies and ligament disorders (broad), Infective pneumonia (broad), Dehydration (broad)

Life Threatening? No
Write-up: Tachypnea, Angina, Tachycardia, Sore Muscles Narrative: Started feeling ill on the 28th. Drove himself to get checked out at the hospital. Hospital sent him home. Called EMS at 12/30/2020 @ 0200 and was hospitalized for 1 day. He is more stable now but still has these symptoms at a moderate level.

VAERS ID: 927519 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 29.0 Days after vaccination: 0
Sex: Female
Location: Minnesota Submitted: 0000-00-00
Entered: 2021-01-08

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Administered by: Unknown Purchased by: ?

Symptoms: Anaphylactic reaction, Intensive care, Urticaria

SMQs:, Anaphylactic reaction (narrow), Angioedema (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Write-up: Anaphylactic reaction; hives in the first 10 minutes of the vaccine; This is a spontaneous report from a contactable Other Health Professional (Physician Assistant). A 29-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 29Dec2020 at a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The reporter stated that she is treating a patient in ICU that got the COVID-19 vaccine on 29Dec2020. The patient developed hives in the first 10 minutes of the vaccine and had an anaphylactic reaction 1 hour later. Seriousness of events was reported to be hospitalization. Outcome of the events was unknown. The reporter also mentioned that it was not a mild reaction and patient was still in the ICU, 48 hours later. Information about lot/batch number has been requested.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylactic reaction and hives cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.
Vestibular disorders (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Dehydration (broad), Opportunistic infections (broad), Immune-mediated/autoimmune disorders (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: COVID-19; Penicillin allergy

Allergies:

Diagnostic Lab Data: Test Date: 20201231; Test Name: Heart beat; Result Unstructured
Data: Test Result:fast; Test Date: 20210101; Test Name: covid; Test Result: Positive

CDC Split Type: USPFIZER INC2021000409

Write-up: tested positive for Covid test; tested positive for Covid test; difficulty breathing; chills; fluctuating fever; nausea; weakness; weakness/extreme fatigue; loss of taste and smell; loss of taste and smell; muscle pain; cough; sore throat; nasal drip; dizziness; fast heartbeat; injection site pain; anxiety; crying; This is a spontaneous report from a contactable healthcare professional. This 21-year-old female patient reported for herself that she received BNT162B2 1st dose on 31Dec2020 10:00 AM intramuscular at left arm for COVID-19 immunisation. Medical history included known allergies: Penicillin and Covid-19. Concomitant therapy included BC as reported. The patient experienced difficulty breathing, chills, fluctuating fever, nausea, dizziness, weakness, fast heartbeat, tiredness, loss of taste and smell, muscle pain, injection site pain, anxiety, cough, sore throat, nasal drip, crying, extreme fatigue, Etc on 31Dec2020 at 06:00 PM. The events resulted in doctor or other healthcare professional office/clinic visit, emergency. The patient was hospitalized for 1 day and received treatment included blood thinner rivaroxaban (XARELTO) and had 2 weeks quarantine. The patient had Covid prior to vaccination and tested positive for Covid test post vaccination on 01Jan2021. The outcome of the events was not resolved. Information on Lot/batch number has been requested.; Sender''s Comments: Based on available information, a possible contributory role of the subject product, BNT162B2 vaccine, cannot be excluded for the suspected LOE, SARS-CoV-2 test positive and the other reported events due to temporal relationship. Of note, it is reported that the patient had history of COVID 19 infection prior to the vaccination. There is limited information provided in this report. Additional information is needed to better assess the case, including complete medical history, diagnostics, counteractive treatment measures and concomitant medications. This case will be reassessed once additional information is available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.
VAERS ID: 927981 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 56.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Georgia Entered: 2021-01-08

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011L20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other Purchased by: ?
Symptoms: Computerised tomogram, Dysarthria, Headache, Hypoaesthesia oral, Lip swelling, Magnetic resonance imaging, Nasal discomfort, Paraesthesia oral, Repetitive speech, Urticaria
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Taking Fioricet 50-325-40 MG Tablet, Sig: 1 tablet- 2 tablets as needed for tension headache Orally Once a day Taking Escitalopram Oxalate 10 MG Tablet, Sig: 1 tablet Orally Once a day Start Date: 04/02/2020 Taking Depo-Estradiol 5 MG/M
Current Illness:
Preexisting Conditions: N95.8 Other specified menopausal and perimenopausal disorders J30.2 Other seasonal allergic rhinitis F34.1 Dysthymia N95.1 Hot flashes due to menopause Z79.890 Postmenopausal HRT (hormone replacement therapy) G43.909 Migraine J45.901 Unspecified asthma with (acute) exacerbation J40 Bronchitis R74.8 Elevated liver enzymes R60.9 Edema J31.0 Rhinitis, unspecified type
Allergies: MSG - ANGIODEMA, Celexa, Cipro - rash and trouble breathing, Imitrex - stops her from breathing, Amitriptyline HCl - drowsiness, Concerta, Ritalin, Tamiflu, Topamax - memory loss, Depakote - Bell"s palsy, Gabapentin, Inderal LA - Lack of therapeutic, Cymbalta, sertraline - headaches
Diagnostic Lab Data: transported to ER 01/05/2021 CT scan 01/05/2021 MRI 01/06/2021
CDC Split Type:
Write-up: Pt experiencing and c/o left nasal burning, left upper lip tingling progressing to numbness with slight swelling noted, scattered patchy hives to upper front chest, sharp HA
above right eye, denies SOB, no acute respiratory distress noted or reported, slurring of words shortly after onset of other symptoms. Pt repeating "something ain't right". Pt received Moderna COVID vaccine at 4:35pm with no reactions or side effect noted within the post 15 and 30 minutes. EMS notified at 5:49pm. MD notified and ordered Benadryl 50mg IM (given at 5:53pm), EpiPen and DepoMedrol 40mg IM if needed. No respiratory distress noted, pt denies SOB. EMS arrived and transported pt to ER.

VAERS ID: 927983 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2020-12-31
Age: 68.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Virginia Entered: 2021-01-08

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<td>039K20A / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Private  Purchased by: 

Symptoms: Allen’s test, Base excess decreased, Blood bicarbonate normal, Blood pH normal, COVID-19 pneumonia, Computerised tomogram thorax abnormal, Dyspnoea, Fatigue, Lung infiltration, PCO2 decreased, PO2 normal, Pneumonia, SARS-CoV-2 test positive

SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Lactic acidosis (broad), Interstitial lung disease (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
  Extended hospital stay? No

Previous Vaccinations:

Other Medications: celexa

Current Illness: none

Preexisting Conditions: anemia

Allergies: codeine

Diagnostic Lab Data: COVID + ARTERIAL BLOOD GAS: (COLL: 01/07/2021 13:15) (MsgRcvd 01/07/2021 13:58) Final results Test Result Flag **(Reference)** O2 METHOD NASAL CANN FI02% 28 PUNCTURE SITE RIGHT BRACHIA pH 7.429 (7.350 - 7.450) pCO2 34 L mm/HG (35 - 45) pO2 88.7 mm/HG (75.0 - 100) HCO3 22.8 mm/HG (22.0 - 26.0) BASE EXCESS -1.1 mmol/L O2 SAT 97.1 % (91.0 - 99.0) ALLEN TEST N/A Patchy bilateral infiltrates compatible with pneumonia. Differential diagnosis includes COVID pneumonia shown on CTA of chest.
Developed SOB and fatigue 1 day after vaccine, went to urgent care and tested positive for COVID at urgent care. Returned to our ED after going to urgent care again on 1/7/21, had o2 sat of 84% on room air, improved to 98 on 3 liters. Was transferred to another facility for admission.

VAERS ID: 928062 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 85.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Massachusetts Entered: 2021-01-08

Vaccination / Manufacturer | Lot / Dose | Site / Route
---------------------------|------------|-----------
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | - / 1 | - / -

Administered by: Senior Living Purchased by: ?
Symptoms: Blood lactic acid increased, Cardiac arrest, Death, Endotracheal intubation, Hypotension, Hypoxia, Laboratory test, Lethargy, Liver function test, Lung infiltration, Pancytopenia, Pulmonary congestion, Pulmonary imaging procedure abnormal, Troponin, Vomiting
SMQs: Torsade de pointes/QT prolongation (broad), Cardiac failure (broad), Anaphylactic reaction (broad), Acute pancreatitis (broad), Agranulocytosis (narrow), Angioedema (broad), Asthma/bronchospasm (broad), Haematopoietic cytopenias affecting more than one type of blood cell (narrow), Lactic acidosis (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Myelodysplastic syndrome (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? Yes
Date died: 2021-01-07
Days after onset: 2
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
**Previous Vaccinations:**

**Other Medications:** ACETAMINOPHEN CARBIDOPA-LEVODOPA CARBIDOPA-LEVODOPA ER CITALOPRAM HBR DONEPEZIL HCL EUCERIN FINASTERIDE FLOMAX LATANOPROST OMEPRAZOLE QUETIAPINE FUMARATE QUETIAPINE FUMARATE SENNA LAX

**Current Illness:** Parkinson"s Disease with advanced dementia, dysphagia. Alcoholism in remission. HTN. BPH. GERD

**Preexisting Conditions:** Parkinson"s Disease with advanced dementia, dysphagia. Alcoholism in remission. HTN. BPH. GERD

**Allergies:** angioedema due to ACE and ARB meds

**Diagnostic Lab Data:** Pancytopenia, elevated lactate, troponin, LFTs. Left mid lung infiltrate and pulmonary vascular congestion.

**CDC Split Type:**

**Write-up:** vomiting later on 01/05/21. Lethargy and hypoxia in pm of 01/06/21. Hypotension am of 01/07/21. Hospitalized, intubated, cardiac arrest, died 01/07/21.

---

**VAERS ID:** 928291 (history)

**Vaccinated:** 2021-01-04

**Form:** Version 2.0

**Age:** 69.0

**Sex:** Female

**Location:** Wisconsin

**Onset:** 2021-01-05

**Days after vaccination:** 1

**Submitted:** 0000-00-00

**Entered:** 2021-01-08

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<td>- / 1</td>
<td>RA / IM</td>
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**Administered by:** Senior Living

**Purchased by:** ?

**Symptoms:** Abdominal pain upper, Alanine aminotransferase increased, Aspartate aminotransferase increased, Blood alkaline phosphatase increased, Blood bilirubin increased, Chest pain, Hepatic enzyme increased, Liver function test increased

**SMQs:** Liver related investigations, signs and symptoms (narrow), Acute pancreatitis (narrow), Biliary system related investigations, signs and symptoms (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 2 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Cevimeline, diphenhydramine, escitalopram, fluticasone, folic acid, hydroxychloroquine, loratadine, multivitamins, pantoprazole, Synthroid. methotrexate and etanercept. These two medications were last taken on 12/28/2020 and then held by

**Current Illness:**
**Preexisting Conditions:** hypothyroidism, sjogren's syndrome, sicca syndrome, celiac sprue  
**Allergies:** gluten and penicillin  
**Diagnostic Lab Data:** 1/8/2021 AST:1890, ALT:1201, Alk Phos: 167, Total Bili:1.8  
**CDC Split Type:**  
**Write-up:** symptoms: chest and stomach pain Has markedly elevated liver function tests that were normal 2 weeks prior to immunization Is being admitted the hospital to monitor liver function test.

---

**VAERS ID:** [928333](https://www.vaers.org/VAERSID:928333) (history)  
**Vaccinated:** 2020-12-28  
**Form:** Version 2.0  
**Onset:** 2020-12-29  
**Age:** 76.0  
**Days after vaccination:** 1  
**Sex:** Male  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-08  

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<td>039K20-2A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?  
**Symptoms:** Adjusted calcium increased, Asthenia, Blood calcium increased, Cough, Hypercalcaemia, Pyrexia, Somnolence  
**SMQs:** Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** Yes  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 2 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** insulin detemir 10 units daily losartan 25mg daily simvastatin 60mg daily glipizide 5mg daily vitamin D calcium  
**Current Illness:** none known  
**Preexisting Conditions:** sarcoidosis h/o colon cancer in remission  
**Allergies:** lisinopril - swelling  
**Diagnostic Lab Data:** calcium 13 - corrected calcium 14  
**CDC Split Type:**  
**Write-up:** Fever, coughing, drowsiness, generalized weakness. Was found to be hypercalcemic (corrected calcium 14) and admitted 1/2-4. No prior history of hypercalcemia.
VAERS ID: 928378 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-07
Age: 95.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Florida Entered: 2021-01-08

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<td>EH9899 / 2</td>
<td>UN / IM</td>
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</tbody>
</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Dyspnoea, Hospice care, Myocardial infarction, Respiratory tract congestion, Tachycardia, Unresponsive to stimuli
SMQs: Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Embolic and thrombotic events, arterial (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad), Dehydration (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: On: Norvasc 5mg daily Losartan 50mg daily Menest 0.3mg daily Vitamin C 500mg twice a day
Current Illness: N/A
Preexisting Conditions: HX of CHF Pneumonia HTN Cardiac Murmur Osteoarthritis
Allergies: Vasotec, Zocor, and Cymbalta
Diagnostic Lab Data: Unknown, will need to follow up with hospital.
CDC Split Type:
Write-up: Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services.
VAERS ID: 928461 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2021-01-03
Age: 67.0 Days after vaccination: 5
Sex: Male
Location: Florida
Submitted: 0000-00-00
Entered: 2021-01-08

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<td>011J20A / 1</td>
<td>LA / IM</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Anaphylactic reaction, Computerised tomogram abnormal, Eye swelling, Intensive care, Laboratory test, Lip swelling, Oedema, Pharyngeal oedema, Pruritus, Rash, Rash erythematous, Rash papular, Swelling face

SMQs: Cardiac failure (broad), Anaphylactic reaction (narrow), Angioedema (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Oropharyngeal allergic conditions (narrow), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 5 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Metformin, Lisinopril, Simvastatin, Ozempic, pantopazol
Current Illness: none
Preexisting Conditions: Diabetes
Allergies: Cephasporin
Diagnostic Lab Data: Multiple labs, ct scan soft tissue edema of throat

CDC Split Type:
Write-up: Anaphylactic reaction, Severe edema and raised red rash entire body, Severe itching, Soft tissue edema of throat. Swelling of, eyes, lips, face. Multiple trips to ER, treated with steroids, Benadryl, prevacid. CURRENTLY IN ICU ON EPINEPHRINE DRIP, STEROIDS, MULTIPLE MEDS

VAERS ID: 928558 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2021-01-04
Age: 57.0 Days after vaccination: 5
Sex: Female
Location: Iowa
Submitted: 0000-00-00
Entered: 2021-01-08
VAERS ID: 928662 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2021-01-01
Age: 50.0 Days after vaccination: 9
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2021-01-08

**VAERS**

**VAERS**: Vaccine Adverse Event Reporting System

**ID**: Unique identifier for the report

**Vaccination / Manufacturer**

**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**

**Lot / Dose**: - / UNK

**Site / Route**: LA / IM

**Administered by**: Private

**Purchased by**: ?

**Symptoms**: Angiogram abnormal, Arteriospasm coronary, Chest pain, Fibrin D dimer increased, Troponin I increased, Vasoconstriction

**SMQs**: Haemorrhage laboratory terms (broad), Myocardial infarction (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy

---

Write-up: Patient c/o fatigue and cough on 1.4.2021 and was encouraged to be tested for COVID. We were notified that the patient was hospitalized on 1.7.2021 with COVID symptoms and positive test results. She is currently on a ventilator and dialysis.
On December 25th I had mild chest pain and then on January 1st, 2021 I had severe chest pain that persisted and on January 3rd I was admitted into the hospital. My Ddimer was elevated and my Troponin levels were elevated. An angiogram was performed and Dr. injected nitro into my arteries because they were constricted from Coronary Spasms.

**VAERS ID:** 928754  
**Form:** Version 2.0  
**Age:** 56.0  
**Sex:** Female  
**Location:** California  
**Vaccinated:** 2020-12-30  
**Onset:** 2020-12-30  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-08

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<td>EJ1686 / 1</td>
<td>- / IM</td>
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</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Dizziness, Hypotension, Throat tightness

**SMQs:** Anaphylactic reaction (narrow), Angioedema (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Vestibular disorders (broad), Hypersensitivity (broad), Dehydration (broad), Hypokalaemia (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Sxs started 3-5 minutes post vax. Dizziness, hypotension, throat fullness, CODE called, given IM Epi at vax site. Taken to ED from vax site. Started on epi drip. Admitted to SHC.

VAERS ID: 928757 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-08
Age: 34.0 Days after vaccination: 1
Sex: Male
Location: Illinois Submitted: 0000-00-00
Entered: 2021-01-08

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Administered by: Public Purchased by: ?

Symptoms: Dizziness, Nausea, Syncope

SMQs: Torsade de pointes/QT prolongation (broad), Acute pancreatitis (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Na
Current Illness: Na
Preexisting Conditions: Na
Allergies: Na
Diagnostic Lab Data:
CDC Split Type:
Write-up: Nausea/ dizzy, Syncope 12 hours later.
VAERS ID: 928772  (history)  Vaccinated: 2020-12-22
Form: Version 2.0  Onset: 2020-12-22
Age: 52.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: New York  Entered: 2021-01-08

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<td>EK5730 / 1</td>
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Administered by: Private  Purchased by: ?

Symptoms: Activated partial thromboplastin time, Angiogram cerebral, Arteriogram carotid, Blood magnesium, Blood pressure increased, Chest X-ray, Culture urine, Differential white blood cell count, Dizziness, Electrocardiogram, Feeling hot, Full blood count, Glycosylated haemoglobin, International normalised ratio, Lipase, Lipids, Magnetic resonance imaging brain, Magnetic resonance imaging spinal, Metabolic function test, Palpitations, Presyncope, Prohormone brain natriuretic peptide, Prothrombin time, SARS-CoV-2 antibody test, SARS-CoV-2 test, Scan with contrast, Swallow study, Troponin, Urine analysis

SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Hypertension (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: GERD Migraine
Allergies: latex shellfish


CDC Split Type:

Write-up: Patient felt warm with palpitations 5 minutes after vaccine administered. was monitored for 30 mins & then returned to work. on 12/30/2020 patient was at work in Presurgical testing dept & experienced near syncope, dizziness & elevated BP. reported to ED & was admitted to telemetry unit.
VAERS ID: 928777 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-08
Age: 49.0  Days after vaccination: 2
Sex: Female  Submitted: 0000-00-00
Location: Kentucky  Entered: 2021-01-08

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Administered by: Unknown  Purchased by: ?
Symptoms: Anaphylactic reaction, Injection site erythema, Pyrexia, Rash, Supraventricular tachycardia
SMQs: Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Supraventricular tachyarrhythmias (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Extravasation events (injections, infusions and implants) (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Dr. called this morning and reported that an employee that works in billing had her vaccine on Wednesday and developed and anaphylactic reaction to Moderna. This was 24 hours later with rash, SVT heart rate above 140, low grade fever, redness at site. Admitted and treated with steroids and Benadryl.

VAERS ID: 928792 (history)  Vaccinated: 2020-12-18
Form: Version 2.0  Onset: 2020-12-20
Age: 56.0  Days after vaccination: 2
Sex: Female  Submitted: 0000-00-00
Location: Michigan  Entered: 2021-01-08
**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
---|---|---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EJ1685 / 1 | LA / IM

Administered by: Private  
Purchased by: ?
Symptoms: Chills, Dyspnoea, Electrocardiogram ST segment elevation, Pain, Palpitations
SMQs: Anaphylactic reaction (broad), Myocardial infarction (broad), Arrhythmia related investigations, signs and symptoms (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Came to ER on 12/20/20 with chills, heart palpitations, body aches and increased SOB. Had ST elevation on EKG in ER, taken to Cath Lab- no intervention done. D/C home 12/22/20. Previous Hx of COVID per patient

VAERS ID: [928871](https://vaers.hhs.gov/vaers/) (history)  
Vaccinated: 2020-12-26
Onset: 2020-12-27
Days after vaccination: 1
Submitted: 0000-00-00
Entered: 2021-01-08

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**VAERS ID:** [928871](https://vaers.hhs.gov/vaers/) (history)  
**Vaccinated:** 2020-12-26

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**VAERS ID:** [928871](https://vaers.hhs.gov/vaers/) (history)  
**Vaccinated:** 2020-12-26

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**VAERS ID:** [928871](https://vaers.hhs.gov/vaers/) (history)  
**Vaccinated:** 2020-12-26
Respiratory failure (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: Combipatch 0.05 mg/0.14mg/24 hrs transdermal film, 1 patch topical 2x per week olmesartan 20 mg daily

Current Illness:
Preexisting Conditions: hypertension
Allergies: penicillin--rash sulfa--rash

Diagnostic Lab Data: COVID-19 (SARS-CoV-2) Molecular Amp positive 12/29/20

Write-up: Patient received first dose of Pfizer COVID-19 vaccine on December 26. On the next day, December 27, patient started having pressure in her head and sinuses, weakness. Then she developed nonproductive cough and progressive shortness of breath. She was seen at urgent care and tested positive for COVID-19 on December 29. She had low oxygen saturation on home oximeter and severe shortness of breath. Patient"s husband is also ill with COVID-19 at home. Patient was sent to the ED and admitted to the hospital.

VAERS ID: 929074 (history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-07
Age: 31.0  Days after vaccination: 0
Sex: Female
Location: California  Submitted: 0000-00-00
Entered: 2021-01-08

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<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
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<td>025J202A / 1</td>
<td>UN / IM</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?

Symptoms: Dysphagia, Lip swelling, Oropharyngeal pain, Palpitations, Speech disorder, Tachycardia

SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: ascorbic acid Vitamin D Vitamin E zinc sulfate
Current Illness: none
Preexisting Conditions: none
Allergies: phenazopyridine--hallucinations
Diagnostic Lab Data: Tachycardic with HR 120s, all other vital signs stable.

CDC Split Type:
Write-up: About 15 minutes after receiving the vaccine she felt palpitations. She was monitored for another 15 minutes and while she was walking to her car she started noticing sore throat associated with inability to talk, unable to swallow secretions, and swelling the lips. Patient presented to the emergency room where she received EpiPen dose. Received diphenhydramine, famotidine, and prednisone. Lip swelling and sore throat began improving in ED.

VAERS ID: 929184
Form: Version 2.0
Age: 46.0
Sex: Female
Location: Arizona
Submitted: 0000-00-00
Entered: 2021-01-08

VAERS ID: 929184 (history)  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2021-01-01
Age: 46.0  Days after vaccination: 3
Sex: Female
Location: Arizona
Submitted: 0000-00-00
Entered: 2021-01-08

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<td>EH9899 / UNK</td>
<td>RA / -</td>
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</tbody>
</table>

Administered by: Unknown  Purchased by: ?

Symptoms: Dysphagia, Dyspnoea, Urticaria
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: Anxiety (Diagnosed 22 years ago)
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2021006254
Write-up: difficulty breathing/swallowing; difficulty breathing/swallowing; Hives/hives all over including in her mouth; This is a spontaneous report from a contactable consumer (spouse). A 46-year-old female patient (wife) received BNT162B2 (Pfizer-Biontech Covid-19 Vaccine, lot number: EH9899) via unspecified route of administration at arm right on 29Dec2020 at single dose for Covid-19 vaccine. Medical history included ongoing anxiety diagnosed 22 years ago. Concomitant medications were not none. Patient received the vaccine and was one big hive (01Jan2021). She went to the ER on sat and will have to go back. Caller is asking where she should go. patient went through the VAERS report 3 times. She did not have any sides effects. patient is a frontline worker. On 29Dec2020 she got the Covid vaccine. On Sat 02Jan2021 she went the ER with hives all over including in her mouth, stated she had difficulty breathing/swallowing, was given medication to take home and discharged. She was readmitted yesterday 05Jan2020 with worsening symptoms and needed to be given a prednisone nebulizer. they had two ER visits. No Investigation Assessment. patient was not recovered from the event hives/hives all over including in her mouth, the final outcome of other events was unknown.

VAERS ID: 929391 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 37.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2021-01-08

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<td>011J20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private Purchased by: ?

Symptoms: Acute respiratory failure, Anaphylactic reaction, Dysphagia, Endotracheal intubation, Heart rate increased, Swelling of eyelid, Vomiting

SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Hypoglycaemic and neurogenic shock conditions (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (narrow), Guillain-Barre syndrome (broad),
Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Periorbital and eyelid disorders (narrow), Hypersensitivity (narrow), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No

Previous Vaccinations: 
Other Medications: Escitalopram 10mg 1 po Qday Gabapentin 300mg po three times a day

Current Illness: 
Preexisting Conditions: Bell''s palsy Migraine Seizures Systemic lupus erythematosus
Allergies: Dilantin Ibuprofen Latex Morphine Penicillins Tegretol Valium

Diagnostic Lab Data:

Write-up: 1/6/21 Pt received vaccine and complained of difficulty swallowing and rapid heart rate. Pt received methylprednisolone 125mg IVP, diphenhydramine 25mg IVP, & famotidine 20mg IVP. Pt reported improvement and was discharged. Sent home on diphenhydramine and oral prednisone. 1/7/21 Pt unable to swallow her own secretions and experienced eyelid swelling. Pt vomitted. Pt received epinephrine and Benadryl X 1 dose each. Pt then transported to hospital via ambulance. Reason for admission - acute respiratory failure secondary to anaphylactic reaction. Decision was made to emergently intubate the patient for airway protection despite aggressive intervention. Pt successfully extubated 1/8/21. Plan to discharge home and start Medrol Dose Pack 1/9/21.

VAERS ID: 929610 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-07
Age: 83.0 Days after vaccination: 1
Sex: Female
Location: Florida Submitted: 0000-00-00

Vaccination / Manufacturer | Lot / Dose | Site / Route
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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK9231 / 1 | LA / IM

Administered by: Senior Living Purchased by: ?
Symptoms: Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Align, Amlodipine, Arimidex, Atorvastatin, Calcium, Colace, Gabapentin, Losartan, Mucinex, Namenda, MVI, Pataday drops, Prilosec, Remeron, Vitamin d3
Current Illness: Pneumonia (resolved 12-17-20
Preexisting Conditions: COPD, hypertension, PVD, neuropathy, RA, GERD, OP, breast cancer
Allergies: PCN, Shellfish
Diagnostic Lab Data:
CDC Split Type:
Write-up: C/o shortness of breath routine oxygen increased cannula changed to mask oxygen sats at 88%

VAERS ID: 929683 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-07
Age: 93.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Florida  Entered: 2021-01-08

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<td>EK9231 / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Dyspnoea, Muscular weakness
SMQs; Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Peripheral neuropathy (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Levothyroxine, Lisinopril, Metoprolol, Prozac, Trazadone
Current Illness: Pneumonia, UTI with ESBL
Preexisting Conditions: A-Fib, Cardiomegaly, HTN, CHF, HLD, Hypothyroidism
Allergies: NKA
Diagnostic Lab Data: none transferred to hospital
CDC Split Type:
Write-up: Labored breathing with oxygen running at 4l/min, muscle weakness

VAERS ID: 929689 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-07
Age: 61.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: California Entered: 2021-01-08

Vaccination / Manufacturer | Lot / Dose | Site / Route
---------------------------|------------|-------------
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EH9899 / 2 | RA / IM

Administered by: Senior Living Purchased by: ?
Symptoms: Bacteraemia, Blood culture, Blood lactic acid, Culture urine, Full blood count, Laboratory test, Liver function test, Pyrexia, Respiratory viral panel, SARS-CoV-2 test negative, Urine analysis normal, Urosepsis
SMQs:, Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Sepsis (narrow), Opportunistic infections (broad), COVID-19 (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: HCTZ, losartan, carvedilol, aspirin
Current Illness: none
Preexisting Conditions: h/o multiple strokes, vascular dementia (bedbound, unable to speak) trach for h/o resp failure, G-tube/tubefeed dep
Allergies: amlodipine (gum swelling)
Diagnostic Lab Data: Cultures (blood, urine), COVID PCR & Biofire resp panel on nasopharyngeal swab (negative), CBC, Chem10, lactate, LFTs
CDC Split Type:
Write-up: Fever to 103.7F, respiratory rate 36. Was transferred from facility to hospital. Since then has been found to have gram-negative rod bacteremia, although urinalysis was negative,
urine culture pending. Patient has since defervesced after receiving 1 dose of cefepime. Overall the most likely cause of fever seems to be urosepsis w/ bacteremia, pending confirmation with urine & blood cultures.

VAERS ID: 930005 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-22
Age: 26.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Arizona Entered: 2021-01-08

Vaccination / Manufacturer | Lot / Dose | Site / Route
---------------------------|------------|---------------------
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 011J20A / 1 | LA / IM

Administered by: Other Purchased by: ?
Symptoms: Chest X-ray, Computerised tomogram head, Headache, Hypoaesthesia, Lumbar puncture, Magnetic resonance imaging spinal, Metabolic function test, Paraesthesia, Swollen tongue, Syncope, Urine analysis
SMQs:; Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Angioedema (narrow), Peripheral neuropathy (broad), Arrhythmia related investigations, signs and symptoms (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Hypotonic-hyposensitive episode (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 6 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: none
Current Illness: none
Preexisting Conditions: cholecystectomy one month prior to vaccination with chronic diarrhea since
Allergies: cephalosporins, tramadol
Diagnostic Lab Data: head CT, cxr, spinal mri, spinal tap, cmp/vitals/UA
CDC Split Type:
Write-up: initial; swelling of tongue, tingling and numbness in legs, syncope. later; HA
VAERS ID: 930010 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-06
Age: 87.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Minnesota Entered: 2021-01-08

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<td>026L20A / 1</td>
<td>LA / IM</td>
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Administered by: Senior Living Purchased by: ?

Symptoms: Asthenia, Blood pressure increased, COVID-19 pneumonia, Confusional state, Dyspnoea, Fatigue, Feeling abnormal, Hypoxia, Influenza A virus test negative, Influenza B virus test, Influenza virus test negative, Intensive care, Pyrexia, Respiratory syncytial virus test negative, SARS-CoV-2 test positive, Tremor

SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Parkinson-like events (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypertension (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Citrucel, acetaminophen 8 hour, systane ultra, gabapentin, pantoprazole sodium, vitamin c, vitamin d3, aspirin, atorvastatin calcium, cymbalta, norco, lantus solostar, loperamide, melatonin, toprol xl, flomax, preservision areds, vitamin b-

Current Illness:
Preexisting Conditions: Peripheral vascular disease, chronic systolic heart failure, type 2 diabetes mellitus, essential hypertension, hyperlipidemia, chronic kidney disease stage 3 unspecified, gastro-esophageal reflux disease without esophagitis, hypothyroidism, acquired absence of left and right legs below the knee
Allergies: Colestipol, Amitriptyline, Colestid, Niacin, Ondansetron
Diagnostic Lab Data: COVID-19 PCR test 1/5/21 negative COVID-19 PCR test 1/6/21 positive Influenza A, B; RSV negative 1/6/21
CDC Split Type:
Write-up: Resident displayed with confusion/shaking at 1400, condition worsens at time went. Resident unable to state where he is, knows his name. can tell you he does not feel right. Temp 97.3, p 88, O2 91%, Bp 214/116 Transferred to ED with fever, temp of 103, and
shortness of breath, admitted to ICU. Positive COVID-19 test at hospital. Diagnoses include acute COVID-19 pneumonia and hypoxia. PO had confusion, fatigue, weakness, hypoxia, increased BP.

VAERS ID: 930109 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-06
Age: 93.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Florida  Entered: 2021-01-08

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<td>EL3246 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Other  Purchased by: ?
Symptoms: Dizziness, Ear pain
SMQs: Anticholinergic syndrome (broad), Vestibular disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Insulin, Jardiance, Januvia, Leveimir, Novalog, Lipitor
Current Illness: kidney failure
Preexisting Conditions: Diabetes
Allergies: nokidney failure
Diagnostic Lab Data: no
CDC Split Type:
Write-up: She began with an earache and dizziness. Pain got so severe that she could no longer take it. Went to the doctor which she was put on pain medications. Went to ER on 1/6 and on 1/7 went to her PCP. Still in severe pain.

VAERS ID: 930142 (history)  Vaccinated: 2021-01-05
Form: Version 2.0  Onset: 2021-01-08
Age: 68.0  Days after vaccination: 3
Sex: Female  Submitted: 0000-00-00
Location: Florida  Entered: 2021-01-08

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**Administered by:** Other  
**Purchased by:** ?

**Symptoms:** Chest pain, Stress cardiomyopathy, Troponin increased

**SMQs:** Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (narrow), Other ischaemic heart disease (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  
**Previous Vaccinations:** No  
**Other Medications:** Nortriptline Multivitamin

**Current Illness:**

**Preexisting Conditions:**

**Allergies:** No Known Allergies

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** Patient experiencing Chest pain and elevated troponin. Patient taken to the cath lab and treated for suspected stress induced cardiomyopathy.

---

**VAERS ID:** 930153 (history)  
**Vaccinated:** 2021-01-05  
**Onset:** 2021-01-07  
**Age:** 41.0  
**Sex:** Male  
**Location:** Michigan  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-08

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<td>- / 1</td>
<td>RA / IM</td>
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</table>

**Administered by:** Public  
**Purchased by:** ?

**Symptoms:** Condition aggravated, Immune thrombocytopenia, Platelet count decreased

**SMQs:** Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (narrow)

**Life Threatening?** Yes  
**Birth Defect?** No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Atorvastain 10mg Levothyroxine 112mcg Prilosec 20mg Insulin
Current Illness: NA
Preexisting Conditions: Insulin dependent Diabetes HX of ITP 2014, in remession
Allergies: PCN
Diagnostic Lab Data: Plt 2
CDC Split Type: Write-up: ITP Plt 2

VAERS ID: 930235 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2021-01-02
Age: 44.0 Days after vaccination: 3
Sex: Male Submitted: 0000-00-00
Location: Colorado Entered: 2021-01-08

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<td>025L20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Other Purchased by: ?
Symptoms: Abdominal pain, Asthenia, Back pain, Computerised tomogram spine, Muscular weakness, Paraesthesia, Reflexes abnormal
SMQs: Rhabdomyolysis/myopathy (broad), Acute pancreatitis (broad), Peripheral neuropathy (broad), Retroperitoneal fibrosis (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Multivitamin daily Ambien 5mg daily/nighttime
Current Illness:
Preexisting Conditions: History of Bells Palsy
Allergies:
Diagnostic Lab Data: CT L-Spine *NSMC 01/02

VAERS ID: 930297 (history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-07
Age: 29.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Rhode Island  Entered: 2021-01-08

<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<td>EL1284 / 2</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?

Symptoms: Blood creatine phosphokinase normal, Blood lactic acid, Computerised tomogram head normal, Dysphonia, Insomnia, Muscle rigidity, Nausea, Oropharyngeal pain, Retching, Speech disorder, Tremor, Vomiting

SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Dementia (broad), Parkinson-like events (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No

Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Adderall

Current Illness:
Preexisting Conditions: ADHD
Allergies: Adhesive tape (NOT allergic to latex)

Diagnostic Lab Data: CT scan, lactate, CPK normal

CDC Split Type:
Write-up: 29-year-old previously healthy female presenting today with difficulty sleeping, sore throat, and nausea after receiving the second Pfizer COVID-19 vaccine around 10 AM. Patient says that after her first dose of the vaccine she had mild sore throat and hoarse voice that resolved spontaneously. She had her vaccine around 10, several hours later before
coming to the emergency department between 2--230 she had the sudden onset of difficulty speaking with associated sore throat and nausea. She has had dry heaving but no large amounts of vomiting. She has not had stridor, wheezing, shortness of breath, syncope, or the development of a rash or hives. She has not had a reaction to her prior vaccines she does not have any other allergies in general. She has otherwise been well recently without infectious symptoms including fevers, chills, cough, and has not been exposed to Covid to her knowledge. Medications administered in ED included diphenhydramine 50 mg IV once, dexamethasone 10 mg IV once, famotidine 40 mg IV once, ondansetron 4 mg IV once. Had brief episode of shaking and R arm rigidity in the ED. Patient denies LOC during the episode, did not have a post ictal state, no tongue biting or episodes of incontinence. Given single event without LOC, less concern about episode being a seizure. Patient has had no further episodes of shaking since admission. CT brain was wnl, no FNDs noted on exam.

VAERS ID: 930348 (history)  
Form:  
Age: 33.0  
Sex: Female  
Location: New Jersey  
Vaccination / Manufacturer | Lot / Dose | Site / Route  
--- | --- | ---  
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | - / 1 | LA / SYR  

Administered by: Senior Living  
Purchased by: ?  
Symptoms: Maternal exposure during breast feeding  
SMQs: Neonatal exposures via breast milk (narrow)  
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Previous Vaccinations:  
Other Medications: Prenatal, sunflower lecithin  
Current Illness: No  
Preexisting Conditions: Pcos  
Allergies: Tree nuts and shellfish  
Diagnostic Lab Data: Video eeg starting on 1/6-1/8. Lab work on my daughter. All clear. Episodes stopped after 1/5.  
CDC Split Type:  
Write-up: I am breastfeeding. My daughter had seizure like episodes starting on Saturday 1/2, Sunday 1/3, Monday, 1/4 and 2 times on Tuesday 1/5.
VAERS ID: **930476** (history)  
**Form:** Version 2.0  
**Age:** 40.0  
**Sex:** Female  
**Location:** Texas  
**Vaccinated:** 2021-01-05  
**Onset:** 2021-01-06  
**Days after vaccination:** 1  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-08

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<td>EL3246 / 2</td>
<td>RA / IM</td>
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</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Differential white blood cell count, Full blood count, Glomerular filtration rate, Hyperhidrosis, Hypersensitivity, Loss of consciousness, Metabolic function test, Pharyngeal erythema, Pharyngeal swelling, Platelet count, Rash, Swelling face, Swollen tongue

**SMQs:** Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (narrow), Angioedema (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 2 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Lysine Zoloft Adzenys Evekeo Vitamin d Docusate sodium

**Current Illness:** None

**Preexisting Conditions:** None

**Allergies:** None

**Diagnostic Lab Data:** CBC with platelet and differential x 2 Basic Metabolic Panel Estimated GFR

**CDC Split Type:**

**Write-up:** Acute allergic reaction Tongue swelling Facial swelling Throat swelling Rash on throat and chest Redness in throat Diaphoresis Momentary loss of consciousness
VAERS ID: 930484 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-07
Age: 35.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Wyoming Entered: 2021-01-08

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<td>EJ1686 / 1</td>
<td>AR / IM</td>
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</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Mental status changes
SMQs: Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: Unknown
Current Illness: Unknown
Preexisting Conditions: Unknown
Allergies: Unknown
Diagnostic Lab Data: Unknown
CDC Split Type:
Write-up: Altered Mental Status began the middle of the night of 01/06/21 and 01/07/21 with worsening overall status- definitive symptoms unknown to this reporter, this person was admitted to the local hospital at approximately 1800 01/07/2021. This reporter was not told the admitting diagnosis or any defining symptoms, only that the person was admitted.

VAERS ID: 930508 (history) Vaccinated: 2021-01-08
Form: Version 2.0 Onset: 2021-01-08
Age: 40.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: California Entered: 2021-01-08

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Administered by: Senior Living Purchased by: ?
Symptoms: Mental status changes
SMQs: Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: Unknown
Current Illness: Unknown
Preexisting Conditions: Unknown
Allergies: Unknown
Diagnostic Lab Data: Unknown
CDC Split Type:
Write-up: Altered Mental Status began the middle of the night of 01/06/21 and 01/07/21 with worsening overall status- definitive symptoms unknown to this reporter, this person was admitted to the local hospital at approximately 1800 01/07/2021. This reporter was not told the admitting diagnosis or any defining symptoms, only that the person was admitted.
Administered by: Private  Purchased by: ?
Symptoms: Dyspnoea, Hypotension, Injection site pruritus, Rash, Tachycardia, Throat irritation, Urticaria
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Phentermine (ADIPEX-P) 37.5 mg Oral Cap Hydrocortisone 2.5 % Top Crea cloNIDine HCL (CATAPRES) 0.2 mg Oral Tab tiZANidine (ZANAFLEX) 4 mg Oral Tab traZODone (DESYREL) 50 mg Oral Tab Multivitamin (MULTIPLE VITAMIN) Oral Cap
Current Illness: unknown
Preexisting Conditions:
Allergies: Acetaminophen-codeine Cymbalta [Duloxetine Hcl]
Diagnostic Lab Data:
CDC Split Type:
Write-up: Initial itching at injection site, observed and returned to work. Came back ~30-40 minutes later with itchiness in throat and hives to arm. Given Benadryl PO and observed for extended period of time. Symptoms not resolving. Patient transferred to Emergency Department for further care. At that point observed to have full body rash, SOB. Given Epi while in ED. Developed tachycardia, hypotension. Treatment continued.

VAERS ID: 930518 (history)  Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 33.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Maryland Entered: 2021-00-08

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / 1</td>
<td>LA / IM</td>
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Administered by: Other  Purchased by: ?
Symptoms: Blood potassium decreased, Blood pressure abnormal, Dehydration,
Echocardiogram normal, Electrocardiogram normal, Fatigue, Feeling abnormal, Flushing, Headache, Heart rate increased, Peripheral swelling, Pulse abnormal

SMQs: Cardiac failure (broad), Anaphylactic reaction (broad), Angioedema (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypertension (broad), Hypersensitivity (broad), Dehydration (narrow), Hypokalaemia (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No

Previous Vaccinations: None
Other Medications: None
Current Illness: None
Preexisting Conditions: Dupuytrens, plantar fibromatosis, peyronies
Allergies: None
Diagnostic Lab Data: Low potassium, cardio gram was normal, ekg was normal just very rapid beat, I was told most of my lands were great, had signs of mild dehydration.

CDC Split Type:

Write-up: After about 15 min: hr went to over 170bpm, flushed sensation, brain fog, was driving at the time and my brain wouldn?t figure out how to call 911, eventually I figured it out but it took extreme mental effort. Paramedics came and my pulse was From 100 - 170 changing rapidly, bp 150-175/x changing rapidly, symptoms would come and go about 8 times on way to hospital. In ER same thing then about 2 hrs go by and then all started again. Pulse remained at 90-100bpm at least until 2am. (My resting hr is between 40 and 50, my normal bp is usually sub 120/80) I later realized my hands were swollen, mostly on my left side. Lingering symptoms include brain fog, tiredness, and headache. Maybe an exasperating issue was I had low potassium levels likely making symptoms worse - I worked out heavily early in the morning, probably had low intake of potassium that day and day before, and maybe slightly dehydrated from my workout - I do Functional lifting, run, and other types of exercise regularly.

VAERS ID: 930611 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-07
Age: 71.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Massachusetts Entered: 2021-01-08

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / UNK</td>
<td>- / IM</td>
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</table>
Administered by: Senior Living       Purchased by: ?
Symptoms: Bilevel positive airway pressure, Cardiac failure congestive, Condition aggravated, Intensive care, Respiratory failure
SMQs: Cardiac failure (narrow), Anaphylactic reaction (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Acute central respiratory depression (narrow), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Hypersensitivity (broad), Respiratory failure (narrow), Hypokalaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Albuterol, metoprolol, fish oil, apixiban, insulin
Current Illness: Advanced diastolic heart failure and CKD. Returned from hospitalization one week prior for CHF exacerbation treated with BIPAP, IV diuresis
Preexisting Conditions: oxygen dependent COPD, type II DM, diastolic CHF, stage IV renal failure, personality disorder
Allergies: statin, PCN
Diagnostic Lab Data: unknown
CDC Split Type:
Write-up: Developed hypercapnic respiratory failure, CHF exacerbation - readmitted to Hospital. In ICU with BIPAP

VAERS ID: 930669 (history) Vaccinated: 2020-12-17
Form: Version 2.0 Onset: 2020-12-17
Age: 56.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Arkansas Entered: 2021-01-08

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<td>PAA156051 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private       Purchased by: ?
Symptoms: Dehydration, Feeling abnormal, Malaise, SARS-CoV-2 test positive
SMQs: Hyperglycaemia/new onset diabetes mellitus (broad), Dementia (broad), Infective pneumonia (broad), Dehydration (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: none reported
Current Illness: none reported
Preexisting Conditions: none reported
Allergies: none reported
Diagnostic Lab Data: COVID-19 test positive

Write-up: patient begin to feel bad that night was admitted into hospital sometime in the next couple of days for dehydration, patient discharged home and then readmitted to hospital for positive covid testing after feeling very ill.

VAERS ID: 930889 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-27
Age: 48.0 Days after vaccination: 5
Sex: Male Submitted: 0000-00-00
Location: Minnesota Entered: 2021-01-08

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<td>- / 1</td>
<td>LA / IM</td>
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Administered by: Private Purchased by: ?
Symptoms: Angioplasty, Coronary artery occlusion, Electrocardiogram ST segment elevation, Myocardial infarction, Stent placement
SMQs: Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Propranolol, Pepcid, cetirizine, losartan
Current Illness: None
Preexisting Conditions: HTN, allergies
Allergies: Nkda
Diagnostic Lab Data: I had a myocardial infarction on December 27, 2020. I had received my first vaccination for COVID-19 on December 22, 2020. I had a ST segment elevation MI requiring emergent angio plasty and stenting with a severe ?99%? proximal LAD lesion.

Write-up: I had a myocardial infarction on December 27, 2020. I had received my first vaccination for COVID-19 on December 22, 2020. Not sure if these are related but I felt I should report it.

VAERS ID: 930894 (history)  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2021-01-02
Age: 75.0  Days after vaccination: 4
Sex: Male  Submitted: 0000-00-00
Location: Guam  Entered: 2021-01-08

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<td>- / UNK</td>
<td>AR / -</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?

Symptoms: Blood pressure increased, Brain herniation, Computerised tomogram abnormal, Computerised tomogram head, Haemoglobin increased, Haemorrhage intracranial, Headache, Hypertension, Hypertensive emergency, Hypotonia, Intensive care, International normalised ratio normal, Intracerebral haematoma evacuation, Platelet count normal, Pyrexia, Shift to the left, White blood cell count normal

SMQs: Peripheral neuropathy (broad), Haemorrhage terms (excl laboratory terms) (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Haemorrhagic central nervous system vascular conditions (narrow), Guillain-Barre syndrome (broad), Hypertension (narrow), Hypotonic-hyposresponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Not on medications
Current Illness: Hypertension
Preexisting Conditions: Hypertension
Allergies: Possibly penicillin
Diagnostic Lab Data: Initial BP 178/73 crept up to $g200 despite medications, initially controlled then difficult to control SBP 160-211 Noted new flaccidity 10am 1/2/2021 Stat CT 1/2/2021 head Acute intracranial hemorrhage 6.5x6x 5 cm with beginning of herniation, left shift Labs on 1/1/2021 WBC 8.8, Hgb 16, platelets 160 INR 1/2 =1.0
CDC Split Type:
Write-up: Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care,

VAERS ID: 950259 (history)  Vaccinated: 2020-12-23
Form: Version 2.0  Onset: 2020-12-24
Age: 58.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Unknown  Entered: 2021-01-08

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<td>039K20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Abdominal pain, Appendicectomy, Appendicitis, Nausea
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Appendectomy Narrative: Developed abdominal pain with nausea on 12/24/2020, went to ER and noted to have appendicitis, resulting in an appendectomy
VAERS ID: 930916 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-08
Age: 32.0 Days after vaccination: 1
Sex: Female
Location: New Mexico
Submitted: 0000-00-00
Entered: 2021-01-09

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<td>- / 2</td>
<td>AR / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Abdominal pain, Exposure during pregnancy, Premature baby, Premature delivery, Vaginal haemorrhage
SMQs: Acute pancreatitis (broad), Haemorrhage terms (excl laboratory terms) (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Pregnancy, labour and delivery complications and risk factors (excl abortions and stillbirth) (narrow), Neonatal disorders (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: prenatal vitamin calcium supplement 1200 mg vitamin d3 1000 iu Aspirin 81 mg
Current Illness: none
Preexisting Conditions: none
Allergies: NKA
Diagnostic Lab Data: see above
CDC Split Type:
Write-up: Patient is a 32 yo G2P1001 with EDD 5/2/2021 by 7w US. She had the first dose of the Pfizer Covid 19 vaccination on 12/17/2020 at the Health Clinic and the second dose on 1/7/2021 at 1115 am. She began having abdominal pain and vaginal bleeding at 315 sm on 1/8/2021 progressing to a previable (22w2d) preterm birth at 739pm on 1/8/2021.

VAERS ID: 931224 (history) Vaccinated: 2021-01-04
Form: Version 2.0 Onset: 2021-01-05
Age: 39.0 Days after vaccination: 1
Sex: Female
Location: Texas
Submitted: 0000-00-00
Entered: 2021-01-09
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<td>EJ1686 / 2</td>
<td>LA / IM</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Asthenia, Blood thyroid stimulating hormone normal, CSF cell count normal, CSF culture, CSF protein normal, Computerised tomogram head, Computerised tomogram head normal, Fatigue, Full blood count normal, Gait disturbance, Headache, Hyporeflexia, Lumbar puncture normal, Metabolic function test normal, Muscular weakness, Somnolence, Speech disorder, Spinal X-ray normal, Syncope, Vitamin B12 decreased, Vomiting

SMQs: Torsade de pointes/QT prolongation (broad), Rhabdomyolysis/myopathy (broad), Acute pancreatitis (broad), Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Parkinson-like events (broad), Psychosis and psychic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? Yes  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 4 days  
Extended hospital stay? No  

Previous Vaccinations:

Other Medications: Levothyroxine 200 mcg, Vyvanse 60 mg

Current Illness: NONE

Preexisting Conditions: Hypothyroidism, ADHD

Allergies: SHELLFISH, CECLOR


CDC Split Type: NONE

Write-up: Pt experienced extreme fatigue and sleepiness the day following her second vaccination for Covid 19 and was found by her family after collapsing on 1/6/21 at 05:30. Upon arousal, she experienced headache, vomiting, weakness, difficulty speaking and difficulty walking with lower extremity weakness. She was taken to urgent care and subsequently admitted for evaluation at hospital and found to have a normal chemistry, blood count, normal lumbar puncture and normal imaging of her neck and brain. Discharge summary notes 3/5 strength and hyporeflexia throughout. Pt had televisit consult with psychiatry and neurology. She is subsequently to be discharged to a Facility without explanation for her sudden onset of progressive lower extremity and vocal weakness. She is noted to have a history of shellfish allergy. She experienced mild symptoms after the first vaccination, but no neurologic or vascular symptoms at that time.
VAERS ID: 931286 (history)
Form: Version 2.0
Age: 57.0
Sex: Female
Location: Massachusetts
Vaccinated: 2020-01-04
Onset: 2021-01-05
Days after vaccination: 367
Submitted: 0000-00-00
Entered: 2021-01-09

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<td>EK5730 / 2</td>
<td>LA / IM</td>
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</tbody>
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Administered by: Private
Purchased by: ?

Symptoms: Audiogram abnormal, Auditory disorder, Balance disorder, Blood test normal, Deafness, Deafness bilateral, Electrocardiogram normal, Fatigue, Magnetic resonance imaging brain normal, Myalgia, Pyrexia, Tinnitus, Vertigo

SMQs: Rhabdomyolysis/myopathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Eosinophilic pneumonia (broad), Hearing impairment (narrow), Vestibular disorders (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Topiramate, Nortriptline, ibuprofen, Excedrin migraine, Zolmitriptan, Estrace cream

Current Illness: none

Preexisting Conditions: History of Graves disease, history of episodic vertigo with hearing loss thought to be due to inflammatory hair cell disease

Allergies: Sulfa, SSRI

Diagnostic Lab Data: brain MRI negative including auditory canals, blood work and EKG negative, audiogram showing profound hearing loss more at high frequencies and loss of discrimination in R ear.

CDC Split Type:
Write-up: I am a physician and I got dose 2 at 1:30pm on Jan 4. Next afternoon, Jan 5, I got severe myalgias, fever up to 100, severe fatigue, went home after work and slept til the next morning, went to work, took ibuprofen, and the myalgias improved and felt better. But around 3 pm, Jan 6, I got mild vertigo. By about 7pm Jan 6, I noticed my L ear didn't hear well. I changed the battery in my hearing aide and cleaned it but It made no difference. I woke up on Jan 7 with severe vertigo and hearing loss. I did Epley's maneuvers with no effect. I have had
similar episodes. I went to work, but gave up when I could not hear patients talking to me. I went to the Emergency Dept and got admitted. I was too unsteady on my feet. Audiogram showed profound hearing loss both ears and almost complete loss of discrimination in R ear. I was put on high dose steroids. Also having tinnitus (mostly whooshing sound of my own pulse). MRI negative. Blood work negative. Some mild improvement now, after 1 dose steroids.

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Administered by: Private   Purchased by: ?

Symptoms: Blood test, Chills, Dyspnoea, Headache, Hypertension, Pyrexia, Tachycardia

SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Hypertension (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: Depression
Allergies: Toradol: hives Vancomycin: itch
Diagnostic Lab Data: Blood labs 01/08-09/2021
CDC Split Type:
Write-up: Fever up to 102.9, chills, headache, hypertension, tachycardia, dyspnea.
VAERS ID: 931417 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-07
Age: 60.0 Days after vaccination: 0
Sex: Male
Location: Florida
Submitted: 0000-00-00
Entered: 2021-01-09

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<td>EL1283 / 1</td>
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Administered by: Private  Purchased by: ?

Symptoms: Activated partial thromboplastin time prolonged, Arthralgia, Blood chloride decreased, Blood glucose normal, Blood potassium decreased, Blood sodium decreased, Cardiac ventriculogram left, Catheterisation cardiac abnormal, Chest pain, Dyspnoea, Echocardiogram normal, Ejection fraction decreased, Electrocardiogram, Electrocardiogram ST segment elevation, Hypokinesia, Myocardial infarction, N-terminal prohormone brain natriuretic peptide increased, Neck pain, Pain, Prothrombin time prolonged, Pyrexia, SARS-CoV-2 test negative, Stent placement, Troponin T increased

SMQs: Cardiac failure (narrow), Liver-related coagulation and bleeding disturbances (narrow), Anaphylactic reaction (broad), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Embolic and thrombotic events, arterial (narrow), Parkinson-like events (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Hyponatraemia/SIADH (narrow), Cardiomyopathy (narrow), Hypotonic-hyponesive episode (broad), Chronic kidney disease (broad), Arthritis (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypokalaemia (narrow), COVID-19 (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: zinc sulfate omeprazole metoprolol levothyroxine sodium HCTZ echinacea purpurea extract cholecalciferol
Current Illness: malignant melanoma HTN hypothyroidism GERD
Preexisting Conditions: malignant melanoma
Allergies: codene lactose
Diagnostic Lab Data: portable echo in ER: no effusion, inferior wall poorly visualized EKG: suggestive of Inferior Wall STEMI cardiac cath: RCA-Pd 100% at origin with TIMI 0 flow (infarct related artery) LV angio: inferior and inf-apical hypokinesis, EF approx 45% PCI (drug
eluting stent placed to RCA-Pd) troponin T 4.250 NT Pro BNP 2231 SARS CoV-2 (agent for COVID -19) not detected by PCR glucose 106 Na 127 K 3.3 Cl 93 PTT 36.4 PT 13.7

CDC Split Type:
Write-up: Myocardial Infarction: patient began to complain of severe chest pain 3 hours after the vaccine was given .. Vaccine NDC # 59267-1000-1. 0.3 ml given by RN. Patient called his PCP: "... I had very bad chest and shoulder pains, neck pains and slight fever from 9 pm until early this morning (Jan 8). My blood pressure was 155/95 mmHg. Should I see you today? Still feel sore all upper body. Above message received at 0720 am (Jan 8) and the patient was called back at 0757 am (Jan 8): patient was told that many of the side effects above were related to the vaccine but the chest pain was worrisome and the provider requested the patient go to the emergency room. Patient understood the importance to seek medical attention..... Emergency Room notes: seen by MD on Jan 9. Note at 0749: patient complained of chest pain on/off since received COVID vaccine on Jan 7. Pain was substernal and radiated to the left shoulder, assoc with some SOB. EKG obtained and revealed ST segment elevation and a "cardiac alert" was called.

VAERS ID: 931432 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 34.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Florida Entered: 2021-01-09

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Administered by: Private Purchased by: ?
Symptoms: Computerised tomogram head normal, Electroencephalogram normal, Facial paralysis, Fatigue, Hypoaesthesia oral, Laboratory test, Magnetic resonance imaging normal, Muscle twitching, Paraesthesia, Scan with contrast, Ultrasound Doppler normal
SMQs.: Peripheral neuropathy (broad), Dyskinesia (broad), Dystonia (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious meningitis (broad), Hearing impairment (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Zoloft 50 mg Clonazepam 0.5mg
Current Illness: none
Preexisting Conditions: none
Allergies: none
Diagnostic Lab Data: all done Jan 6th CT scan - normal EEG- normal MRI with and without contrast - normal doppler of both carotid arteries- normal echo - not performed
CDC Split Type:
Write-up: At around 11:45pm tingling started in my left eyebrow. I thought there was something in my eyebrow and after time of wiping it a few times I went to look into the mirror and realized that nothing was there. about and hour later I got a drink and a snack to eat and I realized I had a numb sensation in the left corner of my lip. As a nurse I went though the signs of a stroke with 2 other nurses I called. Everything was normal other than that sensation. Thinking I was just overly tired I went to bed. When I woke up the next day I felt okay until I went to drink some coffee and the numb sensation in my corner lip was still there. Now I was concerned and called employee health and was instructed to go to the ER to role out a stoke. I followed employee health"s instructions and went to the ER. I was diagnosed with facial paresthesia and discharged with instructions to come back if symptoms got worse. Symptoms persisted all day and around 7 I called my mom on video chat to show a visual facial twitch on the left side of my face. right after I got off the phone with her the left side of my face drooped and my fiance immediately drove me to the closest ER. I was seen immediately and they decided to admit me. The did labs and head CT. They admitted me to labor and delivery because there were no other rooms. The next day I was seen by a neurologist and many doctors.

VAERS ID: 931484 (history)  Vaccinated: 2021-01-08
Form: Version 2.0  Onset: 2021-01-08
Age: 78.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Massachusetts  Entered: 2021-01-09

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Administered by: Senior Living  Purchased by: ?
Symptoms: Blood glucose normal, Fatigue, Loss of consciousness, Pain in extremity, Unresponsive to stimuli
SMQs:, Torsade de pointes/QT prolongation (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Tendinopathies and ligament disorders (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Write-up: Patient was unresponsive in her room during the night, had gotten the vaccine this morning, 911 called. Had right arm pain and loss of consciousness. EMS got 180/104 BP and blood glucose was 122. Was transported to hospital. Returned to the facility the next day with no complications, was just fatigued.

VAERS ID: 931507 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-07
Age: 62.0 Days after vaccination: 0
Sex: Female
Location: New York Submitted: 0000-00-00
Entered: 2021-01-09

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 012L 20A / 1 RA / IM

Administered by: Other Purchased by: ?

Symptoms: Abdominal pain upper, Asthenia, Cardiac stress test, Cardiovascular evaluation, Chest X-ray, Chest discomfort, Dizziness, Electrocardiogram ST segment elevation, Gait inability, Malaise, Myocardial necrosis marker, Nausea, Scan myocardial perfusion, Speech disorder

SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Myocardial infarction (broad), Anticholinergic syndrome (broad), Dementia (broad), Dystonia (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: No
Other Medications: Lord attain Trazadone
Current Illness: No
Preexisting Conditions: No
Allergies: No
Diagnostic Lab Data: EKG, chest X-ray, cardiac markers, stress test, nuclear stress scan.

Write-up: 8 hours after vaccine I experienced stomach pain and nausea. I then became very ill and extremely weak. I was laying on floor. Very difficult to talk and very dizzy. Unable to walk. Called 911 and went to ER. Had chest pressure and cardia work up was done. Dx wi ST elevation.

VAERS ID: 931558 (history)
Form: Version 2.0
Age: 47.0
Sex: Female
Location: Arkansas
Vaccinated: 2020-12-22
Onset: 2020-12-30
Days after vaccination: 8
Submitted: 0000-00-00
Entered: 2021-01-09

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<td>011J20A / 1</td>
<td>- / IM</td>
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Administered by: Pharmacy  Purchased by: ?

Symptoms: Cerebrovascular accident, Computerised tomogram, Hypercoagulation, Injection site pruritus, Injection site swelling, Injection site warmth, Laboratory test, Magnetic resonance imaging brain, Magnetic resonance imaging neck, Scan with contrast

SMQs: Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: CT with contrast, MRI and MRA of head, MRI neck, expensive labwork

Write-up: 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation
### Case 1

**VAERS ID:** 931658 (history)  
**Form:** Version 2.0  
**Age:** 52.0  
**Sex:** Female  
**Location:** Pennsylvania  
**Vaccinated:** 2021-01-09  
**Onset:** 2021-01-09  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-09

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<td>LA / IM</td>
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**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:** Chest pain, Dizziness, Feeling hot, Immediate post-injection reaction, Retching

**SMQs:** Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypersensitivity (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
  **Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** gummy multivitamin

**Current Illness:** none

**Preexisting Conditions:** none

**Allergies:** Demerol, PCN, onions

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** after receiving vaccine patient immediately felt warm, dizzy and started dry heaving. we dosed Zofran 4mg, gave one dose epi-pen, and 50mg Benadryl. patient still complained of chest pain and was dry heaving. she was then transported by ems to the hospital at 4pm.

---

### Case 2

**VAERS ID:** 931662 (history)  
**Form:** Version 2.0  
**Age:** 49.0  
**Sex:** Female  
**Location:** North Carolina  
**Vaccinated:** 2020-12-19  
**Onset:** 2020-12-19  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-09

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**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:** Chest pain, Dizziness, Feeling hot, Immediate post-injection reaction, Retching

**SMQs:** Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypersensitivity (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
  **Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** gummy multivitamin

**Current Illness:** none

**Preexisting Conditions:** none

**Allergies:** Demerol, PCN, onions

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** after receiving vaccine patient immediately felt warm, dizzy and started dry heaving. we dosed Zofran 4mg, gave one dose epi-pen, and 50mg Benadryl. patient still complained of chest pain and was dry heaving. she was then transported by ems to the hospital at 4pm.
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private 
Purchased by: ?

Symptoms: Abdominal pain, Appendicectomy, Computerised tomogram, Full blood count, Metabolic function test, Post procedural haemorrhage, Surgical procedure repeated, Vomiting

SMQs: Acute pancreatitis (broad), Haemorrhage terms (excl laboratory terms) (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 5 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Zyrtec, vitamin c, singular, lisinopril, xolair
Current Illness: Asthma, hypertension
Preexisting Conditions: Asthma, hypertension
Allergies: Lovenox, latex, pollen, mold, cat dander
Diagnostic Lab Data: CT scan, CBC, chem 7 on 12/20/2020

Write-up:
Received vaccine 12/19/2020 at hospital around lunch time. Severe abd pain started 10 hours after vaccine administration with vomiting. I went to emergency room next morning Emergency appendectomy 12/20/2020. Had bleeding after surgery. Second surgery 12/21/2020

VAERS ID: 932059 (history)

Form: Version 2.0
Age: 49.0
Sex: Male
Location: Louisiana

Vaccinated: 2021-01-08
Onset: 2021-01-09
Days after vaccination: 1
Submitted: 0000-00-00
Entered: 2021-01-09

COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA

Administered by: Other 
Purchased by: ?

Symptoms: Asthenia, Balance disorder, Diarrhoea, Dizziness, Electrocardiogram abnormal, Fatigue, Feeling abnormal, Full blood count normal, Gait disturbance, Influenza virus test, Influenza virus test negative, Injection site pain, Metabolic function test, Metabolic function test normal, Nausea, Pain, Pallor, Presyncope, Pyrexia, SARS-CoV-2 test negative, Sensory disturbance, Troponin normal, Ventricular extrasystoles, Vomiting

SMQs: Acute pancreatitis (broad), Peripheral neuropathy (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs
and symptoms (broad), Ventricular tachyarrhythmias (narrow), Dementia (broad), Pseudomembranous colitis (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Hypokalaemia (broad), COVID-19 (broad)

**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** Yes
**Hospitalized?** Yes, ? days
**Extended hospital stay?** No

**Previous Vaccinations:**
**Other Medications:** amlodipine, losartan, Naprosyn, metoprolol succinate, adipex-p, Topamax, testosterone, zinc gluconate, anastrozole, omeprazole

**Current Illness:** none

**Preexisting Conditions:** hypertension

**Allergies:** KNDA

**Diagnostic Lab Data:** 01/09/21: CBC- normal CMP- normal Rapid Covid and Flu - negative Troponin- <0.02 EKG- NSR with occasional PVC's

**CDC Split Type:**

**Write-up:** Dizziness started within 30 minutes after injection on 01/08/21 and felt "off". On 01/09/21 approx. 0800 Patient began feeling body aches, fevers, injection site pain, increased dizziness, and nausea. At approximately 1pm patient began vomiting and having diarrhea. Symptoms worsened over the next couple hours to where patient was unable to walk without stumbling. Wife witnessed patient becoming very pale and almost pass out at approx. 5:30pm. Patient states he feels like he"s in slow motion. Patient is unable to maintain balance when walking and reports increasing fatigue and weakness.

**VAERS ID:** [956978](https://vaers.hhs.gov) (history)

**Form:** Version 2.0
**Age:** 80.0
**Sex:** Male
**Location:** Unknown

**VAERS ID** and **Onset:**
- **Vaccinated:** 2020-12-22
- **Onset:** 2020-12-29
- **Days after vaccination:** 7
- **Submitted:** 0000-00-00
- **Entered:** 2021-01-09

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**Administered by:** Other
**Purchased by:** ?

**Symptoms:** Angiogram pulmonary abnormal, Breath sounds abnormal, Chest X-ray abnormal, Cough, Dyspnoea, Pain, Pneumonia, Rhinorrhoea
**SMQs:** Anaphylactic reaction (broad), Acute central respiratory depression (narrow),
Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: pneumonia Narrative: On 11/9/20, Patient had a presumptive positive COVID (COBAS) screen as part of routine CLC screening and then on 11/13/20, he had a repeat COVID (CEPHID) that was negative. Then on 12/22/20, he received his first COVID vaccine. On 12/26/20, he began to have c/o hurting all over. Noted history of aspiration and COPD. On 12/29/20, he began to have coughing, increased shortness of breath and runny nose with course breath sounds in his bilateral lower lobes. A chest xray was done and he was initiated on oral azithromycin and cefepime for a bilateral pneumonia. On 1/3/21, he continued to decline with increasing shortness of breath and was subsequently transferred to acute care medicine. All COVID tests have been negative since the presumptive positive on 11/9/20. He did have a CTA that ruled out PE but did show bilateral pneumonia. His antibiotics have been changed to meropenem, vancomycin and IV azithromycin. He remains on acute care at time and has not required ICU care.

VAERS ID: 956991 (history)  Vaccinated: 2020-12-28
Form: Version 2.0  Onset: 2021-01-04
Age: 77.0  Days after vaccination: 7
Sex: Male  Submitted: 0000-00-00
Location: Unknown  Entered: 2021-01-09

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Blood urea nitrogen/creatinine ratio increased, Hypovolaemia, SARS-CoV-2 test positive
SMQs: Acute renal failure (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (narrow), Opportunistic infections (broad),
Write-up: COVID positive Narrative: Patient is a resident and received his first COVID vaccine on 12/28/20. On 1/4/21, he had a COVID routine screen done that returned positive on 1/6/21. Per notes, he was asymptomatic at the time; however for isolation purposes, he was transferred to acute care medicine services. On 1/7/21, he was noted to have a slight increase in BUN/creatinine ratio thought to be due to volume depletion and has been ordered IV fluids. He still remains free of any respiratory symptoms at this time.

<table>
<thead>
<tr>
<th>VAERS ID: 957037 (history)</th>
<th>Vaccinated: 2020-12-23</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-26</td>
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<tr>
<td>Age: 44.0</td>
<td>Days after vaccination: 3</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Unknown</td>
<td>Entered: 2021-01-09</td>
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</table>

Vaccination / Manufacturer | Lot / Dose | Site / Route |
---------------------------|------------|--------------|
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 039K20A / 1 LA / IM

Administered by: Other  Purchased by: ?
Symptoms: Diarrhoea, Nausea, Vomiting
SMQs: Acute pancreatitis (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
VAERS ID: 964641 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 57.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Unknown Entered: 2021-01-09

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>026L20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other Purchased by: ?
Symptoms: Impaired driving ability, Seizure
SMQs: Systemic lupus erythematosus (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Narrative: Temporary restriction on driving until further evaluation due to symptoms of seizures.
VAERS ID: 1395602 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-06
Age: 49.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Unknown Entered: 2021-01-09

<table>
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<tr>
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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Chills, Computerised tomogram, Dizziness, Ear pain, Fatigue, Headache, Hypoaesthesia, Myalgia, Nausea, Paraesthesia, Tinnitus, Vision blurred, Vomiting
SMQs: Rhabdomyolysis/myopathy (broad), Acute pancreatitis (broad), Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Glaucoma (broad), Lens disorders (broad), Eosinophilic pneumonia (broad), Retinal disorders (broad), Hearing impairment (narrow), Vestibular disorders (broad), Tendinopathies and ligament disorders (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Dizziness, Headache, Myalgia, NauseaVomiting, Fatigue, chills, Right ear pain, dizziness, fuzzy vision, Right sided numbness Narrative: Employee reported fatigue, chills, myalgia, severe right ear pain (drilling like sensation), dizziness, nausea, vomiting and right sided numbness / tingling. CT completed - suspected intracranial bleeding. Transferred to local ED for care and management.

VAERS ID: 932091 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2021-01-05
Age: 50.0 Days after vaccination: 20
Sex: Male Submitted: 0000-00-00
Location: Florida Entered: 2021-01-10
Vaccination / Manufacturer | Lot / Dose | Site / Route
---|---|---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | - / 1 | - / IM

Administered by: Work  
Purchased by: ?

Symptoms: Abdominal pain, Computerised tomogram abdomen abnormal, Mesenteric vein thrombosis

SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Embolic and thrombotic events, venous (narrow), Thrombophlebitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Ischaemic colitis (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 5 days  
Extended hospital stay? No  

Previous Vaccinations:  
Other Medications: NO  
Current Illness: NO  
Preexisting Conditions: None  
Allergies: Simvastatin  
Diagnostic Lab Data:  

Write-up: Started severe belly pain and went to Emergency room and diagnosed with mesenteric vein thrombosis after the CT scan of the abdomen, treated with heparin drip, antibiotic and discharged with anticoagulant pills (Eliquis). I am not sure that it is because of the vaccine my doctors are also not sure about it, but I am sure that I am a healthy person without any health issues. I am working as registered nurse, our unit is for covid-19 patient's since march 2020 and I had covid-19 on August month and recovered after 3 weeks.
Symptoms: Angiogram cerebral, Aphasia, Arteriogram carotid, Cerebral artery occlusion, Computerised tomogram head, Facial paresis, Hypotonia, Ischaemic stroke, Monoparesis, NIH stroke scale abnormal

SMQs: Peripheral neuropathy (broad), Ischaemic central nervous system vascular conditions (narrow), Dementia (broad), Embolic and thrombotic events, arterial (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications:

Current Illness: Hypertension, hypothyroidism
Preexisting Conditions: Hypertension, hypothyroidism
Allergies: None
Diagnostic Lab Data: Complete stroke workup with noncontrast CT head and CT angiogram of the head and neck.

CDC Split Type:
Write-up: Patient came into the emergency department on 1/8/21 with an acute ischemic stroke with complete occlusion of her left MCA. She had acute and complete flaccid paresis of her right face, arm, and leg, complete aphasia, and neglect of the right side of her body. NIHSS of 27. Onset of deficit was between 6:30pm-7:10pm. She recieved her 1st COVID-19 vaccine dose that morning at 10:31am.

VAERS ID: 932366 (history)  Vaccinated: 2021-01-09
Form: Version 2.0  Onset: 2021-01-09
Age: 38.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Virginia  Entered: 2021-01-10

<table>
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<tr>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL3246 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Angiogram cerebral, Arteriogram carotid, Chest X-ray, Computerised tomogram
The patient presented with left eye peripheral visual loss, left upper and lower extremity and facial numbness sensation and weakness. This started 1 hour after receiving COVID-19 vaccine at her place of employment. Pt was brought to CRMC via EMS.

VAERS ID: 932372 (history)  
Vaccinated: 2021-01-02  
Onset: 2021-01-02  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2021-01-10

<table>
<thead>
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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>- / IM</td>
</tr>
</tbody>
</table>

Administered by: Public  
Purchased by: ?

Symptoms: Asthenia, Cough, Gait inability, Malaise, Pyrexia, SARS-CoV-2 test positive

SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dystonia (broad), Guillain-Barre syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No  
Birth Defect? No  
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Amlodipine, NPH Insulin, Levothyroxine, Simvastatin
Current Illness:
Preexisting Conditions:
Allergies: No known allergies
Diagnostic Lab Data:
CDC Split Type:
Write-up: Patient received the Moderna Vaccine 1/2/21 at his VA Clinic. He received the
vaccine that morning and by the evening he was not feeling well. He developed cough,
weakness and fever and now is unable to ambulate. He has since been hospitalized and has
tested positive for COVID-19.

VAERS ID: 932480 (history)  Vaccinated: 2021-01-05
Form: Version 2.0  Onset: 2021-01-06
Age: 69.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: Minnesota  Entered: 2021-01-10

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / UNK</td>
<td>- / -</td>
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</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Blood test normal, Confusional state, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia
(broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad),
Noninfectious meningitis (broad), Drug reaction with eosinophilia and systemic symptoms
syndrome (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: Covid 19 infection diagnosed 5 weeks prior
Preexisting Conditions: COPD, CAD, HTN, dementia
**VAERS ID:** 932515 (history)  
**Vaccinated:** 2020-12-29  
**Form:** Version 2.0  
**Age:** 73.0  
**Sex:** Male  
**Location:** Ohio  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-10

**Vaccination / Manufacturer**  
<table>
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<tr>
<th>Vaccine Type</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>E10140 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:** COVID-19 pneumonia, Chromaturia, Computerised tomogram, Dyspnoea, Jaundice, Laboratory test, Malaise, Ocular icterus, Yellow skin

**SMQs:** Rhabdomyolysis/myopathy (broad), Cholestasis and jaundice of hepatic origin (narrow), Anaphylactic reaction (broad), Acute pancreatitis (broad), Acute central respiratory depression (broad), Biliary system related investigations, signs and symptoms (narrow), Biliary tract disorders (narrow), Pulmonary hypertension (broad), Cardiomyopathy (broad), Conjunctival disorders (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanen Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Aspirin, cyanacabalmin, dulpxetine, lasix, isosorbide, Slisinop

**Current Illness:** COPD, PTSD, CAD, BPH, Post COVID

**Preexisting Conditions:** CAD, COPD, PTSD, BPH

**Allergies:** PCN, Lactose intolerant

**Diagnostic Lab Data:** CT Scan, Lab work,

**Write-up:** Resident appeared to be jaundice with yellow skin and eyes. Resident also complained of not feeling well. Urine was dark yellow. Resident short of breath. Resident was admitted to hospital and diagnosed with post-covid pneumonia.
VAERS ID: 932623 (history)  Vaccinated: 2021-01-09
Form:  Version 2.0  Onset: 2021-01-10
Age:  78.0  Days after vaccination: 1
Sex:  Male
Location:  Illinois
Submitted: 0000-00-00
Entered: 2021-01-10

<table>
<thead>
<tr>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) /</td>
<td>EL1283 / 2</td>
<td>UN / IM</td>
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<tr>
<td>PFIZER/BIONTECH</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Angiogram, Basilar artery occlusion, Computerised tomogram, Ischaemic stroke
SMQs: Ischaemic central nervous system vascular conditions (narrow), Embolic and thrombotic events, arterial (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: amlodipine, atorvastatin, esomeprazole, metoprolol, omega-3, ticagrelor, cyanocobalamin
Current Illness:
Preexisting Conditions: Hypertension, hyperlipidemia, coronary artery disease (s/p angioplasty)
Allergies: aspirin
Diagnostic Lab Data: CT/CTA
CDC Split Type:
Write-up: Acute ischemic stroke, basilar occlusion

VAERS ID: 932668 (history)  Vaccinated: 2021-01-07
Form:  Version 2.0  Onset: 2021-01-09
Age:  55.0  Days after vaccination: 2
Sex:  Male
Location:  Illinois
Submitted: 0000-00-00
Entered: 2021-01-10

<table>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>037K20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other  Purchased by: ?
Symptoms: Dyspnoea
SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Senna 8.6mg 2 tabs po Vit. D 1000 ui 2 tabs po Lactulose 30 cc BID
Current Illness: none
Preexisting Conditions: 318.2 profound intellectual disability gingivitis 758.0 down syndrome 272.4 hyperlipidemia 564.00 chronic constipation vitamin D insufficiensy
Allergies: none
Diagnostic Lab Data:
CDC Split Type:
Write-up: SOB

VAERS ID: 932696 (history)
Vaccinated: 2021-01-07
Form: Version 2.0
Onset: 2021-01-08
Age: 26.0
Days after vaccination: 1
Sex: Male
Submitted: 0000-00-00
Entered: 2021-01-10

<table>
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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>AR / IM</td>
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</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Decreased appetite, Dehydration, Diarrhoea, Nausea, Tachycardia, Vomiting
SMQs: Acute pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (narrow), Dehydration (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: Keppra, colase, miralax, erythromycin, acidophilus  
Current Illness: no  
Preexisting Conditions: CP, seizure disorder  
Allergies: Gluten, lactose intolerance  
Diagnostic Lab Data: 1/10/21 sent to er Dx dehydration  
CDC Split Type:  
Write-up: Nausea/vomiting and diarrhea loss of appetite tachicardia sent to er for hydration.

<table>
<thead>
<tr>
<th>VAERS ID: 932801 (history)</th>
<th>Vaccinated: 2020-12-17</th>
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</thead>
<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-19</td>
</tr>
<tr>
<td>Age: 32.0</td>
<td>Days after vaccination: 2</td>
</tr>
<tr>
<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
</tr>
<tr>
<td>Location: Illinois</td>
<td>Entered: 2021-01-10</td>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Work  
Purchased by: ?  
Symptoms: Abdominal pain upper, Condition aggravated, Gallbladder disorder, Gallbladder operation  
SMQs: Acute pancreatitis (broad), Gallbladder related disorders (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)  
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, ? days  
Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: Unknown  
Current Illness:  
Preexisting Conditions: Hx of gallbladder disease  
Allergies: Unknown  
Diagnostic Lab Data:  
CDC Split Type:  
Write-up: Two days following the first COVID vaccination he developed epigastric pain and was evaluated in the ER and was admitted for gallbladder surgery. He has a 6 year history of gallbladder disease but was not experiencing symptoms until after the COVID vaccination.
VAERS ID: 932915 (history)  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2021-01-08
Age: 25.0  Days after vaccination: 10
Sex: Female
Location: Washington  Submitted: 0000-00-00
Enterered: 2021-01-10

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 037K20A / 1 LA / IM

Administered by: Private  Purchased by: ?
Symptoms: Contusion, Haematocrit normal, Haemoglobin normal, Mean cell haemoglobin concentration normal, Mean cell haemoglobin normal, Mean cell volume normal, Mouth haemorrhage, Platelet count decreased, Red blood cell count normal, Red cell distribution width normal, Thrombocytopenia, White blood cell count normal
SMQs: Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematousus (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Accidents and injuries (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Zoloft (sertraline), vitamin D, cetirizine (zyrtec)
Current Illness: None
Preexisting Conditions: Anxiety, history of anti-thyroglobulin antibodies
Allergies: None
Diagnostic Lab Data: CBC 1/8/21 - WBCs 8.65, RBCs 4.47, Hg 13.7, Hct 40, MCV 89, MCH 30.6, MCHC 34.3, Plts 1** (d) C, RDW 11.8%.
CDC Split Type:
Write-up: Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising

VAERS ID: 933025 (history)  Vaccinated: 2020-12-21
Form: Version 2.0  Onset: 2020-12-28
Age: 43.0  Days after vaccination: 7
Sex: Female
Location: Arizona  Submitted: 0000-00-00
Enterered: 2021-01-10

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA - / 1 - / -

SMQs: Hyperglycaemia/new onset diabetes mellitus (narrow), Oropharyngeal infections (narrow), Noninfectious encephalitis (narrow), Noninfectious encephalopathy/delirium (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypokalaemia (narrow), Opportunistic infections (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations: None
Other Medications: methimazole 2.5 mg daily, MVI, D3, B12

Current Illness: none
Preexisting Conditions: hyperthyroidism
Allergies: None

Diagnostic Lab Data: CBC: normal WBC, no anemia, normal platelet BMP: glucose 115, eGFR 96 Cr 0.76, Na 136, K 3.3, Cl 101 CO2 22, AG 13, Ca 9.2 urine + ketones (small) CT head: IMPRESSION: 1. No evidence of acute parenchymal hemorrhage 2. Patchy areas of hypodensity noted within the occipital lobes bilaterally greater on the left than the right. Findings favored to represent underlying posterior reversible encephalopathy syndrome, further evaluation with MRI of the brain is warranted. CT angio head/neck Impression: 1. No evidence of significant stenosis, vascular occlusion, arterial dissection extracranial vasculature of the neck 2. No evidence of significant stenosis, vascular occlusion, arterial aneurysm the arteries of the circle of Willis MRI brain w/o contrast IMPRESSION: No evidence of an acute intracranial process. Essentially unremarkable examination of the brain without distinct findings to indicate PRESS syndrome. 12/29 labs indicated resolution of hypokalemia and ketonuria. Hgb A1c 5.5%.

CDC Split Type: Sudden, severe worst headache of her life, coupled with onset of oral herpetic lesions and inflammation to unrelated body part (belly button piercing) occurred one week after vaccination received. She presented to ED 12/28 noted to have hypokalemia and head CT showed mild occipital encephalitis, admitted overnight for obs subsequent brain MRI was normal. She was seen in my clinic 2 days later (1/4/21) and was started on 3 day course of Decadron, topical acyclovir for herpetic lesion. As she is a nurse, I kept her off work until resolution of symptoms. Seen again on 1/8/21, headache resolved. She did discuss CT and MRI results with neurologist. He was not convinced this was vaccine related. She is having
2nd dose of vaccine on 1/11/21.

<table>
<thead>
<tr>
<th>VAERS ID: 951288 (history)</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-06</td>
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<tr>
<td>Age: 69.0</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Sex: Female</td>
<td>Entered: 2021-01-10</td>
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<td>Location: Unknown</td>
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</table>

**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
--- | --- | ---
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 039K20A / 1 | LA / IM |

Administered by: Other  
Purchased by: ?

**Symptoms:** Blood potassium decreased, Dyspnoea, Respiratory depression

**SMQs:** Anaphylactic reaction (broad), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Cardiomyopathy (broad), Respiratory failure (narrow), Hypokalaemia (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 1 days  
**Extended hospital stay?** No  

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:**

**Preexisting Conditions:**

**Allergies:**

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** RespDepression found to have low potassium  
**Narrative:** Patient reports experiencing shortness of breath 24 hours after the vaccine was administered, went to ER and admitted for one night. Informed her supervisor she had low potassium.

---

<table>
<thead>
<tr>
<th>VAERS ID: 933299 (history)</th>
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<tbody>
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<tr>
<td>Age:</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Sex: Unknown</td>
<td>Entered: 2021-01-11</td>
</tr>
<tr>
<td>Location: Unknown</td>
<td></td>
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</tbody>
</table>

**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
--- | --- | ---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | - / UNK | - / -
Administered by: Unknown  Purchased by: ?
Symptoms: Encephalitis, Intensive care
SMQs: Noninfectious encephalitis (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: Drug allergy
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2021007424
Write-up: encephalitis; This is a spontaneous report from a contactable consumer. A patient of unspecified age and gender received BNT162B2(PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The patient was allergic to UTI (urinary tract infection) infection medication (i.e. sulfamethoxazole, trimethoprim etc.). Concomitant medications were not reported. The patient got encephalitis and was put in the ICU (intensive care unit) after getting vaccinated, led to hospitalization. Outcome of event was unknown. Information about lot/batch number has been requested.

VAERS ID: 933369 (history)            Vaccinated: 2021-01-08
Form: Version 2.0            Onset: 2021-01-08
Age: 56.0            Days after vaccination: 0
Sex: Female            Submitted: 0000-00-00
Location: Minnesota            Entered: 2021-01-11

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / UNK</td>
<td>- / -</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Anaphylactic reaction
SMQs: Anaphylactic reaction (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Hypersensitivity (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
VAERS ID: 933739 (history) Vaccinated: 2021-01-08
Form: Version 2.0 Onset: 2021-01-09
Age: 54.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-11

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EJ1685 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Other Purchased by: ?
Symptoms: Brain death, Bronchial secretion retention, Cardio-respiratory arrest, Death, Dyspnoea, Electroencephalogram abnormal, Intensive care, Mechanical ventilation, Resuscitation, SARS-CoV-2 test negative, Withdrawal of life support
SMQs:; Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (narrow), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Cardiomyopathy (broad), Respiratory failure (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? Yes
  Date died: 2021-01-10
  Days after onset: 1
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Aspirin, Diazepam, Doxepin HCL, Duloxetine, Juven POW, Lamotrigine, Levothyroxin, Loratadine, Melatonin, Mucus Relief, Olanzapine, Prazosin HCL, Pregabalin
Current Illness: Recent g-tube placement, Several hospitalizations over the past few months due to low Oxygen Levels.
Preexisting Conditions: Major depression, borderline personality disorder, Cerebral Palsy, History of dissected left carotid artery
Allergies: Penicillin
Diagnostic Lab Data: COVID-19 test administered - 1/9/2021 - Negative 2 EEGs were performed on 1/9/2021 and both indicated she had no brain activity
CDC Split Type:
Write-up: Staff member checked on her at 3am and patient stated that she felt like she couldn"t breathe. 911 was called and taken to the hospital. While in the ambulance, patient coded. Patient was given CPR and "brought back". Once at the hospital, patient was placed on a ventilator and efforts were made to contact the guardian for end of life decisions. Two EEGs were given to determine that patient had no brain activity. Guardian, made the decision to end all life saving measures. Patient was taken off the ventilator on 1/9/2021 and passed away at 1:30am on 1/10/2021. The initial indication from the ICU doctor was the patient had a mucus plug that she couldn't clear.

VAERS ID: [933751](historical)  Vaccinated: 2021-01-11
Form: Version 2.0  Onset: 2021-01-11
Age: 58.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: Pennsylvania  Entered: 2021-01-11

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19</td>
<td>MODERNA 01L20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Military  Purchased by: ?
Symptoms: Dyspnoea, Malaise, Oxygen saturation normal, Throat tightness
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Oropharyngeal conditions (excluding neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
**Other Medications:** Advair 500/50, Spriva 2.5mcg, Asmanex 220mcg, Metformin 100mcg, Nexium 20mg, Montelekast, Baby aspirin 81 mg, Lovastatin, Nosonex, Pro Air, Duo Neb, Epi Pen 0.3 mg Busporine 150 Mg, Theophylin 400mg.

**Current Illness:**

**Preexisting Conditions:**

**Allergies:** Shell Fish, Cologne, Perfume, Hand sanitizer, penicillin, Zpac, coconut, peanuts

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** Aprox 5 minutes after vaccine was given, patient stated he was not feeling well, asked for water and stated he was having trouble breathing. Was then assisted to clinic treatment room, vitals were taken: 08:45 B/P 171/110, HR 84, R 28 O2 97. EMS was activated. At 0900 158/94 HR 84 R 24 O2 97. Patient then voice he was having tightness in his throat. Epi Pen 0.3mg administered at 0900. At 0904 EMS arrived and patient taken to the nearest hospital.

---

<table>
<thead>
<tr>
<th>VAERS ID: 933755 (history)</th>
<th>Vaccinated: 2021-01-03</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-04</td>
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<tr>
<td>Age: 26.0</td>
<td>Days after vaccination: 1</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Maryland</td>
<td>Entered: 2021-01-11</td>
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**Vaccination / Manufacturer**

<table>
<thead>
<tr>
<th>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>EL1284 / 1</td>
<td>LA / IM</td>
<td></td>
</tr>
</tbody>
</table>

Administered by: Private          Purchased by: ?

**Symptoms:** Hypoaesthesia, Monoplegia, Paraesthesia, Seizure

**SMQs:** Peripheral neuropathy (broad), Systemic lupus erythematosus (broad), Convulsions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad), Sexual dysfunction (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** Yes

**Hospitalized?** Yes, 1 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:**
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: 
Write-up: Numbness and tingling bil upper extremities, seizure, temporary paralysis R arm. Started day after vaccine given, was observed overnight in hospital.

<table>
<thead>
<tr>
<th>VAERS ID: 933792 (history)</th>
<th>Vaccinated: 2020-12-23</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-01</td>
</tr>
<tr>
<td>Age: 33.0</td>
<td>Days after vaccination: 9</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
</tr>
<tr>
<td>Location: Maine</td>
<td>Entered: 2021-01-11</td>
</tr>
</tbody>
</table>

Vaccination / Manufacturer | Lot / Dose | Site / Route |
---------------------------|------------|--------------|
COVID19: COVID19 (MODERNA) / MODERNA | 01J20A / 1 | LA / IM |

Administered by: Private  
Purchased by: ?  
Symptoms: Neurological symptom  
SMQs: 
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, ? days  
   Extended hospital stay? No  
Previous Vaccinations:  
Other Medications:  
Current Illness:  
Preexisting Conditions:  
Allergies: None  
Diagnostic Lab Data:  
CDC Split Type:  
Write-up: Manager was notified that the employee had suffered a stoke-like "serious medical event" hours after the end of her shift, while at home.

<table>
<thead>
<tr>
<th>VAERS ID: 933805 (history)</th>
<th>Vaccinated: 2020-12-16</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2020-12-21</td>
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<tr>
<td>Age: 66.0</td>
<td>Days after vaccination: 5</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
</tr>
<tr>
<td>Location: Alabama</td>
<td>Entered: 2021-01-11</td>
</tr>
</tbody>
</table>
VAERS ID: 933913 (history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-08
Age: 65.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Indiana  Entered: 2021-01-11

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / UNK</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Fatigue, Myalgia, Respiratory rate increased
SMQs: Rhabdomyolysis/myopathy (broad), Eosinophilic pneumonia (broad), Tendinopathies and ligament disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 4 days  
Extended hospital stay? No  

Previous Vaccinations: 

Other Medications: Prescription 03/19/2019 - Open Ended metoprolol succinate tablet extended release 24 hr; 50 mg; amt: 50 mg; oral Special Instructions: Hold for SBP <100 or HR <60 Once A Day; Upon Rising Prescription 07/12/2019 - Open Ended Ampyra (dalfamp  

Current Illness: 

Preexisting Conditions: Neuromuscular dysfunction of bladder, unspecified 02/26/2018  
R13.13 Dysphagia, pharyngeal phase 03/06/2020 G35 Multiple sclerosis 02/26/2018 K58.9  
Irritable bowel syndrome without diarrhea 02/26/2018 I50.9  
Heart failure, unspecified 02/26/2018 K21.9  
Gastro-esophageal reflux disease without esophagitis 02/26/2018 F33.1  
Major depressive disorder, recurrent, moderate 03/18/2019 I10  
Unspecified mood [affective] disorder 02/26/2018 H04.129  
Dry eye syndrome of unspecified lacrimal gland 02/26/2018 G47.8  
Other sleep disorders 04/04/2019 E87.5  
Hyperkalemia 11/13/2018  
M62.838  
Other muscle spasm 02/26/2018 J30.9  
Allergic rhinitis, unspecified 11/25/2019  
R26.2 Difficulty in walking, not elsewhere classified 09/14/2018 E53.8  
Deficiency of other specified B group vitamins 06/28/2018 E55.9  
Vitamin D deficiency, unspecified 02/26/2018 E56.8  
Deficiency of other vitamins 02/26/2018 R42  
Dizziness and giddiness 02/26/2018 R52  
Pain, unspecified 02/26/2018 R13.13  
Dysphagia, pharyngeal phase (History of) 05/10/2019  
R53.1 Weakness 09/14/2018  
R26.81 Unsteadiness on feet 03/06/2020  
R26.89 Other abnormalities of gait and mobility 03/06/2020  
M62.81 Muscle weakness (generalized) 02/26/2018 Z51.89  
Encounter for other specified aftercare 10/03/2018  
Z86.16 Personal history of COVID-19  
Note: June 2020  
01/07/2021  
R26.2 Difficulty in walking, not elsewhere classified 07/17/2020  
R26.81 Unsteadiness on feet 07/17/2020  
R26.89 Other abnormalities of gait and mobility 07/17/2020  
G35 Multiple sclerosis  
Allergies: gabapentin, guaifenesin, Penicillins (PCN)  
Diagnostic Lab Data:  
CDC Split Type:  
Write-up: Upon assessment resident noted to have increased respirations, lungs CTA.  
Resident c/o increased fatigue and muscle aches. VS 202/180, 118, 22, 97.1, 96%.

<table>
<thead>
<tr>
<th>VAERS ID:</th>
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<tr>
<td>933935 (history)</td>
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<td>2021-01-10</td>
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<tr>
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<thead>
<tr>
<th>Sex:</th>
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<tbody>
<tr>
<td>Female</td>
<td>Massachusetts</td>
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<table>
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<tr>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>AR / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  
Purchased by: ?
Symptoms: Haemoglobin normal, Immune thrombocytopenia, Platelet count decreased, Thrombocytopenia, White blood cell count normal

SMQs: Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (narrow)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: Omeprazole

Current Illness: None
Preexisting Conditions: GERD

Allergies: NKDA

Diagnostic Lab Data: CBC showed platelet count of 2,000. WBC and Hgb normal

CDC Split Type:

Write-up: Severe thrombocytopenia (platelet count 2,000) 8 days following Moderna COVID vaccine. Clinically suspicious for ITP.

VAERS ID: 933950 (history)  Vaccinated: 2021-01-05
Form: Version 2.0  Onset: 2021-01-07
Age: 42.0  Days after vaccination: 2
Sex: Female  Submitted: 0000-00-00
Location: D.C.  Entered: 2021-01-11

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 2</td>
<td>- / IM</td>
</tr>
</tbody>
</table>

Administered by: Private  Purchased by: ?

Symptoms: Eye swelling, Fatigue, Peripheral swelling, Swelling face

SMQs: Cardiac failure (broad), Anaphylactic reaction (broad), Angioedema (narrow), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: crestor nexium trazodone zanaflex synthroid
Current Illness:
Preexisting Conditions: Ulcerative Colitis Rheumatoid Arthritis
Allergies: mushrooms Humira Pen (site reaction) dextromethorphan erythromycin (nausea & vomiting) sulfaSALAzine (hives)
Diagnostic Lab Data: admitted to the hospital on 1/10/2021
CDC Split Type:
Write-up: Received vaccine on 1/5, began having swelling in bilateral hands and lower extremities on 1/7, along with fatigue. On 1/8 she reports new swelling started in her face (eyes and cheeks). Swelling has not improved today and fatigue has worsened.

VAERS ID: 933965 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-08
Age: 81.0 Days after vaccination: 1
Sex: Female
Location: Indiana Submitted: 0000-00-00
Entered: 2021-01-11

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / UNK</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Blood glucose increased, Confusional state, Discomfort, Myalgia, Pyrexia
SMQs:; Rhabdomyolysis/myopathy (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Eosinophilic pneumonia (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: allopurinol tablet; 300 mg; amt: 300mg; oral Once A Day; Upon Rising Prescription 04/06/2019 - Open Ended furosemide tablet; 40 mg; amt: 40mg; oral Once A Day; Upon Rising Prescription 04/06/2019 - Open Ended levothyroxitin tablet; 50 mcg;
Current Illness:
**Preexisting Conditions:**
- E11.9 Type 2 diabetes mellitus without complications 09/14/2018
- J98.4 Other disorders of lung Note:restrictive lung disease 09/14/2018
- D50.9 Iron deficiency anemia, unspecified 09/14/2018
- E78.5 Hyperlipidemia, unspecified 09/14/2018
- I73.9 Peripheral vascular disease, unspecified 09/14/2018
- I48.0 Paroxysmal atrial fibrillation 09/14/2018
- I13.0 Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease 04/06/2019
- F41.9 Anxiety disorder, unspecified 09/14/2018
- F33.1 Major depressive disorder, recurrent, moderate 02/21/2019
- E03.9 Hypothyroidism, unspecified 09/14/2018
- M10.9 Gout, unspecified 09/14/2018
- I50.32 Chronic diastolic (congestive) heart failure 11/01/2018
- N18.3 Chronic kidney disease, stage 3 (moderate) 04/06/2019
- K30 Functional dyspepsia 09/14/2018
- R45.1 Restlessness and agitation 09/14/2018
- M53.87 Other specified dorsopathies, lumbosacral region Note:DJD 09/14/2018
- E04.2 Nontoxic multinodular goiter 09/14/2018
- R29.6 Repeated falls 11/01/2018
- M62.81 Muscle weakness (generalized) 09/14/2018
- R65.1 Weakness 11/01/2018
- R26.89 Other abnormalities of gait and mobility 04/24/2020
- M15.0 Primary generalized (osteo)arthritis

**Allergies:**
- codeine phosphate (bulk), enalapril maleate, oxycodone-aspirin, Penicillins (PCN)

**Diagnostic Lab Data:**

**Write-up:**
Found on floor by CNA at 6 am. On assessment by charge nurse, VS: 99.6-94-16 212/105 manual. Noted increased confusion. Temp. 99.6 FBS 114. Resident had been provided tylenol just prior in shift for general discomfort (sore muscles) and low grade temp. On call for Dr notified of all and received order to send to ER.

**VAERS ID:** [934094](history) **Vaccinated:** 2021-01-05

**Form:** Version 2.0 **Onset:** 2021-01-05

**Age:** 37.0 **Days after vaccination:** 0

**Sex:** Female **Submitted:** 0000-00-00

**Location:** Oklahoma **Entered:** 2021-01-11

<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Other **Purchased by:** ?

**Symptoms:** Ageusia, Chest discomfort, Cough, Diarrhoea, Dyspnoea, Fatigue, Lip pruritus, Malaise, Oral discomfort, Pruritus, Pyrexia, SARS-CoV-2 test negative

**SMQs:** Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Taste and
smell disorders (narrow), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypersensitivity (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: humalog, lantus, omeprazole, topamax, prozac,
Current Illness: migraines, asthma
Preexisting Conditions: Diabetes, asthma, migraines
Allergies: none

Diagnostic Lab Data:

VAERS ID: 934099 (history)
Vaccinated: 2020-12-28
Form: Version 2.0
Onset: 2020-12-28
Days after vaccination: 0
Age: 41.0
Sex: Female
Location: Illinois
Submitted: 0000-00-00
Entered: 2021-01-11

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>UN / IM</td>
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</table>

Administered by: Private
Purchased by: ?

Symptoms: Burning sensation, Diarrhoea, Laboratory test, Nausea, Rash, Rash pruritic, Throat tightness

SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (broad), Peripheral neuropathy (broad), Pseudomembranous colitis (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Gastrointestinal nonspecific symptoms

Write-up: Approximately 15 minutes after receiving the vaccine, client started c/o itching to face and lips. Transported to triage area. Where she started c/o burning lips also. vital signs monitored, Benadryl 50mg po given. In a few minutes she reported chest tightness, labored breathing. 1:44pm Epinephrine was given IM. client was on 02 increased to 15 Liters. She admits to decreased chest tightness and itching of face improving. She was taken by ambulance to hospital, where she was admitted overnight for observation. She was given Benadryl and epi X2 more time, once in ambulance and once at the hospital. She denies any problems since then. She did say that approx 3 weeks ago she was a contact to a case of covi
and therapeutic procedures (narrow), Hypersensitivity (narrow), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: topomax, melatonin, mirena ring, B12 injection, zyrtec, biotin
Current Illness: none
Preexisting Conditions: anxiety, depression, hyperprolactinemia, migraines, primary hypothyroidism
Allergies: ? shellfish (positive skin test but eats shellfish with "no problem")
Diagnostic Lab Data: just basic labs
CDC Split Type:
Write-up: Patient is a 41 y.o. female who presented to the ED with complaints of a reaction after she took the COVID vaccine. Patient is an RN here and had earlier received COVID-19 vaccination (Moderna) around 0130 this afternoon. Soon after she experienced rash which was burning and itchy on her arms thighs and back. She reported to Occ health and was directed to the ED. While in the ED she experienced throat tightness and nausea. She had one episode of diarrhea. No tongue, lip swelling, SOB or difficulty swallowing. Denies any chest pain, palpitations, pre-syncope/syncope. No vomiting abdominal pain. H/o of allergy to fish mix and dust mite.

<table>
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<tr>
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<th>Vaccinated: 2021-01-05</th>
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<td>Onset: 2021-01-07</td>
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<tr>
<td>Age: 60.0</td>
<td>Days after vaccination: 2</td>
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<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<td>Location: Indiana</td>
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<td>026L20A / 1</td>
<td>RA / IM</td>
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</table>

Administered by: Senior Living    Purchased by: ?
Symptoms: Chills, Intensive care, Laboratory test, Pain, Unresponsive to stimuli
SMQs:, Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
  Extended hospital stay? No

Previous Vaccinations: 
Other Medications: Tylenol, Atenolol, Llpitor, Clonidine, mutlivitamin, Lasix, Gabapentin, Losartan, Maalox, Miralax, Zofran, Vitamin D2.

Current Illness: No

Preexisting Conditions: 2019-nCoV acute respiratory disease, Hyperlipidemia, unspecified, Chronic obstructive pulmonary disease, unspecified, Other hereditary and idiopathic neuropathies, Essential (primary) hypertension, Peripheral vascular disease, unspecified, Venous insufficiency (chronic) (peripheral), Other chronic pain, Type 2 diabetes mellitus with hyperglycemia, Dehydration, Nondisplaced oblique fracture of shaft of left fibula, sequel, Vitamin D deficiency, unspecified, Nondisplaced fracture of second metatarsal bone, left foot, subsequent encounter for fracture with routine healing, Nondisplaced fracture of third metatarsal bone, left foot, subsequent encounter for fracture with routine healing, Nondisplaced fracture of fourth metatarsal bone, left foot, subsequent encounter for fracture with routine healing, Hypokalemia, Acute respiratory failure with hypoxia, Muscle weakness (generalized), Difficulty in walking, not elsewhere classified, Cognitive communication deficit, Non-pressure chronic ulcer of other part of left lower leg with fat layer exposed, Repeated falls, Cellulitis of right lower limb, Cellulitis of left lower limb, Other iron deficiency anemias, Other recurrent depressive disorders, Hypothyroidism, unspecified, Chronic venous hypertension (idiopathic) with ulcer of bilateral lower extremity, Diabetes mellitus due to underlying condition with other skin complications, Other constipation, Chronic respiratory failure with hypoxia, Other acute kidney failure, Lymphedema, not elsewhere classified, Generalized edema, Morbid (severe) obesity due to excess calories, Chronic ischemic heart disease, unspecified, Gastro-esophageal reflux disease without esophagitis, Disorder resulting from impaired renal tubular function, unspecified, History of falling, Cellulitis/abscess, leg, Impaired renal function NOS, Hypertension, benign essential

Allergies: Bactrim, Kefles, PCN

Diagnostic Lab Data: All tests done at the Hospital

CDC Split Type:

Write-up: 01/06/21 at 6 pm, body aches, and chills 01/07/21 at 12am T102.2, SPO2 62% on room air. Was sent to ER and returned. 01/08/21 at SPO@ less then 60% on room air, non responsive to verbal tactile stimuli. Responsive to sternal rub only. Was sent to ER and admitted to ICU.

VAERS ID: 934383 (history)
Form: Version 2.0
Age: 28.0
Sex: Female
Location: Maryland

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<tr>
<td>2021-01-08</td>
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</table>
Administered by: Private   Purchased by: ?

Symptoms: Blood creatine phosphokinase normal, Blood magnesium normal, Blood thyroid stimulating hormone normal, Borrelia test, Borrelia test negative, Full blood count abnormal, Gait inability, Human chorionic gonadotropin negative, Hypoesthesia, Hypochromic anaemia, Limb discomfort, Lymphocyte percentage increased, Magnetic resonance imaging spinal normal, Mobility decreased, Muscular weakness, Neutrophil percentage decreased, Red blood cell sedimentation rate increased, SARS-CoV-2 test negative, Scan with contrast normal, Treponema test negative, Vitamin B12 normal, Vitamin D decreased

SMQs: Rhabdomyolysis/myopathy (broad), Agranulocytosis (broad), Haematopoietic leukopenia (broad), Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Dystonia (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
   Extended hospital stay? No

Previous Vaccinations: 
Other Medications: none
Current Illness: none known
Preexisting Conditions: obesity
Allergies: NKA

Diagnostic Lab Data: 1/10/21: Vitamin D 11 ng/mL, Lyme IgG and IgM negative, Magnesium 2.1 mg/dL, CK 130, HCG negative 1/9/21: RPR nonreactive, SARS COV2 negative 1/8/21: Vitamin B12 540 pg/mL, Sed rate 83 mm/Hr, TSH 4.481 uIU/mL, BMP normal, CBC mild microcytic, hypochromic anemia, lymphocytes relative 50.9%, neutrophils relative 42.5% MRI Brain with and without contrast and MRI spinal survey with and without contrast are normal

CDC Split Type: 

Write-up: Approximately 10 minutes after receiving the vaccine she started experiencing numbness and inability to move all 4 extremities. No difficulty breathing or swallowing. Benedryl 25 mg was administered with no relief. EMS was called, she was transported to the ED and admitted to the hospital for evaluation. She was given Ativan 0.5 mg IV with some mild improvement in symptoms. She has had gradual improvement in her symptoms, now able to move her arms normally. She has persistent weakness and discomfort in both lower extremities and is unable to ambulate without assistance.
VAERS ID: 934407 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-08
Age: 98.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Connecticut Entered: 2021-01-11

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<td>EL 1284 / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Senior Living Purchased by: ?

Symptoms: Electrocardiogram PR prolongation, Full blood count, Influenza A virus test negative, Influenza B virus test, Influenza virus test negative, Legionella test, Lethargy, Mental status changes, Metabolic function test, Polymerase chain reaction, Pyrexia, Streptococcus test negative, Tachycardia

SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Conduction defects (narrow), Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Tylenol, Artificial tears, Citrical with Vit.D, Ibuprofen, Multivitamin, Prosight, Soothe XP (light mineral oil-mineral oil) eye ointment

Current Illness: Pneumonia, Covid19

Preexisting Conditions: Schizophrenia, unspecified, Vascular dementia without behavioral disturbance, Venous insufficiency (chronic) (peripheral), Hypo-osmolality and hyponatremia, Unspecified strabismus, Primary osteoarthritis, Unspecified blepharitis unspecified eye, unspecified eyelid

Allergies: Propoxyphene, Unasyn

Diagnostic Lab Data: Blood work-CBC, CMP Done @ ER ECG Done at ER- Result Sinus rhythm, prolonged PR interval. Legionella & Strp Antigen done at ER both were negative. PCR Done at ER for Influenza A&B was negative

CDC Split Type:

Write-up: 1/8/2021 tachycardia Pulse 140, Fever T99.4 then 100.2 Lethargy, Somewhat Altered Mental status
VAERS ID: 934475 (history)  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2020-12-29
Age: 57.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Michigan  Entered: 2021-01-11

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<td>EK9231 / 1</td>
<td>RA / -</td>
</tr>
</tbody>
</table>

Administered by: Unknown  Purchased by: ?
Symptoms: Anaphylactic reaction, Dysphonia, Dyspnoea, Peripheral swelling, Speech disorder
SMQs:; Cardiac failure (broad), Anaphylactic reaction (narrow), Angioedema (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Dementia (broad), Parkinson-like events (broad), Acute central respiratory depression (broad), Psychosis and psychotic disorders (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: ELIQUIS; ; ; CRESTOR; ; SYNTHROID; BENADRYL
Current Illness: Thyroid disorder
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2021000598
Write-up: Her voice became raspy, she could hardly talk, she could barely talk; her hand and whole arm swelled up; her hand and whole arm swelled up; Trouble breathing; This is a spontaneous report from a contactable healthcare professional (patient). A 57-year-old female patient received the 1st dose of bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech) (lot# EK9231, exp date Apr2021), via an unspecified route of administration in the right arm, on 29Dec2020, at single dose, for COVID-19 immunization and diphenhydramine hydrochloride (BENADRYL), via an unspecified route of administration, at unknown posology, on 29Dec2020 (20 minutes prior to taking bnt162b2), for anaphylactic reaction. Medical history included ongoing thyroid disorder. Concomitant medications included apixaban (ELIQUIS), diltiazem (unknown trade name), losartan (unknown manufacturer), rosuvastatin calcium...
(CRESTOR), levothyroxine (unknown trade name), ongoing levothyroxine sodium (SYNTHROID) for thyroid disorder and metformin (unknown trade name). Previously the patient received unspecified influenza vaccine (reported as flu shot) for immunisation, on unspecified date, and experienced anaphylactic reaction treated with Benadryl. On 29Dec2020, an hour after getting the vaccine, the patient experienced her voice became raspy, she could hardly talk, she could barely talk with outcome of unknown, her hand and whole arm swelled up with outcome of unknown, trouble breathing with outcome of unknown. The reporter stated that her voice and everything reacted and made her go to the emergency room on 29Dec2020. She reported that had adverse effect more than normal. The event "Her voice became raspy, she could hardly talk, she could barely talk" caused patient's hospitalization on unknown date. The action taken as a result of the events with diphenhydramine hydrochloride was post-therapy. Therapeutic measures were taken at the emergency room as a result of the events and included treatment with Topcid and Benadryl every 6 hours, 2x 40 mg of steroid. The information on the lot/batch number has been requested. Follow-up (02Jan2021): New information received from the same contactable healthcare professional reporting for herself includes: patient's details, medical history, events updated, vaccine lot# and exp date, concomitant, seriousness of event "Her voice became raspy, she could hardly talk, she could barely talk" added as hospitalization, historical vaccine, suspect Benadryl details, therapeutic measures updated.; Sender's Comments: A causal association between BNT162B2 and the reported events cannot be excluded based on a compatible temporal relation between vaccination and onset of events. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.

| VAERS ID: 934676 (history) | Vaccinated: 2020-12-31 |
| Form: Version 2.0 | Onset: 2021-01-02 |
| Age: 58.0 | Days after vaccination: 2 |
| Sex: Female | Submitted: 0000-00-00 |
| Location: Washington | Entered: 2021-01-11 |

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<td>EH9899 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Arthralgia, Aspiration joint, Chills, Ultrasound joint
SMQs: Arthritis (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Sertraline 25mg, Aspirin 81 mg, Calcium Citrate with Vitamin D3, Multivitamin with Iron, Hair Skin & Nails soft gel, Probiotic, Cetirizine

Current Illness: None
Preexisting Conditions:
Allergies: None
Diagnostic Lab Data: Ultrasound-guided aspiration of the right hip joint

VAERS ID: 934749 (history) Vaccinated: 0000-00-00
Form: Version 2.0 Onset: 0000-00-00
Age: 38.0 Submitted: 0000-00-00
Sex: Female Entered: 2021-01-11
Location: Unknown

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<td>- / IM</td>
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Administered by: Unknown Purchased by: ?

Symptoms: Altered state of consciousness, Dizziness, Dyspnoea, Endotracheal intubation, Flushing, Hyperhidrosis, Immediate post-injection reaction, Intensive care, Mechanical ventilation, Pharyngeal swelling, Stridor, Tachycardia, Tachypnoea, Urticaria, Wheezing

SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Asthma/bronchospasm (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypersensitivity (narrow), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Dehydration (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Imitrex, Effexor XR, COVID-19 Vaccine (Pfizer)
Current Illness:
Preexisting Conditions: GERD, Migraines, Anxiety, allergic to Reglan
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: 38-year-old female who is healthcare worker and received first dose of COVID vaccine (Pfizer). Immediately after receiving the vaccine, patient developed lightheadedness, flushing, hives, wheezing and throat swelling. Patient was treated in an emergency department with epinephrine, gradually improved and was able to be sent home with an EpiPen, prednisone, hydroxyzine, and famotidine. The next day, patient again developed shortness of breath and her husband administered the EpiPen. EMS arrived and gave another dose of IM epinephrine and IV diphenhydramine. On arrival to the emergency department, the patient was altered, diaphoretic, tachypneic, tachycardic, and stridulous. Patient was given multiple doses of IM epinephrine and started on epinephrine drip. Stridor continued and was unresponsive to nebulized albuterol. Patient was then intubated and placed on mechanical ventilation. Other treatments included solumedrol, pepcid, magnesium sulfate, nebulized epinephrine, and IV fluids. admitted to the intensive care unit, weaned off epinephrine drip, and extubated the next day. Patient was monitored on hospital floor for one additional day and was then discharged with no residual symptoms.

VAERS ID: 934869 (history)  Vaccinated: 2021-01-05
Form: Version 2.0  Onset: 2021-01-06
Age: 83.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Michigan  Entered: 2021-01-11

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<td>026L20A / 1</td>
<td>LA / IM</td>
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Administered by: Senior Living  Purchased by: ?

Symptoms: Body temperature increased, Condition aggravated, Facial paralysis, Hemiparesis, Rash erythematous, SARS-CoV-2 test negative, Skin warm

SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious meningitis (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow), Hearing impairment (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 5 days
Extended hospital stay? No

Previous Vaccinations:

Other Medications: Prednisone 10mg, Donepezil HCL 10mg, Breo Ellipta inhaler, Spiriva Inhaler, Plavix

Current Illness: Rash, Non hemorrhagic CVA in 2009, Alzheimer"s dementia, COPD, HLD, CKD, Allergic Rhinitis

Preexisting Conditions: previous CVA, COPD, Alzheimer"s dementia

Allergies: none noted

Diagnostic Lab Data: Please see attached documentation

CDC Split Type:

Write-up: Patient had a rash prior to COVID vaccine. Prednisone 10mg started on 1/5/21 (only one dose administered) 1/6/21, 1am - Rash worsened with increase redness, warmth and extending of body surface, Temp 100.4, 1/6/21, 1:20am Benadryl 25mg administered, (Keflex was ordered at this time, however never administered). 1/6/21, 3am rash improved, temp 99.1 1/6/21, 6:50am Right facial droop and right sided weakness, sent to ER 1/6/21 transferred to hospital, continues to be hospitalized 1/11/2021

VAERS ID: 934889 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-07
Age: 93.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Louisiana Entered: 2021-01-11

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<tr>
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<td>- / -</td>
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</table>

Administered by: Pharmacy Purchased by: ?
Symptoms: Arthralgia, Confusional state, Decreased appetite, Diarrhoea, Gait inability
SMQs.: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Pseudomembranous colitis (broad), Dystonia (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Arthritis (broad), Noninfectious diarrhoea (narrow), Hypoglycaemia (broad)


Previous Vaccinations:
Other Medications: citalopram 20 mg PO DAILY clonazepam 0.5 mg PO DAILY lisinopril 10 MG PO DAILY loratadine 10 mg PO DAILY magnesium oxide 400 MG PO BID memantine 5 MG PO BID metoprolol tartrate 25 MG PO BID pantoprazole [Protonix] 40 MG PO DAILY warfarin 4

Current Illness:
Preexisting Conditions: Afib Anxiety Arthritis CAD (coronary artery disease) Cervical vertebral fusion CVA (cerebral vascular accident) Frequent UTI Gastritis Glaucoma Heart attack Hyperlipidemia Hypertension Hypomagnesemia Insomnia Pancreatic mass Presence of inferior vena cava filter Psoriasis Pulmonary embolus Spondylolisthesis


Diagnostic Lab Data:

VAERS ID: 934901 (history) Vaccinated: 2021-01-08
Form: Version 2.0 Onset: 2021-01-09
Age: 92.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-11

VAERS ID: 934901 (history)
Vaccination / Manufacturer: COVID19 (COVID19 (MODERNA)) / MODERNA
Lot / Dose: 026L20A / 1
Site / Route: LA / IM

Administered by: Unknown Purchased by: ?
Symptoms: Abdominal pain
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: APAP, amlodipine, metoprolol, ramipril, spironolactone, dutasteride, vitamin B12,
Current Illness:
Preexisting Conditions: SCC, CHF, HTN, BPH, CARCINOMA OF COLON
Allergies: NKDA
Diagnostic Lab Data:
CDC Split Type:
Write-up: SEVERE ABDOMINAL PAIN

VAERS ID: 934906 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2021-01-04
Age: 57.0 Days after vaccination: 13
Sex: Female
Location: Pennsylvania Submitted: 0000-00-00
 Entered: 2021-01-11

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<th>Site / Route</th>
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<td>- / 1</td>
<td>RA / -</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Amnesia, Aphasia, Blood pressure increased, Computerised tomogram, Confusional state, Low density lipoprotein increased, Magnetic resonance imaging, SARS-CoV-2 test negative, Transient ischaemic attack, Vision blurred
SMQs: Dyslipidaemia (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Ischaemic central nervous system vascular conditions (narrow), Dementia (broad), Embolic and thrombotic events, arterial (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Glaucoma (broad), Hypertension (narrow), Lens disorders (broad), Retinal disorders (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypoglycaemia (broad), COVID-19 (broad)
Preexisting Conditions: Medical History/Concurrent Conditions: Cardiovascular disease, unspecified (family history of cardiovascular(CV) disease at young age); Cholesterol blood increased (elevated cholesterol w/lifestyle changes); Herpes simplex (Herpes simplex on lips); Menopause (post menopause); Non-smoker Allergies:
Diagnostic Lab Data: Test Name: cholesterol; Result Unstructured Data: Test Result:elevated cholesterol w/lifestyle changes; Test Name: blood pressure; Result
Unstructured Data: Test Result: elevated; Test Name: CT; Result Unstructured Data: Test Result: unknown results; Test Name: LDL; Result Unstructured Data: Test Result: 192; Test Name: MRI; Result Unstructured Data: Test Result: unknown results; Test Date: 20210104; Test Name: Nasal Swab; Test Result: Negative; Test Name: weight; Result Unstructured Data: Test Result: 157

**CDC Split Type:** USPFIZER INC2021005404

**Write-up:** experienced symptoms of TIA; Severe aphasia; blurred vision; confusion; short term memory loss; elevated blood pressure; This is a spontaneous report from a contactable Other-HCP(Patient). A 57-year-old female patient received first dose of BNT162B2(PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration at right arm, on 22Dec2020 08:15 at single dose for COVID-19 immunization. The patient was not pregnant. Medical history included herpes simplex on lips, post menopause, elevated cholesterol w/lifestyle changes. Known allergies reported as no. Concomitant medication included varicella zoster vaccine rge (cho) (SHINGRIX) for immunization. On 04Jan2021 08:30, the patient experienced symptoms of transient ischaemic attack(TIA), severe aphasia, blurred vision, confusion, short term memory loss, elevated blood pressure. The patient admitted to (Hospital name) (still here, hospitalization days reported as 2). Symptoms resolved except very mild aphasia. The patient had very few risk factors for TIA but did have family history of cardiovascular(CV) disease at young age, low density lipoprotein(LDL) was 192. The patient did not have diabetes, HTN, or known heart disease. She did not have severe anxiety. She did not smoke or use any substances. She walked about five miles 4x a week. Weigh reported as 157. Events reported as serious due to hospitalization. The patient had no Covid prior vaccination. Covid(nasal swab) was tested post vaccination on 04Jan2021, Covid test result was Negative. The event resulted in emergency room/department or urgent care. Treatment received for the adverse event included clopidogrel bisulfate(PLAVIX), acetylsalicylic acid (ASPIRIN), statin; potassium, CT, MRI, "telemet". The outcome of the events was recovering. Information on the lot/batch number has been requested.; Sender"s Comments: The Company cannot completely exclude the possible causality between the reported symptoms of transient ischaemic attack(TIA), severe aphasia, blurred vision, confusion, short term memory loss, elevated blood pressure and the administration of BNT162B2, based on the reasonable temporal association. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, Agency, as appropriate.

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**VAERS ID:** 934912 (history)  
**Form:** Version 2.0  
**Age:** 28.0  
**Sex:** Female  
**Location:** Florida  
**Vaccinated:** 2020-12-24  
**Onset:** 2021-01-04  
**Days after vaccination:** 11  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-11

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<td>EK9291 / 1</td>
<td>LA / -</td>
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**Administered by:** Military  
**Purchased by:** ?
Symptoms: Computerised tomogram, Echocardiogram, Pain, Pelvic venous thrombosis, Ultrasound Doppler
SMQs: Embolic and thrombotic events, venous (narrow), Thrombophlebitis (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Comments: List of non-encoded Patient Relevant History: Patient Other Relevant History 1: None
Allergies:
Diagnostic Lab Data: Test Date: 202101; Test Name: CT scans; Result Unstructured Data: Test Result:unknown result; Test Date: 202101; Test Name: echo; Result Unstructured Data: Test Result:unknown result; Comments: and echo of her heart to make sure there is nothing else; Test Date: 202101; Test Name: doppler; Result Unstructured Data: Test Result:unknown result; Comments: doppler of bilateral legs
CDC Split Type: USPFIZER INC2021005480
Write-up: DVT; have pain in same site where DVT is; This is a spontaneous report from a contactable consumer. A 28-years-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number EK9291), via an unspecified route of administration in left deltoid on 24Dec2020 10:00 at first single dose for COVID-19 immunization. Medical history was none. There were no concomitant medications. Caller was calling to report a possible adverse reaction to the Pfizer Covid-19 vaccine. The patient was currently at hospital, she was admitted for deep vein thrombosis (DVT) of left iliac vein, the patient had no past history as to why this would happen, that she is only 28 years old. Received the vaccine on 24Dec2020, the following day she did have pain in same site where DVT was. Took ibuprofen for the pain. The patient was admitted yesterday 04Jan2020 for the DVT, they were currently treating her with Lovenox injections and prescribing dose for discharge is Eliquis. CT scans and three shots of Lovenox for it, doing a doppler of bilateral legs and echocardiogram (echo) of her heart to make sure there is nothing else. The AEs require a visit to emergency room. The patient was asking if she can still get the 2nd dose based off the adverse event she experienced. Outcome of DVT was not recovered, of pain was unknown.

VAERS ID: 934922 (history)  Vaccinated: 2020-12-16
Form: Version 2.0  Onset: 2020-12-21
Age: 39.0  Days after vaccination: 5
Sex: Male  Submitted: 0000-00-00
Location: Texas  Entered: 2021-01-11
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<td>EK5730 / 1</td>
<td>LA / -</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Influenza like illness, Muscular weakness, Neurological symptom, Paraesthesia, Peroneal nerve palsy, SARS-CoV-2 test negative

SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), COVID-19 (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? Yes  
Recovered? No  
Office Visit? Yes  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 3 days  
  - Extended hospital stay? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions: Medical History/Concurrent Conditions: Diabetes; Eosinophilic granulomatosis with polyangiitis; Hypertension; Migraine

Allergies:

Diagnostic Lab Data: Test Date: 20201219; Test Name: Nasal Swab; Test Result: Negative

CDC Split Type: USPFIZER INC2021006226

Write-up: Followed by neurological symptoms staring day 4; parasthesias of both upper extremity; progression to muscle weakness of all four extremities/Currently with significant muscle weakness, Left hand weakness leading to dropping of objects and left foot drop; progression to muscle weakness of all four extremities/Currently with significant muscle weakness, Left hand weakness leading to dropping of objects and left foot drop; Flu like symptoms first 3 days; This is a spontaneous report from a contactable physician (patient). A 39-year-old male patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, lot number: ek5730) at left arm, via an unspecified route of administration on 16Dec2020 at single dose for covid-19 immunisation. Medical history included hypertension, diabetes, migraines, Eosinophilic granulomatosis with polyangiitis (EGPA) remission. Prior to vaccination, the patient was not diagnosed with COVID-19. The patient did not have any allergies to medications, food, or other products. The patient's concomitant medications were not reported. On 21Dec2020, the patient experienced flu like symptoms first 3 days. Followed by neurological symptoms staring day 4, parasthesias of both upper extremity with progression to muscle weakness of all extremities. Leading to 2 ER visits and hospital admission. Evaluation by internal medicine, neurology and rheumatology. Currently with significant muscle weakness, Left hand weakness leading to dropping of objects and left foot drop. The events resulted in Doctor or other healthcare professional office/clinic visit, Emergency room/department or urgent care, Hospitalization, Disability or permanent damage. The treatment for events included High dose steroid. Covid test included Nasal Swab: negative on 19Dec2020. The outcome of events was not recovered.; Sender's
Comments: Based on temporal association, the causal relationship between bnt162b2 and the events influenza like illness, neurological symptom, paraesthesia, muscular weakness and peroneal nerve palsy cannot be excluded. The information available in this report is limited. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees, and Investigators, as appropriate.

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**VAERS ID:** 934951 *(history)*  **Vaccinated:** 2020-12-17  
**Form:** Version 2.0  **Onset:** 0000-00-00  
**Age:** 35.0  **Submitted:** 0000-00-00  
**Sex:** Male  **Entered:** 2021-01-11  
**Location:** Arizona

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>- / OT</td>
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</table>

**Administered by:** Private  **Purchased by:** ?

**Symptoms:** Acute disseminated encephalomyelitis, Cerebrovascular accident, Diagnostic procedure, Dysarthria, HIV test, X-ray

**SMQs:** Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (narrow), Noninfectious encephalopathy/delirium (broad), Demyelination (narrow), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypoglycaemia (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:**

**Preexisting Conditions:** Medical History/Concurrent Conditions: Hypertension

**Allergies:**

**Diagnostic Lab Data:** Test Name: HIV test; Result Unstructured Data: Test Result:Unknown results; Test Name: radiologic; Result Unstructured Data: Test Result:Acute demyelinating encephalomyelitis; Comments: states it looks like a radiologic diagnosis; Test Name: X-ray; Result Unstructured Data: Test Result:Unknown results
Write-up: Acute demyelinating encephalomyelitis; Slurring his speech; Stroke; This is a spontaneous report from a contactable physician. A 35-year-old male patient received first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), intramuscular in deltoid (unknown if right or left) on 17Dec2020 at 30 ug, single for "Preventative". Medical history included hypertension. There were no concomitant medications.(Physician) He is calling about the Pfizer Covid 19 vaccine. States what is going on with the patient may be associated as a side effect. The patient got the vaccine two to three weeks ago, he clarifies the patient received the vaccine on 17Dec2020 and the patient ended up acutely developing (states it is a presumptive diagnosis) Acute demyelinating encephalomyelitis, states it looks like a radiologic diagnosis. The patient is an employee at hospital. When querying seriousness states it is medically significant but could be disabling but he thinks the patient will recover. Reporter seriousness for acute demyelinating encephalomyelitis: Medically significant, Hospitalization. Patient was hospitalized on Sunday and he is still admitted at this time. Dates when patient was in hospital for acute demyelinating encephalomyelitis was from 03Jan2021 to ongoing. Caller thinks the patient was flown to (Place) yesterday. The patient''s mother asked the caller if the caller thought the acute demyelinating encephalomyelitis was from the vaccine and the caller responded that he did not think it was from the vaccine. He confirms the patient is still admitted in the hospital and the patient''s attending neurologist is doctor. The caller heard about the patient from doctor. When querying covid vaccine dose, the caller states the standard dose is 30 mcg. This was clarified and documented as provided. The patient has not received his second dose yet. He asks if the patient should receive the second dose. He asks a general question if a pregnant patient can be given the Pfizer covid vaccine. He heard the patient had a stroke then the CFO tried to talk to him and the patient was slurring his speech. Caller spoke to the patient''s mother this morning and caller told the mother that he would try to find out what is going on with the patient. He asked that the patient get an HIV test even though he does not think the patient is at risk. Vaccination facility type was Hospital. Vaccine administered at military facility was No. None additional vaccines administered on same date of the PFIZER suspect. AE acute demyelinating encephalomyelitis require a visit to Emergency Room, not visit to physician office. Prior Vaccinations (within 4 weeks) was none. He has heard of acute demyelinating encephalomyelitis being associated with vaccines in the past and states that it is rare and usually in kids. States he saw patients that may have had acute demyelinating encephalomyelitis back in the 80s and 90s. Therapeutic measures were taken as a result of acute demyelinating encephalomyelitis (Patient will get steroids tonight pending the review of the x-ray). The outcome of the events was unknown. Information on the lot/batch number has been requested.; Sender''s Comments: The reported stroke with speech slurred, and the presumptive diagnosis of acute demyelinating encephalomyelitis (looks like a radiologic diagnosis by the reporting physician), was most likely an intercurrent disease, and unlikely causally related to the first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE). The case will be reassessed should additional information become available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.
VAERS ID: 934961 (history) Vaccinated: 2021-01-04
Form: Version 2.0 Onset: 2021-01-04
Age: 35.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-11

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<td>EJ1685 / 2</td>
<td>- / OT</td>
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Administered by: Unknown  
Purchased by: ?

Symptoms: Arthralgia, Blood glucose normal, Blood lactic acid decreased, Bone pain, Burning sensation, C-reactive protein increased, Chills, Crying, Fatigue, Grunting, Headache, Influenza virus test negative, Injection site erythema, Injection site pain, Injection site pruritus, Injection site swelling, Lymphadenopathy, Pain, Painful respiration, Pyrexia, SARS-CoV-2 test negative, Tachycardia, Tension headache, Vaccination complication

SMQs: Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Depression (excl suicide and self injury) (broad), Osteonecrosis (broad), Arthritis (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad), COVID-19 (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 1 days  
Extended hospital stay? No  

Previous Vaccinations: 
Other Medications: 
Current Illness: Diabetes (Verbatim: Diabetes)  
Preexisting Conditions: 
Allergies: 

Diagnostic Lab Data: Test Date: 20210105; Test Name: lactate; Result Unstructured Data: Test Result:1.5; Test Date: 20210105; Test Name: blood pressure; Result Unstructured Data: Test Result:90/50; Test Date: 202101; Test Name: blood pressure; Result Unstructured Data: Test Result:Normal range; Test Date: 20210104; Test Name: Temperature; Result Unstructured Data: Test Result:104; Test Date: 20210105; Test Name: Temperature; Result Unstructured Data: Test Result:102.8; Test Date: 202101; Test Name: Temperature; Result Unstructured Data: Test Result:105; Comments: axillary temperature; Test Date: 20210105; Test Name: CRP; Result Unstructured Data: Test Result:30; Test Date: 20210105; Test Name: heart rate; Result Unstructured Data: Test Result:144-152 at rest; Test Date: 202101; Test Name: heart rate; Result Unstructured Data: Test Result:109; Comments: normal range; Test
Date: 20210105; Test Name: O2 sat; Result Unstructured Data: Test Result:95-96; Test Date: 20210105; Test Name: COVID-19 test; Test Result: Negative

**CDC Split Type:** USPFIZER INC2021010190

**Write-up:** Swollen lymph nodes; blood pressure was 90/50; Chills; body aches; Fatigue; Joint pain; Bone pain; Headache; Swelling, pain, redness and soreness at the injection site; Swelling, pain, redness and soreness at the injection site; Swelling, pain, redness and soreness at the injection site; Tachycardia / heart rate was 144-152; painful to breath and she was grunting; also said that the injection site itched a little bit.; Fever; First dose on 17Dec2020, second does on 04Jan2021; This is a spontaneous report from a contactable nurse reporting for herself. A 35-year-old female patient received the first single dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) (lot number was unknown) intramuscularly on 17Dec2020 at 0.3ml, and the second single dose (lot number EJ1685) intramuscularly on 04Jan2021 07:45 at 0.3ml, for COVID-19 prophylaxis. Medical history included ongoing diabetes. Her diabetes was diagnosed about 6 months ago (reported on 06Jan2021) and was well controlled. Her glucose was at 140 at the ER (emergency room) even after drinking a drink that had sugar in it. The patient"s concomitant medications were not reported. The patient received the second dose on 04Jan2021 at 07:45 and experienced a severe reaction hours after she received it, and she ended up having to go the ER and that they were baffled about what happened. She reported her symptoms were: fatigue, joint pain mainly in her knees, bone pain that did not feel like muscle pain, headache, swollen lymph nodes in the left axilla, and swelling, redness, pain, and soreness in the left arm at the injection site and also said that the injection site itched a little bit. Her symptoms started about 9-10 at night on 04Jan2021. She said that she felt like with the second dose she noticed the soreness and pain and redness at injection site after about 2 hours after receiving the second dose, which was sooner than with the first injection. The fever started with the chills and body aches. The chills and body aches started at 22:00 on 04Jan2021. She took acetaminophen and melatonin to try and sleep it off. Fever was after that at around midnight 04Jan2021 and she was burning in fever and her temperature was 104. She stated she started taking layers off and got out from under her covers. She had a sweater on when she took her temperature and her axillary temperature was 105. She said that she got into a hot shower because that was the only thing that provided comfort to her chills. She had not had any chills in about the last 12 hours though (as reported on 06Jan2021). She said that the body aches were so severe that she just sat in her bed and cried. She had tachycardia and she was grunting in pain. She was rotating ibuprofen and acetaminophen and then her fever was not as high. She stated that if her fever came back it was lower each time, and if she did not take the medications though, the bone pain was excruciating. She said that with the bone pain it was like no-one can hold her hand or hug her. Fatigue started at around midnight 04Jan2021. Her headache was at midnight. She felt like she had a headband on and was radiating down the back of her neck. She noticed the lymph nodes were swollen after she went to the ER at around 07:00-08:00 05Jan2021. She was walking with pillow under her arm, and if she moved or lifted her arm it hurt. She went to the ER at 01:00 05Jan2021. Her blood pressure was 90/50, her heart rate was 144-152 at rest, temperature was 102.8, O2 saturation was 95-96. She said that it was painful to breath and she was grunting, but did not have any breathing issues. The nurse thought she was septic and notified the doctor. The nurse and the doctor did not think it was the vaccine and thought that she was COVID-19 positive. But after they tested her, she was negative for flu and COVID and they were baffled. They were unclear on what happened and did not think it was from the vaccine. They bolused her 1 liter of Normal Saline and gave her a dose of Fentanyl that minimally helped with the bone pain. She was also given 30mg of ketorolac (TORADOL) IV (intravenous) and that significantly improved her
pain. She was there a total of 3 hours. She was admitted to the back area of the ER. She said that they drew labs and everything was within normal limits. Her CRP (C-reactive protein) was 30 and her lactate was at 1.5. She said that they told her that she was most likely having an immune response to the vaccine. Her heart rate and blood pressure came to a more normal range and everything returned to baseline. Her heart rate was 109. She was told to rotate paracetamol (TYLENOL) and ibuprofen for at least the next 24 hours and hydrate. The events fever, chills, fatigue, joint pain, bone pain, headache, swollen lymph nodes, and swelling, pain, redness and soreness at the injection site were serious due to hospitalization from 05Jan2021 to 05Jan2021. The patient was recovering from fever, chills, joint pain, headache, heart rate and blood pressure, not recovered from fatigue, bone pain, swollen lymph nodes and swelling, pain, redness and soreness at the injection site. The event swollen lymph nodes worsened. The outcome of "injection site itched a little bit" was unknown. The reporter considered the events fever, chills, fatigue, joint pain, bone pain, headache, swollen lymph nodes, and swelling, pain, redness and soreness at the injection site were all related to the vaccine; Sender’s Comments: Based on temporal association, the causal relationship between BNT162B2 and the events pyrexia, chills, fatigue, pain, arthralgia, bone pain, headache, lymphadenopathy, vaccination site erythema, vaccination site swelling, vaccination site pain, blood pressure decreased, tachycardia, grunting and vaccination site pruritus cannot be excluded. The information available in this report is limited and does not allow a medically meaningful assessment. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees, and Investigators, as appropriate.

VAERS ID: [934990](history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-09
Age: 26.0 Days after vaccination: 2
Sex: Female Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-11

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Administered by: Private Purchased by: ?
Symptoms: Contusion, Immunoglobulin therapy, Injection site pain, Platelet count decreased, Platelet transfusion
SMQs: Haematopoietic thrombocytopenia (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Systemic lupus erythematosus (broad), Accidents and injuries (narrow), Extravasation events (injections, infusions and implants) (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Ibuprofen and acetaminophen
Current Illness: None
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: 1/9/2021 18:30 2x10^3/uL 1/9/2021 21:30 6x10^3/uL 1/10/2021 02:10
8x10^3/uL 1/10/2021 07:30 18x10^3/uL 1/10/2021 18:12 127x10^3/uL 1/11/2021 05:43
142x10^3/uL
CDC Split Type:

Write-up: 26-year-old lady came in after she noticed she had bruises on her left hand after a
CPR procedure at hospital. Patient was apparently in well health, she had received COVID-19
mRNA vaccine on January 7 at 3 PM, she has taken 2 pills with ibuprofen and tylenol for pain
in right deltoid following vaccination. She was doing the CPR at 1:00 this afternoon, and she
noticed that her left dorsum had some bruises. She took day off and went home and noticed
that she also had bruises in both medial thighs, above the knee and some bruises in scalp.
Patient presented to the Emergency Room 1/9/2021 ~6PM and platelet count was found to be
2x10^3/uL. Patient required transfusion of 7 units of platelets, steroids, and IVIG.

<table>
<thead>
<tr>
<th>VAERS ID: 935266 (history)</th>
<th>Vaccinated: 2021-01-06</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-07</td>
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<tr>
<td>Age: 41.0</td>
<td>Days after vaccination: 1</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Wisconsin</td>
<td>Entered: 2021-01-11</td>
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<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011L20A / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Abdominal discomfort, Abdominal distension, Abdominal pain, Bowel movement irregularity, Nausea, Vomiting
SMQs: Acute pancreatitis (broad), Retroperitoneal fibrosis (broad), Gastrointestinal perforation, ulcer, haemorrhage, obstruction non-specific findings/procedures (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
  Extended hospital stay? No
Write-up: Patient presents with abdominal pain that started in the middle of the night. Had first COVID vaccine the previous day. Patient states the pain is intermittent "comes and goes" "cramping" "pressure and bloating" feeling. Patient states her normal bowel movements are 12 times per day. The last time she went was this morning. She is concerned about an "obstruction" Patient states she has "some nausea" She states she has ate and drank normally today. Patient has a history of ulcerative colitis and a complete colectomy with a ileal rectal pouch. She has had abdominal pain since this morning which is crampy, associated with nausea and recurrent vomiting. She normally has 6-12 bowel movements a day, but none since this morning. She does feel her abdomen is distended as well. The last time she had anything like this was when she developed pouchitis last spring, but that was much less painful than this. Her appendix is gone, but she believes she still has her gallbladder.

VAERS ID: 935310 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-05
Age: 52.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2021-01-11

<table>
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<th>Site / Route</th>
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<td>- / IM</td>
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<tr>
<td>PFIZER/BIONTECH</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Paraesthesia
SMQs: Peripheral neuropathy (broad), Guillain-Barre syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Went into the ED for bilateral hand and feet tingling. Worked up for possible Guillain Barre.

VAERS ID: 935338 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-09
Age: 44.0  Days after vaccination: 3
Sex: Male  Submitted: 0000-00-00
Location: Kansas  Entered: 2021-01-11

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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Public  Purchased by: ?
Symptoms: Blood pressure increased, Blood test, Computerised tomogram head, Dizziness, Facial paralysis, Facial paresis, Feeling abnormal, Hypoaesthesia, Motor dysfunction, Muscular weakness, Paraesthesia, Paraesthesia oral, Speech disorder
SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Akathisia (broad), Dyskinesia (broad), Dystonia (broad), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypertension (narrow), Hearing impairment (broad), Vestibular disorders (broad), Immune-mediated/autoimmune disorders (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: Hypertension, obesity, DM type II
Allergies: NKA
Diagnostic Lab Data: blood serum labs, CT brain on 1/9/21 at Hospital ER; scheduled for appt with PCP at on 1/12/21
CDC Split Type:
Write-up: Patient reported stroke-like symptoms as he was driving to work: started "feeling funny" with dizziness; progressed to feeling weakness in left side of face with facial drooping; tingling in left hand progressed to numbness and weakness in left arm and leg; difficulty coordinating motor movement in right arm; difficulty/ diminished speech "tongue felt fat."
Symptoms resolved within appx 1+ hour from onset. Per patient, he was given an injection at the hospital (unsure for what?) and was discharged with a prescription for chlorthalidone 25mg daily, blood pressure was elevated.

VAERS ID: 935350 (history)  Vaccinated: 2020-12-31
Form: Version 2.0  Onset: 2021-01-02
Age: 81.0  Days after vaccination: 2
Sex: Male  Submitted: 0000-00-00
Location: Texas  Entered: 2021-01-11

<table>
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<th>Site / Route</th>
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<td>037K20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  Purchased by: ?

Symptoms: Unresponsive to stimuli

SMQs: Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? Yes
  Date died: 2021-01-06
  Days after onset: 4
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
  Extended hospital stay? No

Previous Vaccinations:

Other Medications: Symbicort 160/4.5 mcg/act inhaler Dilitiazem ER 360mg PO daily Eliquis 5mg PO twice a day Furosemide 20mg PO daily Losartan 100mg PO daily KCL 10mEq ER PO daily Ranitidine 150mg PO Ventolin HFA 0.09mg/1ACT 2 puffs every 4 hours as needed

Current Illness: Dyspnea, Shortness of breath

Preexisting Conditions: Paroxysmal atrial fibrillation Hypertension Chronic iron deficiency anemia Congestive heart failure with chronic diastolic

Allergies: No known allergies

Diagnostic Lab Data:

CDC Split Type:

Write-up: Patient was found unresponsive at home with SpO2 20% 1/2/2021
VAERS ID: 935452 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-06
Age: 44.0  Days after
Sex: Female  vaccination: 0
Location: New Mexico  Submitted: 0000-00-00
 Entered: 2021-01-11

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<td>EL3248 / 2</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Chest pain, Diarrhoea, Echocardiogram normal, Electrocardiogram T wave abnormal, Myocarditis, Nausea, Platelet count decreased, Pyrexia, Thrombocytopenia, Troponin increased, Vomiting
SMQs: Acute pancreatitis (broad), Haematopoietic thrombocytopenia (narrow), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Other ischaemic heart disease (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Hypokalaemia (broad), Immune-mediated/autoimmune disorders (broad)
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Multivitamin daily
Current Illness: no
Preexisting Conditions: no
Allergies: NKDA
Diagnostic Lab Data: Troponin 0.08 and then 2.3 and up to 4 Platelets 85 and then 61.
CDC Split Type: Write-up: 1/6/21 8pm started with Nasuea, vomiting, diarrhea and fever. 1/7/21 started having intermittent chest pain in the morning. Then in the evening it became constant. Went to ER that evening due to chest pain. EKG showed t wave abnormality. 1st Trop was negative went from 0.08 to 2.3 Had 2 Echo"s done and they were normal. Platelets were 85. Was discharged without chest pain. Troponin on discharge was 0.67 and platelets 61. Was admitted due to Chest pain and troponin. Attending provider diagnosed as myocarditis and thrombocytopenia R/T vaccine.
Administered by: Private  
Purchased by: ?

Symptoms: Abdominal discomfort, Asthenia, Blood glucose increased, Chest pain, Diabetic ketoacidosis, Diarrhoea, Headache, Migraine, Pain, Pain in extremity, Pyrexia

SMQs:; Hyperglycaemia/new onset diabetes mellitus (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Gastrointestinal perforation, ulcer, haemorrhage, obstruction non-specific findings/procedures (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Noninfectious diarrhoea (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? Yes  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, 2 days  
  Extended hospital stay? No  
Previous Vaccinations:  

Other Medications:  

Current Illness:  

Preexisting Conditions: Type 2 diabetes  

Allergies: Sulfa: lip swelling  
Daptomycin: anaphylaxis  
Zosyn: lip swelling and hives  
Benadryl: Itching  

Diagnostic Lab Data:  

CDC Split Type:  

Write-up: Pfizer COVID-19 Vaccine A couple hours after the vaccination the patient experienced pain in the vaccine arm, headache, and feeling ache. Day 1 post vaccination patient experienced sore arm, headache, low grade fever, feeling ache, and GI symptoms with diarrhea. Day 2 post vaccination patient experienced sore arm, Migraine, and diarrhea. Day 3 post vaccine patient woke up with chest pain that radiated into her left arm and some weakness. Patient’s blood sugar was $g500 and was admitted to hospital for DKA.
VAERS ID: 935780 (history)  Vaccinated: 2021-01-05
Form: Version 2.0  Onset: 2021-01-05
Age: 61.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Ohio  Entered: 2021-01-11

<table>
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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011J20A / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Abdominal pain upper, Blood test, Chest X-ray, Computerised tomogram, Contusion, Dysstasia, Electrocardiogram, Eye contusion, Fatigue, Feeling of body temperature change, Headache, Loss of consciousness, Malaise, Memory impairment, Poor quality sleep, Sensation of foreign body, Swelling face, Swelling of eyelid, Tremor, Vaccination complication, Vision blurred
SMQs:; Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (narrow), Haemorrhage terms (excl laboratory terms) (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dementia (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Accidents and injuries (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Glaucoma (broad), Lens disorders (broad), Retinal disorders (broad), Depression (excl suicide and self injury) (broad), Periorbital and eyelid disorders (narrow), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Levothyroxyn, Lisinopril
Current Illness: no
Preexisting Conditions: Thyroid
Allergies: Penicillin, Amoxicillin, Sulfur, pineapple
Diagnostic Lab Data: Ct Scan, EKG, chest xray, bloodwork
CDC Split Type:
Write-up: Extremely tired went to bed at 8:30. At 11:00, tossed and turned until 12:16 a.m. Did not think she could stand up. Walked in the bathroom had pain in stomach, was very hot and freezing at the same time, was shaking. Head hurt was hurting so bad. Tried standing up
from toilet, was passed out. Eye, half of face is bruised and swollen, eye shut for two days. More than forty minutes passed before she could call her husband. Does not remember anything because she was passed out. Husband came in and grabbed her, to get her back into bed. She could not stand. Went to ER at Hospital. Had CT scan, blood work, EKG, chest xray. Was still kind of out of it but was able to communicate with nurses. Face is still black and blue. Last night got up at 4:00 a.m. something was wrong with her throat. Felt like a walnut was in her throat. Went to doctor this morning. They said it was a reaction from the shot. Got an EpiPen, prednisone. Call them in 2 days to let them know how she’s doing and also wear a heart monitor because they do not know how to take care of her. Has had vision blurriness in both eyes. Has not felt well at all.

VAERS ID: 935849 (history) Vaccinated: 2020-12-01
Form: Version 2.0 Onset: 2021-01-05
Age: 39.0 Days after vaccination: 35
Sex: Female Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-11

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011J20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Private  Purchased by: ?
Symptoms: Appendicectomy, Appendicitis, Computerised tomogram abdomen, Computerised tomogram pelvis, Full blood count, Lymphadenopathy, Ultrasound pelvis
SMQs: Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
| Extended hospital stay? No |

Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: CBC, pelvic ultrasound, CT abdomen and pelvis all on January 7, 2021
CDC Split Type:
Write-up: Noted left lymph nodes left neck. On January 7, 10 days post injection had acute appendicitis requiring emergency appendectomy.
**VAERS ID:** 935984 (history)  
**Form:** Version 2.0  
**Age:** 29.0  
**Sex:** Female  
**Location:** Colorado  
**Vaccinated:** 2020-12-21  
**Onset:** 2020-12-21  
**Days after vaccination:** 0  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-11

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<td>EJ1685 / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?  
**Symptoms:** Abdominal discomfort, Blood test, Fatigue, Headache, Pyrexia, Urticaria  
**SMQs:** Anaphylactic reaction (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Gastrointestinal perforation, ulcer, haemorrhage, obstruction non-specific findings/procedures (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** Birth control  
**Current Illness:** no  
**Preexisting Conditions:** Lyme Disease, Heart Condition  
**Allergies:** peanuts,  
**Diagnostic Lab Data:** Given Benadryl, Beta Blocker, Steroid, blood work  
**CDC Split Type:**  
**Write-up:** About 15 minutes after vaccine, hr 155, fever 102, covered in hives, sick to her stomach and a pounding headache. Has had headache since then and been extremely fatigue.

**VAERS ID:** 936151 (history)  
**Form:** Version 2.0  
**Age:** 46.0  
**Sex:** Female  
**Location:** Montana  
**Vaccinated:** 2020-12-16  
**Onset:** 2020-12-23  
**Days after vaccination:** 7  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-11

<table>
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Administered by: Private  
Purchased by: ?  
Symptoms: Blood test, Computerised tomogram head, Loss of proprioception, Magnetic resonance imaging, Magnetic resonance imaging brain, Magnetic resonance imaging spinal, Mobility decreased, Paraesthesia  
SMQs: Peripheral neuropathy (narrow), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Tendinopathies and ligament disorders (broad)  
Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? Yes  
Recovered? No  
Office Visit? Yes  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 2 days  
Extended hospital stay? No  
Previous Vaccinations:  
Other Medications: Synthroid 6 am  
Current Illness: R/O Covid infection, COVID test was negative December 4, 2020. Primary Care MD diagnosed me with COVID after symptoms consistent with the virus on December 14, 2020.  
Preexisting Conditions: Hypothyroidism, Migraine headaches, IBS  
Allergies: Morphine, extrapyramidal reaction to reglan  
Diagnostic Lab Data: CT of brain X2, MRI of brain X2, MRI of C-Spine, MRI of brachioplexus, blood work.  
CDC Split Type:  
Write-up: One week after administration, I had sudden onset inability to move left arm. I was transported to ER immediately. Treated, scanned with CT of brain, MRI of brain, c-spine and brachioplexus. In hospital for 2 days and no answers. Still no answers to left arm paresthesia and proprioceptor deficits. Spreading into left leg and mild systemic symptoms. I have been to the ER, seen by primary physician, Physiatrist and Neurology and Occupational Therapy. I am scheduled for many more appointments and trying to find and answer.  

VAERS ID: 936715 (history)  
Form: Version 2.0  
Age: 24.0  
Sex: Female  
Location: Pennsylvania  
Vaccinated: 2021-01-11  
Onset: 2021-01-11  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2021-01-12  

**Vaccination / Manufacturer**  
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<td>EK9231 / 2</td>
<td>LA / IM</td>
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Administered by: Private  
Purchased by: ?

Symptoms: Dizziness, Dyspnoea, Intensive care, Palpitations, Vomiting

SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Vestibular disorders (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Sprintec, QVar ProAir, Prevacid, Respi Click
Current Illness: Unknown
Preexisting Conditions: Asthma
Allergies: Sulfa, Neomycin, Bacitracin, Motrin, Shellfish, Cats/Dogs
Diagnostic Lab Data: Would need to obtain intensive care record from the hospital.

CDC Split Type:
Write-up: Approx 10-15 post vaccine, employee said she felt lightheaded and like her heart was racing. Within 10 minutes she said she felt difficulty breathing. She then vomited. The observation nurse at the clinic administered Epi Pen and called a Code. The employee was transported to the Emergency Dep"t and then to intensive care. She was placed on an Epi drip.

VAERS ID: 936891 (history)  
Vaccinated: 2021-01-08  
Form: Version 2.0  
Onset: 2021-01-09  
Age: 64.0  
Days after vaccination: 1  
Sex: Male  
Submitted: 0000-00-00  
Location: North Dakota  
Entered: 2021-01-12

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<td>EL1284 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Senior Living  
Purchased by: ?

Symptoms: Asthenia, Fall, Pyrexia

SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Accidents and injuries (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Increased weakness leading to a fall and fever of 101.3

VAERS ID: 936993 (history) Vaccinated: 2020-12-31
Form: Version 2.0 Onset: 2020-12-31
Age: 42.0 Days after vaccination: 0
Sex: Female
Location: Iowa Submitted: 0000-00-00
Entered: 2021-01-12

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<td>025L20A / 1</td>
<td>LA / IM</td>
</tr>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Acute myeloid leukaemia, Atypical pneumonia, Back pain, Biopsy bone marrow abnormal, Blast cells present, Blood smear test, C-reactive protein, Chills, Computerised tomogram thorax abnormal, Fatigue, Fibrin D dimer, Full blood count, Metabolic function test, Pain, Pyrexia, Red blood cell sedimentation rate, SARS-CoV-2 test negative, White blood cell count increased, White blood cell morphology abnormal
SMQs: Haematopoietic cytopenias affecting more than one type of blood cell (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Blood premalignant disorders (narrow), Malignancy related therapeutic and diagnostic procedures (narrow), Cardiomyopathy (broad), Malignant lymphomas (broad), Myelodysplastic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Haematological malignant tumours (narrow), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 7 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Levothyroxine, Trintellix
Current Illness: Strep
Preexisting Conditions: Thyroid cancer, hypothyroidism, GERD
Allergies: Compazine
Diagnostic Lab Data: 1.5.2020: CBC, CMP, D Dimer, CRP, ESR. CTA of chest negative for PE but demonstrated atypical Pneumonia. RAPID covid test negative. Peripheral smear demonstrated blasts, auer rods. 1.6.2020: Bone marrow biopsy confirmed AML
CDC Split Type:
Write-up: Patient began experiencing fevers, body aches, back pain, fatigue, chills the night she received the vaccine. Symptoms progressed for the following four days when she was ultimately seen in PCP office. Laboratory evaluation demonstrated atypical pneumonia and elevated WBC count. Patient was diagnosed with Acute Myeloid Leukemia via bone marrow biopsy and is receiving treatment at the hospital.

VAERS ID: 937089 (history)
Vaccinated: 2021-01-07
Onset: 2021-01-08
Days after vaccination: 1
Submitted: 0000-00-00
Entered: 2021-01-12

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<th>Site / Route</th>
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<td>EK9321 / 2</td>
<td>RA / IM</td>
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</table>

Administered by: Private  
Purchased by: ?

Symptoms: Balance disorder, Burning sensation, Head discomfort, Headache, Hypoaesthesia, Magnetic resonance imaging, Paraesthesia

SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Vestibular disorders (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Augmentin, Wellbutrin, Duloxetine, Klonipin
Current Illness: Diverticulitis 24 hrs prior
Preexisting Conditions: Fibromyalgia, mild asthma, anxiety and depression, occasional Diverticulitis, occasional headache/migraines
Allergies: n/a
Diagnostic Lab Data: MRI
CDC Split Type:
Write-up: Within 24 hrs, developed headaches, burning sensation down spine and neck. fullness in head intensified next day. balance was off, numbness and tingling throughout body. Went to ER. Diagnosed Paresthesia

VAERS ID: 937343 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-07
Age: 37.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-12

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<td>RA / IM</td>
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Administered by: Other Purchased by: ?
Symptoms: Abdominal pain, Dizziness, Endoscopic retrograde cholangiopancreatography, Headache, Hepatic enzyme increased, Nausea, Rash, Rash erythematous
SMQs: Liver related investigations, signs and symptoms (narrow), Anaphylactic reaction (broad), Acute pancreatitis (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: unknown
Current Illness: unknown
Preexisting Conditions: unknown
Allergies: unknown
Diagnostic Lab Data: Per her supervisor, her "liver enzymes are elevated/out of whack" and she was having an ERCP

CDC Split Type:
Write-up: Within approximately 30 minutes after vaccine (Thursday), patient presented with red rash to upper chest, severe headache, dizziness and nausea. Was treated with Benadryl and Tylenol per anesthesia onsite. Symptoms remained throughout the day with minimal improvement. The following morning (Friday) only headache remained. patient began having abdominal pain, and was admitted to hospital the next day (Saturday). It is now Tuesday and patient is still hospitalized. Unclear if this entire event is vaccine related.
VAERS ID: 937474 (history) Vaccinated: 2021-01-11
Form: Version 2.0 Onset: 2021-01-12
Age: 28.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Puerto Rico Entered: 2021-01-12

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011J20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Military  Purchased by: ?
Symptoms: Chills, Hypoaesthesia, Malaise, Nausea, Pyrexia
SMQs: Acute pancreatitis (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: Dust, avocados
Diagnostic Lab Data: None.
CDC Split Type:
Write-up: Pt experienced the following morning: fever (100 F) chills, malaise, nausea, and numbness in hands at 0624 and 0836. Pt went to hospital at 1000, tx with IV fluids.

VAERS ID: 937480 (history) Vaccinated: 2021-01-09
Form: Version 2.0 Onset: 2021-01-11
Age: 85.0 Days after vaccination: 2
Sex: Female Submitted: 0000-00-00
Location: Louisiana Entered: 2021-01-12

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<td>011J20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Other  Purchased by: ?
Symptoms: Anxiety, Blood magnesium normal, Cardiovascular evaluation, Computerised tomogram head normal, Full blood count normal, Headache, Metabolic function test normal, Muscular weakness, Neck pain, Paraesthesia

SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Arthritis (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No

Previous Vaccinations:
Other Medications: Losartan, Amlodipine, Levothyroxine, Metoprolol, Crestor

Current Illness: None reported
Preexisting Conditions: Hypertension, hypothyroidism, hyperlipidemia
Allergies: None reported

Diagnostic Lab Data: As above on 1/11/2021

CDC Split Type:

Write-up: In the early morning of Monday, January 11th the patient developed a significant headache with neck pain. She also reported parathesia and tingling in bilateral upper extremities with weakness of the right upper extremity. She reported feeling very anxious and "wound up". Patient presented to the Emergency Department 3 hours later. CT of the head/brain, EKG, CBC, CMP, Magnesium and Cardiac profile were performed with no significant findings. Ativan 0.5mg was administered orally. Patient was admitted to the facility for observation. Symptoms gradually resolved with no additional treatment.

VAERS ID: 937579 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2020-12-30
Age: 64.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Minnesota Entered: 2021-01-12

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<td>037K20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Senior Living Purchased by: ?

Symptoms: Abdominal pain, Acute respiratory distress syndrome, Arteriosclerosis coronary artery, Ascites, Atrial fibrillation, Blood culture negative, Blood lactic acid, Blood potassium decreased, Brain natriuretic peptide normal, C-reactive protein increased, Chronic obstructive pulmonary disease, Computerised tomogram abdomen abnormal, Computerised tomogram thorax abnormal, Confusional state, Culture urine positive, Diarrhoea, Dyspnoea, Electrocardiogram abnormal, Fall, Haematocrit decreased, Haemoglobin decreased, Hepatic cirrhosis, Hiatus hernia, International normalised ratio increased, Lipase normal, Lung opacity,
Myalgia, Nausea, Oedema, Pancreatitis, Platelet count decreased, Portal hypertension, Procalcitonin increased, Pulmonary embolism, Pyrexia, Red blood cell count decreased, Scan with contrast, Sepsis, Sinus tachycardia, Splenic granuloma, Tachycardia, Tachypnoea, Vomiting, White blood cell count decreased

SMQs: Rhabdomyolysis/myopathy (broad), Cardiac failure (broad), Liver related investigations, signs and symptoms (narrow), Hepatic failure, fibrosis and cirrhosis and other liver damage-related conditions (narrow), Liver-related coagulation and bleeding disturbances (narrow), Anaphylactic reaction (narrow), Acute pancreatitis (narrow), Angioedema (broad), Asthma/bronchospasm (broad), Haematopoietic erythropenia (narrow), Haematopoietic leukopenia (narrow), Haematopoietic thrombocytopenia (narrow), Haemorrhage laboratory terms (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Retroperitoneal fibrosis (broad), Dementia (broad), Pseudomembranous colitis (broad), Embolic and thrombotic events, venous (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Accidents and injuries (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Other ischaemic heart disease (narrow), Noninfectious diarrhoea (narrow), Respiratory failure (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Hypoglycaemia (broad), Infective pneumonia (broad), Insective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad), Sepsis (narrow), Opportunistic infections (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 8 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Zyprexa 15 mg tablet once daily Levothyroxine 100 mcg tablet once daily Metformin ER 500 mg tablet 2 tablets by mouth twice daily Divalproex DR 240 mg Give 3 tablets by mouth once daily Metoprolol tartrate 50 mg tablet by mouth twice daily

Current Illness: COVID 19 (tested positive on 11/27/2020). Appeared to have recovered, but had some weight loss as well as persistent weakness, activity intolerance.

Preexisting Conditions: Schizophrenia Dementia without behavioral disturbance Personal history of covid-19 (Tested positive on 11/27/2020) Type 2 diabetes mellitus Morbid Obesity Essential Hypertension BPH with LUTS Allergic rhinitis Hypothyroidism Seborrheic dermatitis Fatty liver disease Pancreatitis Glaucoma History of nicotine dependence, cigarettes

Allergies: Ciclopirox- erythema and pruritus Naltrexone- reaction dizziness Topiramate- mood changes

Diagnostic Lab Data: 12/31/2020: WBC 4.8 K/uL ; RBC 4.23 M/Ul; Hgb 12.9 g/dL; Hct 38.6%; Platelets 63 k/uL; Blood culture: No growth; Urine culture: Moderate mixed flora;
Lipase 55 U/L; Procalcitonin 2.38 ng/mL; BNP 90; Lactic acid 7.2 mmo/L; CRP 110.5 mg/L; Potassium 3.4 mmol/L; INR 2.4 ; CT Angio Chest: Pulmonary embolism left and right; Moderate pachy peripheral ground glass right infiltrates Heavy triple vessel coronary calcification with heavy left main coronary calcification. Mild inflammatory stranding around the normal appearing pancreatic head suggesting pancreatitis. Moderate thickening of the wall of distal esophagus associate with small hiatal hernia: EKG on 12/31/2020: Sinus tachycardia; EKG on 1/2/2021: Atrial fibrillation with rapid RVR; On 1/3/2021: CT abdomen with contrast liver cirrhosis with portal venous hypertension, multiple splenic granulomata, recanalization of the umbilical vein. Third spacing with body wall edema and mild pericholecystic ascites. The mild stranding in the upper abdominal fat could represent mild pericholecystic ascites. Mostly liquid stool throughout colon without findings of intestinal obstruction.

**CDC Split Type:**

**Write-up:** On 12/31/2020, at approximately 00:15, pt developed a fever of 102.9 F and tachycardia with rate of 120. He was treated with acetaminophen. Later in the morning, he complained of nausea, generalized muscle aches, intermittent increase in confusion. At approximately 14:00, he had a fall out of bed and at that time noted to be short of breath, tachypneic. He was taken via ambulance to Emergency Department. From there he was transferred to Hospital for admission with acute respiratory distress, suspected sepsis with lactic acid 7.4 and Bilateral Pulmonary Emboli. He was started on heparin and broad spectrum antibiotics and transitioned to ELIQUIS on 1/3/2021. Infectious etiology of sepsis was unclear. He continued broad spectrum antibiotics with clinical improvement. Abdominal CT scan was obtained due to intermittent nausea, vomiting, abdominal pain, loose stools. His heart rhythm flipped to Atrial Fibrillation with RVR on 1/2 and his rate improved with titration of metoprolol. He was also treated with prednisone for suspected underlying undiagnosed COPD. It is noted in his hospital summary that PEs presumed provoked in the setting of his recent COVID 19 infection. He was discharged from the hospital on 1/8/2021 and readmitted to the Veterans Home. He has been stable.

<table>
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<tr>
<th>VAERS ID: 937582 (history)</th>
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<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-08</td>
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<tr>
<td>Age: 38.0</td>
<td>Days after vaccination: 3</td>
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<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<td>Location: Virginia</td>
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| Vaccination / Manufacturer: COVID19 (COVID19 (MODERNA)) / MODERNA | Lot / Dose: 039K20A / 1 | Site / Route: RA / IM |

**Administered by:** Other  
**Purchased by:** ?

**Symptoms:** Dyspnoea, Influenza virus test negative, Laboratory test normal, SARS-CoV-2 test negative, Vomiting, White blood cell count increased

**SMQs:** Anaphylactic reaction (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)

**Life Threatening?** No  
**Birth Defect?** No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: unknown
Current Illness: none
Preexisting Conditions: Asthma
Allergies: coconut
Diagnostic Lab Data: Evaluation performed by hospital-unsure of all testing completed but stated that she was negativeX3 for COVID, neg flu, and neg pneumonia.

CDC Split Type:
Write-up: Received Moderna vaccine on 1/5. Had a single episode of vomiting approximately 1 hour after vaccine. Hx of Asthma, started to develop SOB approximately 2 days later. She reached out to PCP and used inhaler with little relief. SOB worsened and she was admitted to the hospital on 1/8/21. Eval was negative for COVID (3 tests completed), flu and pneumonia. She has elevated WBCs and was given steroids and supplemental oxygen. She is improving but remains inpatient.

VAERS ID: 937774 (history)
Vaccinated: 2021-01-05
Form: Version 2.0
Onset: 2021-01-10
Age: 30.0
Days after vaccination: 5
Sex: Male
Submitted: 0000-00-00
Entered: 2021-01-12

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</table>

Administered by: Unknown  
Purchased by: ?
Symptoms: COVID-19, Cough, Pain, Pneumonia, Pyrexia, SARS-CoV-2 test positive, Sepsis
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Sepsis (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Fever/Cough/Body Aches. Covid +, Pneumonia and Sepsis

VAERS ID: 937932 (history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-08
Age: 28.0  Days after vaccination: 1
Sex: Male  Submitted: 0000-00-00
Location: Utah  Entered: 2021-01-12

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Administered by: Private  Purchased by: ?
Symptoms: Chest pain, Electrocardiogram ST segment elevation, Myalgia, Myocarditis, Pyrexia, Troponin increased
SMQs: Rhabdomyolysis/myopathy (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: No known chronic conditions
Allergies: Spring seasonal allergies
Diagnostic Lab Data:
CDC Split Type:
Write-up: Patient presented with myalgias, fevers, and chest pain on 1/10/21 and was found to have diffuse ST elevation and elevation troponin. He was evaluated by cardiology and
diagnosed with acute myopericarditis. He was treated with NSAIDs and colchicine. He improved with this treatment and was discharged on 1/12/21 with ibuprofen and colchicine and outpatient cardiology follow up.

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**VAERS ID:** 938067 (history)  
**Vaccinated:** 2021-01-06  
**Form:** Version 2.0  
**Onset:** 2021-01-07  
**Age:** 95.0  
**Days after vaccination:** 1  
**Sex:** Female  
**Location:** Florida  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-12  

### Vaccination / Manufacturer

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<td>EH9899 / 2</td>
<td>- / -</td>
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</table>

**Administered by:** Other  
**Purchased by:** ?

**Symptoms:** Cardio-respiratory arrest, Dyspnoea, Respiratory tract congestion, Tachycardia, Unresponsive to stimuli

**SMQs:**: Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Respiratory failure (broad), Hypoglycaemia (broad), Dehydration (broad)

**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** Yes
**Hospitalized?** Yes, ? days
  **Extended hospital stay?** No
**Previous Vaccinations:**
**Other Medications:**
**Current Illness:**
**Preexisting Conditions:** Medical History/Concurrent Conditions: Cardiac murmur (Verbatim: Cardiac murmur); Congestive heart failure (Verbatim: Congestive heart failure); Hypertension (Verbatim: Hypertension)
**Allergies:**
**Diagnostic Lab Data:**
**CDC Split Type:** USPFIZER INC2021010600

**Write-up:** she was transferred to the hospital with tachycardia, congestion, shortness of breath, and is now unresponsive; she was transferred to the hospital with tachycardia,
congestion, shortness of breath, and is now unresponsive; she was transferred to the hospital with tachycardia, congestion, shortness of breath, and is now unresponsive; she was transferred to the hospital with tachycardia, congestion, shortness of breath, and is now unresponsive; This is a spontaneous report from a contactable nurse. A 95-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), Lot# EH9899 Expiration on 06Jan2021 at 15:00 at SINGLE DOSE at deltoid for COVID-19 immunization. The patient received first dose of the same vaccine BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), Lot# EH9899 Expiration date : 31Mar2022, on 16Dec2020. Medical history included : cardiac failure congestive, hypertension, cardiac murmur .There were no concomitant medications. The patient previously took cymbalta , vasotec and zocor and experienced drug hypersensitivity. The patient didn't receive any other vaccines within 4 weeks prior to the COVID vaccine. This nurse, worker at a skilled nursing facility, reported that this patient with a history of heart failure, received her second dose of the Pfizer-BioNTech Covid-19 vaccine yesterday, 06Jan2021, at 3pm. At 7am on 07Jan2021 she was transferred to the hospital with tachycardia, congestion, shortness of breath, and is now unresponsive. Patient was stable prior to vaccination, but will now be transferred to hospice care. The nurse added the patient had the second COVID vaccine on 06Jan2021 yesterday and has now been transport to hospital due to a drastic decline after the shot. It was explained that this morning around 7 am she was transferred to the hospital. She was experiencing tachycardia, shortness of breath, and congestion. The events started this morning around 6-6:30am. The patient was admitted to the hospital. The shot was given at the facility. She received it at 3pm on 06Jan2021, First dose was on 16Dec2020. The caller relays she didn't know how aggressive the hospital will be for the patient. She was a full code when left and now a DNR and is unresponsive. The patient will be going on hospice care. The causality was reported as related. The outcome of the events was not recovered.; Sender's Comments: The Company cannot completely exclude the possible causality between the reported tachycardia, shortness of breath, congestion, unresponsive, and the administration of the COVID 19 vaccine, BNT162B2, based on the reasonable temporal association. The patient's pre-existing medical condition of cardiac failure congestive, hypertension, cardiac murmur are confounding factors. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, IEC, as appropriate.

VAERS ID: 938091 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 50.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Illinois Entered: 2021-01-12

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<td>- / UNK</td>
<td>- / -</td>
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Administered by: Private Purchased by: ?
Symptoms: Blood calcium decreased, Blood magnesium decreased, Blood potassium
decreased, Feeling abnormal, Full blood count, Haemoglobin decreased, Hypocalcaemia, Hypokalaemia, Hypomagnesaemia, Metabolic function test, Muscle spasms, Tetany

SMQs: Rhabdomyolysis/myopathy (broad), Haematopoietic erythropenia (broad), Haemorrhage laboratory terms (broad), Dementia (broad), Dystonia (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Hypokalaemia (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: CRESTOR;

Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Glucose tolerance impaired; Tachycardia; Tension headaches

Allergies:

Diagnostic Lab Data: Test Date: 20201218; Test Name: Calcium; Result Unstructured Data: Test Result:5.7; Test Date: 20210104; Test Name: Calcium; Result Unstructured Data: Test Result:9.5 (normal); Test Date: 20201218; Test Name: Magnesium; Result Unstructured Data: Test Result:1.2; Test Date: 20201221; Test Name: Magnesium; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201223; Test Name: Magnesium; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201226; Test Name: Magnesium; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201228; Test Name: Magnesium; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: Magnesium; Result Unstructured Data: Test Result:Unknown results; Test Date: 20210104; Test Name: Magnesium; Result Unstructured Data: Test Result:2.1 (normal); Test Date: 20201218; Test Name: Potassium; Result Unstructured Data: Test Result:2.6; Test Date: 20210104; Test Name: Potassium; Result Unstructured Data: Test Result:4.2 (normal); Test Date: 20201218; Test Name: CBC; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201221; Test Name: CBC; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201223; Test Name: CBC; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201226; Test Name: CBC; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201228; Test Name: CBC; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: CBC; Result Unstructured Data: Test Result:Unknown results; Test Date: 20210104; Test Name: hemoglobin; Result Unstructured Data: Test Result:10.2; Comments: (at normal for her); Test Date: 20210104; Test Name: hemoglobin; Result Unstructured Data: Test Result:14.5 (normal); Test Date: 20201218; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201221; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201223; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201226; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201228; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20210104; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201218; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201221; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201223; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201226; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201228; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20210104; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201218; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201221; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201223; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201226; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201228; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20210104; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201218; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201221; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201223; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201226; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201228; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20201230; Test Name: CMP; Result Unstructured Data: Test Result:Unknown results; Test Date: 20210104;
Write-up: Hypokalemia; Hypomagnesemia; Hypocalcemia; Hemoglobin dropped little bit; Tetany; Muscle cramps; This is a spontaneous report from a contactable healthcare professional, a physician assistant. A 50-year-old female patient received the first dose of the BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN), via an unspecified route of administration on 18Dec2020 (at the age of 50-years-old) as a single dose for COVID-19 immunization. Medical history included tachycardia, tension headache, and glucose tolerance impaired. Concomitant medications included rosuvastatin calcium (CRESTOR), gabapentin (MANUFACTURER UNKNOWN), and metoprolol (MANUFACTURER UNKNOWN). On 18Dec2020, the patient experienced hypokalemia, hypomagnesemia, hypocalcemia, tetany, muscle cramps, and hemoglobin dropped little bit. The clinical course was as follows: The patient received the vaccine and about 30 minutes later she started to “feel bad”. She went to the urgent care and about an hour after they took her to the emergency room (also reported as hospital). She had a complete blood count, complete metabolic panel, and magnesium level done on the 18th, 21th, 23rd, 26th, 28th, 30th of Dec2020 and then again on 04Jan2021. On 18Dec2020, her initial lab test showed potassium: 2.6, hemoglobin: 10.2, magnesium: 1.2, and calcium: 5.7. The physician assistant reported that a potassium of 2.6 was critically low and a hemoglobin was 10.2 was about normal for the patient. She received oral medications of potassium 20 mEq twice a day and calcium and magnesium supplements once a day. On 04Jan2021, lab data showed: potassium: 4.2, magnesium: 2.1, calcium: 9.5 and hemoglobin: 14.5. Per the reporting physician assistant, the above levels went back to normal but stated she had to be supplemented to get back to that point. The clinical outcomes of the hypokalemia, hypomagnesemia, hypocalcemia, and hemoglobin dropped little bit were recovered on 04Jan2021; while that of the tetany and muscle cramps, were unknown. The physician assistant assessed the events as related to the suspect vaccine. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow up.; Sender's Comments: A possible contributory effect of suspect BNT162B2 on reported events cannot be excluded. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.

VAERS ID: 938104 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-28
Age: 70.0 Days after vaccination: 6
Sex: Male Submitted: 0000-00-00
Location: Unknown Entered: 2021-01-12

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK5730 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: **SARS-CoV-2 test positive**
SMQs: Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
CDC Split Type:  
Write-up: COVID-19 positive and admitted to hospital 6 days post-vaccination

<table>
<thead>
<tr>
<th>VAERS ID: 938109 (history)</th>
<th>Vaccinated: 2020-12-31</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-01</td>
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<tr>
<td>Age: 43.0</td>
<td>Days after vaccination: 1</td>
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<tr>
<td>Sex: Male</td>
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<td>Location: Iowa</td>
<td>Entered: 2021-01-12</td>
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<td><strong>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</strong></td>
<td><strong>Lot / Dose</strong></td>
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<tr>
<td></td>
<td>O11J20A / 1</td>
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</table>

Administered by: Work    Purchased by: ?
Symptoms: **COVID-19 pneumonia, Chills, Cough, Headache, Pain, Pyrexia, SARS-CoV-2 test positive, Sinus congestion**
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: 

**Form:** Version 2.0

**VAERS ID:** 938109 (history)

**Symptoms:** COVID-19 pneumonia, Chills, Cough, Headache, Pain, Pyrexia, SARS-CoV-2 test positive, Sinus congestion

**SMQs:** Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)

**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** No
**Hospitalized?** Yes, ? days
**Extended hospital stay?** No

**Previous Vaccinations:**
Other Medications:
Current Illness: none mentioned
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: COVID swab positive 1/1/2021 Hospital admission 1/11/2021 not sure what tests are being performed
CDC Split Type:
Write-up: Received first dose Moderna COVID vaccine on 12/28/2020; on that same day 12/28 he noticed a dry cough; on 1/1/2021 he reported fever, chills, body aches, Headache, sinus congestion. On 1/1/2021 he tested positive for COVID-19, he reported being with a family member on Christmas who had COVID symptoms. On 1/11/2021 he required hospitalization for COVID-19 pneumonia

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<td>Form: Version 2.0</td>
<td>Onset: 2021-01-08</td>
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<tr>
<td>Age: 51.0</td>
<td>Days after vaccination: 3</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<td>Location: Michigan</td>
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<td>EK9231 / 1</td>
<td>- / IM</td>
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</table>

Administered by: Public  
Purchased by: ?

Symptoms: Abdominal X-ray, Aneurysm, Angiogram cerebral, Arteriogram carotid, Cerebellar haemorrhage, Cerebrovascular accident, Chest X-ray, Computerised tomogram abdomen, Computerised tomogram head, Computerised tomogram pelvis, Computerised tomogram spine, Computerised tomogram thorax

SMQs: Haemorrhage terms (excl laboratory terms) (narrow), Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow)

Life Threatening? Yes
Birth Defect? No
Died? Yes
  Date died: 2021-01-10
  Days after onset: 2
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: multivitamin; vitamin D
Current Illness: none mentioned
Preexisting Conditions: no significant past medical history
Allergies: latex
Diagnostic Lab Data: CT brain head; CT cervical spine; chest xray; CT chest, abdomen, pelvis; abdominal xray; CT angiogram neck & brain
CDC Split Type:
Write-up: on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm

VAERS ID: 938126 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-10
Age: 32.0 Days after vaccination: 3
Sex: Male Submitted: 0000-00-00
Location: New York Entered: 2021-01-12

<table>
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<td>EL3246 / 2</td>
<td>- / -</td>
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</table>

Administered by: Unknown Purchased by: ?
Symptoms: Facial asymmetry, Facial paralysis, Fatigue, Headache, Myalgia, Paraesthesia SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious meningitis (broad), Eosinophilic pneumonia (broad), Hearing impairment (broad), Tendinopathies and ligament disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: none
Current Illness: none
Preexisting Conditions: none
Allergies: none
Diagnostic Lab Data:
CDC Split Type:
Write-up: Following the first COVID vaccine dose on Dec/18/2020, I had headaches that started on the third day and ended on the tenth day. The headaches were usually light, unilateral, and alternating from one side to the other. I was usually functional except on the fourth and seventh days where the headaches were moderate to severe, and I took naps to
help with the headaches for those two days. I have never had an issue with headaches before, and these symptoms were a new experience for me. I did not take any medications as treatment for the headaches. Following the second COVID vaccine dose on January/7/2021, I felt fatigue and generalized muscle aches within six to twelve hours, and these symptoms lasted for two days. On January/10/2021, when I woke up that morning I again felt light, unilateral, and alternating headaches. In addition, I noticed that I was unable to move the left side of my face. I felt moderate tingling sensations associated with the distribution of the paralysis. When I looked in the mirror, I could quite noticeably see asymmetry in my face. I immediately went to the emergency department at the hospital where my primary care doctor is located. I was kept in the hospital into the next day for observation. After evaluation by a neurology team and an MRI, I was provided with the diagnosis of Bells Palsy. I have never previously been diagnosed with Bells Palsy, and I have never previously had a hospital stay before. The doctors prescribed medications which I am currently taking. As of today January/12/2021, the symptoms have had some improvement, but the symptoms still continue.

VAERS ID: 938235 (history)  Vaccinated: 2021-01-06
Form: Version 2.0  Onset: 2021-01-08
Age: 40.0  Days after vaccination: 2
Sex: Male  Submitted: 0000-00-00
Location: New Jersey  Entered: 2021-01-12

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>011L20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Public  Purchased by: ?
Symptoms: Blood test normal, Diarrhoea, Electrocardiogram normal, Hot flush, Nausea, Palpitations, Vomiting
SMQs: Acute pancreatitis (broad), Arrhythmia related investigations, signs and symptoms (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Noninfectious diarrhoea (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None at the time of vaccination. Up to one month prior the individual had a cold described as coughing and sneezing
Preexisting Conditions: None
Allergies: None, possibly penicillin
Diagnostic Lab Data: Bloodwork and EKG at the hospital on 1/8 both of which were normal.
Beginning at 6:30 am on 1/8, two days following vaccination, the individual was driving to work and began to experience nausea while at a traffic light. He pulled over and threw up. Once he got to work he vomited again. He drove to another facility for work and then threw up 3 or 4 more times. He began experiencing hot flashes at this time. He went to the hospital and was seen in the emergency room. He threw up several more times in the ER and stated that his heart was racing and that he had diarrhea. The emergency room gave him medications for the nausea and he stayed there for 2 or 3 hours. He began to feel better and was discharged home.

VAERS ID: 938256 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 53.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: New York Entered: 2021-01-12

<table>
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<td>011L20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Work Purchased by: 
Symptoms: Blood test normal, Burning sensation, Chest X-ray normal, Dizziness, Electrocardiogram normal, Fatigue, Gait disturbance, Headache, Immediate post-injection reaction, Pain, Syncope, Ultrasound scan normal
SMQs: Torsade de pointes/QT prolongation (broad), Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hypo responsiveness episode (broad), Hypersensitivity (narrow), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Vyvanse 40mg daily took that morning. mvi and calcium 600mg OTC. Generic Voltaran 1% gel apply once a day.
Current Illness: none
Preexisting Conditions: Takes medications for weight loss Chronic neck and right shoulder pain
Allergies: Penicillin, erythromycin.
Diagnostic Lab Data: When to ER 1/8/2021- treated and release that day. Dx Syncope. States felt worse after discharge. ultrasound over injections site, blood work, ECG and CXR-everything normal. took Tylenol and Motrin.
CDC Split Type: Write-up: Immediately developed intense burning that progressed over the next 30 minutes and continued to burn for 3 days. The next day progressive extreme fatigue last 4 days. felt like it was going to pass out. full on body pain, dizzy and lightheaded. need assistance to get to the walk, intense headache.

VAERS ID: 938258 (history) Vaccinated: 2020-12-26
Form: Version 2.0 Onset: 2020-12-27
Age: 48.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Pennsylvania Entered: 2021-01-12

<table>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / 1</td>
<td>LA / -</td>
</tr>
</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Injection site erythema, Injection site pain, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Aspirin, barbiturates, NSAIDs
Diagnostic Lab Data:
CDC Split Type:
Write-up: Very large, reddened, tender area at injection site (like the size of an angry red egg), and fever of 103.2.

VAERS ID: 938361 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-10
Age: 53.0 Days after vaccination: 4
Sex: Male Submitted: 0000-00-00
Location: Illinois Entered: 2021-01-12
**COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA**

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<tbody>
<tr>
<td>COVID19</td>
<td>039K20A / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

**Administered by:** Pharmacy  
**Purchased by:** ?

**Symptoms:** Lip swelling, Urticaria

**SMQs:** Anaphylactic reaction (broad), Angioedema (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 3 days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Cetirizine 10mg - 1 daily, Fluoxetine 40mg - 1 daily, Jardiance 10mg - 1 daily, Pazeo 0.7% eye drop - 1 drop into both eyes once daily, Famotidine 20mg - 1 twice daily, Fluticasone 50mcg nasal spray - 1 spray in each nostril twice daily, GI

**Current Illness:** Positive COVID 19 on 11/30/2020  
**Preexisting Conditions:** Moderate Intellectually disabled, Non-Insulin Dependent Diabetes Mellitus, HTN, high cholesterol, schizophrenia, tachycardia, acid reflux

**Allergies:** Bee venom

**Diagnostic Lab Data:** Admitted to Hospital for Observation on 1/10/2021

**CDC Split Type:**

**Write-up:** Patient presented on the morning of 1/10/2021 with swollen lips and hives. Vaccination took place on Wednesday January 6th, 2021.

---

**VAERS ID:** [938397](https://vaers.hhs.gov/VAERSD/VAERSD.htm?vaersid=938397)  
**Vaccinated:** 2021-01-04  
**Onset:** 2021-01-11  
**Days after vaccination:** 7  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-12

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**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**

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<tr>
<td>COVID19</td>
<td>- / 2</td>
<td>- / IM</td>
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</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Arthralgia, C-reactive protein increased, Condition aggravated, Fibrin D dimer increased, Joint range of motion decreased, Neutrophil percentage increased, Pain, Platelet count increased, Red blood cell sedimentation rate increased

**SMQs:** Haemorrhage laboratory terms (broad), Arthritis (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: 1/11/21 CRP = 5.5. SED rate = 73, D dimer= 1170, Platelet= 418, Neutrophils= 78,
CDC Split Type:
Write-up: Patient had mild bilateral knee and hip pain 1 month ago, then she received her 1st dose of COVID vaccine on 12/14/20. Her joint pain worsened then on 1/4/21 she received her 2nd dose of COVID vaccine on 1/4/21 and then her pain increased in spread up to her shoulders. She was seen at immediate care on 1/11/21 because her joint pain had worsened throughout and her shoulder pain was making it difficult to raise her arms above the level of her shoulders. Her pain was made worse w/ movement.

VAERS ID: 938425 (history)
Form: Version 2.0
Age: 44.0
Sex: Female
Location: Texas
Vaccinated: 2020-12-30
Onset: 2021-01-06
Days after vaccination: 7
Submitted: 0000-00-00
Entered: 2021-01-12

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<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025L20A / 1</td>
<td>LA / IM</td>
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Administered by: Private
Purchased by: 
Symptoms: Atrial fibrillation, Blood test, Dizziness, Echocardiogram, Electrocardiogram abnormal, Hot flush, Intensive care, Palpitations
SMQs: Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Vestibular disorders (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Zyrtec
Current Illness: None
Preexisting Conditions: None
Allergies: Reglan, Bactrim, Augmentin
Diagnostic Lab Data: EKG, ECHO, blood work all done on 1/6/2021-1/8/2021
CDC Split Type:
Write-up: Woke up on 1/6/2021 with hot flashes, palpitations, dizziness and heart racing. Went to urgent care and they did an EKG which showed A-Fib, so I was sent to the ER and from there, I was transferred to an ICU at a different facility. I stayed until 1/8/2021. No cause was found and no history of A-Fib or family history.

VAERS ID: 938446 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-07
Age: 20.0 Days after vaccination: 1
Sex: Female
Location: Iowa Submitted: 0000-00-00
 Entered: 2021-01-12

Vaccination / Manufacturer Lot / Dose Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) MODERNA 025J20-2A / 1 LA / IM

Administered by: Senior Living Purchased by: ?
Symptoms: Injection site erythema, Injection site swelling, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Fever (103-104 oF) and 4"x1" red, swelling area around site of injection. Pt states she received an IV.
VAERS ID: 938482 (history)  Vaccinated: 2020-12-30
Form: Version 2.0  Onset: 2021-01-01
Age: 61.0  Days after vaccination: 2
Sex: Unknown  Submitted: 0000-00-00
Location: Unknown  Entered: 2021-01-12

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<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025J20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Unknown  Purchased by: ?
Symptoms: Acute respiratory failure, Chronic obstructive pulmonary disease
SMQs: Anaphylactic reaction (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Acute central respiratory depression (narrow), Hypersensitivity (broad), Respiratory failure (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: 
Write-up: Acute approximate respiratory failure secondary to acute COPD

VAERS ID: 938524 (history)  Vaccinated: 2021-01-08
Form: Version 2.0  Onset: 2021-01-11
Age: 43.0  Days after vaccination: 3
Sex: Female  Submitted: 0000-00-00
Location: New York  Entered: 2021-01-12

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<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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</table>
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private     Purchased by: ?
SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Anaphylactic/anaphylactoid shock conditions (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad), Hypokalaemia (narrow)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: mg, vit b complex, calicum with vit D, zyrtec, singulair, klonopin, omeprazole, prednisone
Current Illness: non systemic vasculitis bilat feet
Preexisting Conditions: asthma, seasonal allergies, feet non systemic vasculitis, colon polyps
Allergies: peanuts, tree nuts, compazine, ct dye
Diagnostic Lab Data: cbc, mild elevated wbc, cmp abn low K 2.8, d dimer neg, procalcitonin neg, hcg negative, chest xray negative, mg normal,
CDC Split Type:
Write-up: first day after shot, nausea, body aches, 2nd day Sunday headache, Monday 5 am woke up itching, then 9 am hives everywhere, trouble breathing, anaphylaxis, went to ER, got epi X 2, solumedrol, benadryl, pepcid, then still with hives, tachycardia, dyspnea, iv fluids were influsing and epi drip started, went to ICU

VAERS ID: 938576 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-09
Age: 22.0 Days after vaccination: 3
Sex: Female
Location: New Jersey Submitted: 0000-00-00
 Entered: 2021-01-12
Administered by: Private  
Purchased by: ?
Symptoms: Back pain, Blood test, Computerised tomogram, Deep vein thrombosis, Magnetic resonance imaging, Pulmonary embolism
SMQs: Retroperitoneal fibrosis (broad), Embolic and thrombotic events, venous (narrow), Thrombophlebitis (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: All seafood
Diagnostic Lab Data: CT, MRI, blood test
CDC Split Type:
Write-up: Back pain, bilateral PE and DVT

<table>
<thead>
<tr>
<th>VAERS ID: 938712 (history)</th>
<th>Vaccinated: 2021-01-06</th>
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<tbody>
<tr>
<td>Form: Version 2.0</td>
<td>Onset: 2021-01-07</td>
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<tr>
<td>Age: 36.0</td>
<td>Days after vaccination: 1</td>
</tr>
<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Kansas</td>
<td>Entered: 2021-01-12</td>
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<td>EK9231 / 2</td>
<td>RA / IM</td>
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Administered by: Private  
Purchased by: ?
Symptoms: Blood glucose increased, Gait disturbance, Influenza like illness, Intervertebral disc protrusion, Magnetic resonance imaging spinal abnormal, Muscle fatigue, Muscular weakness, Paraesthesia, Red blood cell sedimentation rate increased, Respiratory rate
SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Anticholinergic syndrome (broad), Parkinson-like events (broad), Guillain-Barre syndrome (broad), Noninfectious encephalopathy/delirium (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Metformin, insulin, lisinopril, omeprazole, atorvastatin, propranolol
Current Illness: DM type II insulin dependent, hypertension, hyperlipidemia
Preexisting Conditions: Reactive airway disease, diabetes mellitus type II, PCOS (polycystic ovarian syndrome), muscle weakness postpartum course of weeks and months. Mother has an autoimmune disease.
Allergies: codeine - hypersensitivity, diphenhydramine - hypersensitivity, iodinated contrast - nausea, trouble breathing, clindamycin - hives
Diagnostic Lab Data: Abnormal labs as follows; blood glucose 206, ESR Westergren 26, MRI of lumbar spine - only abnormal finding was bulging L5S1. Vitals normal except for respiratory rate
CDC Split Type:
Write-up: Patient states that she received her second vaccination and in the hours after she had flu-like symptoms. Then over the next few days, she started to notice tingling and a "prickly" sensation in various areas. This progressed to symmetric BLE weakness which started in her feet and had reached to just above her knees bilaterally time and she arrived. The weakness had progressed to her hips. She also noticed weakness in her arms and they are easily fatigued. She is able to walk but it takes much effort.

**VAERS ID:** 938808 (history)  **Vaccinated:** 2021-01-09
**Form:** Version 2.0  **Onset:** 2021-01-09
**Age:** 52.0  **Days after vaccination:** 0
**Sex:** Female  **Submitted:** 0000-00-00
**Location:** Unknown  **Entered:** 2021-01-12

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<td>037K20A / 1</td>
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Administered by: Private  **Purchased by:** ?
Symptoms: Cough, Cyanosis, Flushing, Hyperhidrosis
SMQs: Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad), Acute central respiratory depression (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: codeine, Combivent
Current Illness:
Preexisting Conditions: Behcet's syndrome, asthma, laryngeal spasms, Guillain-Barre, Raynaud's, GERD, anxiety/depression
Allergies: quinolones, contrast media, linezolid, vancomycin, sulfa, shellfish, daptomycin, tocilizumab
Diagnostic Lab Data:
CDC Split Type:
Write-up: coughing, flushing, cyanosis, diaphoresis

VAERS ID: 938880 (history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-08
Age: 57.0  Days after vaccination: 1
Sex: Male
Location: Virginia  Submitted: 0000-00-00
Entered: 2021-01-12

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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>UNKNOWN / 1</td>
<td>LA / IM</td>
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Administered by: Private  Purchased by: ?
Symptoms: Brain natriuretic peptide increased, C-reactive protein increased, COVID-19 pneumonia, Cardiomegaly, Chest X-ray abnormal, Chest discomfort, Computerised tomogram thorax, Dyspnoea, Fatigue, Fibrin D dimer increased, Haematocrit decreased, Haemoglobin decreased, Impaired work ability, Liver function test, Lung opacity, Metabolic function test, Neutrophil count increased, Pain, Pericardial effusion, Renal function test, Respiratory viral panel, SARS-CoV-2 test positive, Scan with contrast abnormal, Troponin I normal, Urine analysis, White blood cell count normal
SMQs:. Cardiac failure (broad), Anaphylactic reaction (broad), Haematopoietic erythropenia (broad), Haemorrhage laboratory terms (broad), Interstitial lung disease (narrow), Systemic lupus erythematosus (broad), Malignancy related therapeutic and diagnostic procedures (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Prednisone 2mg every other day (Cut from 3mg on 12/16/20) Te
   Prednisone 2mg every other day (Cut from 3mg on 12/16/20) Telmisartan 80mg daily Norvasc
   10mg daily Coreg 25mg BID Bumex 1mg po daily PRN ? not needed recently Aspar
Current Illness: denies
Preexisting Conditions: G6PD positive, HTN, DM, prostate CA, MCD ? steroid dependent,
   chronic renal disease
Allergies: Meloxicam
Diagnostic Lab Data: 1/11/2021: CXR = There is scattered nodular ground glass and
   confluent opacification of the lungs bilaterally, primarily within the posterior regions and lower
   lobes. No evidence of 1/11/2021: CXR = There is scattered nodular ground glass and
   confluent opacification of the lungs bilaterally, primarily within the posterior regions and lower
   lobes. No evidence of pleural effusion or pneumothorax. Findings: no PE, trace pericardial
   effusion with mild generalized cardiomegaly; atypical infectious vs inflammatory etiology, such
   as covid 19 pneumonia. Cta pulmonary arteries w/wo contrast: no PE, same as cxr for
   effusion, pneumonia suggestion. 1/11/2021 Labs: COVID 19 positive, D-Dimer 0.77
   (0.27-0.50), CRP 156.2 (<9.9), RVP panel was all negative; BNP 47, WBC 7.5 with 90
   neutrophils, h/h 11.1/34.6, troponin I <0.012, and has lots of other labs ? CMP, HFT, renal
   panels, UA, etc
CDC Split Type:
Write-up: this 57yo Male ret. He received his first Pfizer covid vaccine on Jan 7th to left arm
   at hospital (not where he works). He went home and reported was fine, but tired. Stated his
   fatigue and onset of shortness of breath began day 1 post vaccine kept him from working. As
   his symptoms worsened, on day 4 (1/11/2021) he obtained a pulse ox and O2 sats were in the
   "80"s" with normal heart rate. He went to ER on 1/11 1507 with body aches, fatigue, chest
   discomfort and SOB where he was ultimately admitted with diagnosis of COVID-19
   pneumonia. Is on O2 support via NC.

VAERS ID: 938958 (history) Vaccinated: 2021-01-12
Form:  Version 2.0 Onset: 2021-01-12
Age: 30.0 Days after vaccination: 0
Sex: Female
Location: Illinois Submitted: 0000-00-00
Entered: 2021-01-12

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<td>- / 1</td>
<td>LA / IM</td>
</tr>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Dizziness, Immediate post-injection reaction
SMQs.: Anticholinergic syndrome (broad), Vestibular disorders (broad), Hypersensitivity
   (narrow)
Life Threatening? No
Birth Defect? No
Immediately after she felt faint, heart rate 121, felt faint again bp 62/33. Was taken to the ER, within a half hour, she fully recovered. Vitals went back to normal.

VAERS ID: 939006
Vaccinated: 2021-01-12
Onset: 2021-01-12
Days after vaccination: 0

COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA
Lot / Dose: - / 1
Site / Route: LA / IM

Administered by: Private
Purchased by: ?

Symptoms: Dizziness, Hypoaesthesia, Pain in extremity, Peripheral coldness
SMQs: Peripheral neuropathy (broad), Anticholinergic syndrome (broad), Guillain-Barre syndrome (broad), Vestibular disorders (broad), Tendinopathies and ligament disorders (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: reaction to HEP B
Other Medications: Vitamins
Current Illness: no
Preexisting Conditions: no
Allergies: Hep B
Diagnostic Lab Data: no
CDC Split Type:
Write-up: Severely dizzy, left hand totally numb but painful, cold to touch. Felt better before she got to ER.

VAERS ID: 939087 (history) Vaccinated: 2021-01-07
Form: Version 2.0 Onset: 2021-01-08
Age: 67.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Indiana Entered: 2021-01-12

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<td>- / UNK</td>
<td>LA / IM</td>
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Administered by: Senior Living   Purchased by: ?
Symptoms: Blood culture negative, Body temperature increased, CSF test normal, Mental status changes, Urine analysis normal, White blood cell count normal
SMQs: Neuroleptic malignant syndrome (broad), Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 5 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Amlodipine, Cholecalciferol, Coumadin, Pantoprazole
Current Illness: Was staying at Rehab Center after having hip surgery after 12/20/2020 but unsure of exact date of surgery.
Preexisting Conditions: Mass on brain, TIAs, Craniotomy 8/2018, HTN, cholecystectomy, appendectomy, tubal ligation, R total hip replacement, Hepatitis years ago, cancer of brain and lung, IVC filter, tonsillectomy
Allergies: NKA
Diagnostic Lab Data: She had a temp of 102 and altered mental status. She had a full septic workup including CSF. It was all neg. Normal WBC, urine, blood cultures and CSF. Normalized and sent back to Rehab.

CDC Split Type:
Write-up: Attempting to confirm which COVID 19 vaccine was given (Moderna or Pfizer). They did not send the record when they sent the patient to General ER the next am. Did not answer the phone.
VAERS ID: 939564 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2021-01-05
Age: 29.0 Days after vaccination: 14
Sex: Female Submitted: 0000-00-00
Location: Ohio Entered: 2021-01-12

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<td>- / 1</td>
<td>LA / IM</td>
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Administered by: Private  Purchased by: ?
Symptoms: Abdominal pain upper, Computerised tomogram abdomen abnormal, Computerised tomogram pelvis abnormal, Lipase increased, Magnetic resonance cholangiopancreatography, Nausea, Pancreatitis acute
SMQs: Acute pancreatitis (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Lexapro 20mg daily, Wellbutrin 300mg daily, Zyrtec OTC
Current Illness: None
Preexisting Conditions: Allergies: Peanuts
Diagnostic Lab Data: Lipase on 1/5/2020 was $g1800 CT on 1/5/2020 of the abdomen/pelvis showed pancreatitis MRCP on 1/5/2020 was negative
CDC Split Type: Write-up: On 1/5/2020, I, the patient woke up at 3:30 with sharp boring epigastric pain. Progressed to include nausea. On evaluation in the ED was diagnosed with acute pancreatitis. Prior hx includes 2 episodes with hospitalization for gallstone pancreatitis in 2016. Subsequently had laparoscopic cholecystectomy in 2016. Last alcoholic beverage prior to 2020 ED presentation was 3 weeks prior. No tobacco or drug use.

VAERS ID: 963164 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-29
Age: 49.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Unknown Entered: 2021-01-12
VAERS ID: 1402179 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2020-12-29
Age: 49.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Unknown Entered: 2021-01-12

Administered by: Other  Purchased by: ?
Symptoms: Cardiac failure congestive, Diabetes mellitus, Hyperglycaemia, Hypertension, Pyrexia, Tachycardia, Tachypnoea
SMQs: Cardiac failure (narrow), Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Hypertension (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad), Immune-mediated/autoimmune disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: Fever, Tachypnea, HYPERtension, Tachycardia & HYPERglycemia Narrative: Was inpatient overnight in a telemetry until. DC with diagnosis of DM and CHF
syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Hypertension (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad), Immune-mediated/autoimmune disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations: No
Other Medications: No
Current Illness: No
Preexisting Conditions: No
Allergies: No
Diagnostic Lab Data: No
CDC Split Type: No
Write-up: Fever, Tachypnea, HYPERtension, Tachycardia & HYPERglycemia Narrative: Was inpatient overnight in a telemetry until. DC with diagnosis of DM and CHF

VAERS ID: 939629 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-06
Age: 79.0 Days after vaccination: 1
Sex: Female
Location: Louisiana Submitted: 0000-00-00
Entered: 2021-01-13

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>L27L20A / 1</td>
<td>RA / SYR</td>
</tr>
</tbody>
</table>

Administered by: Private      Purchased by: ?
Symptoms: Asthenia, Blood creatinine increased, Blood glucose normal, Blood potassium increased, Blood urine present, Confusional state, Culture urine, Diarrhoea, Fatigue, Haematocrit decreased, Haemoglobin decreased, Nausea, Pollakiuria, Pyrexia, Urinary incontinence, Vomiting
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Acute pancreatitis (broad), Haematopoietic erythropenia (broad), Haemorrhage terms (excl laboratory terms) (narrow), Haemorrhage laboratory terms (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Dementia (broad), Pseudomembranous colitis (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Chronic kidney disease (broad), Noninfectious diarrhoea (narrow), Tumour lysis syndrome (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Amlodipine 10mg/day, Eliquis 2.5mg/day, Cyanocobalamine 1000mg
Gabapentin 300/day, Lisinopril, 40mg/day, Metformin 500mg XR/day, Lopressor 25mg/day,
Zofran 4mg/day, Protonix 40mg/day
Current Illness: Anticoagulant use, arthritis, asthma, AFib, bacteremia, CHG, ILumbar
fractures, COPD, DM, DVT, Abcess, lung CA, Lupus, MRSA, Osteoporosis, PVD, Psoriasis,
Sjorgrens, stroke, venous insufficiency of leg
Preexisting Conditions: See extensive list
Allergies: Bactrim, Codeine, Methotrexate, PCN, Sulfamethox
Diagnostic Lab Data: Hgb 9.1, HCT 29.8, Gluc 113, K+ 5.4, Cr. 2.0, urine culture taken
CDC Split Type:
Write-up: The patient presented to hospital on 1/6/2021 with a primary complaint of Fatigue
(pt had covid vaccine yesterday. Now displaying increased weakness, blood in urine,
increased confusion and urinated on herself today. Fever of 101.9 ) 79-year-old female
presents to the emergency room with fatigue. The patient states yesterday she had the
Moderna COVID-19 The patient states today she had a temperature 101.8? prior to arrival.
Her son noted that she was having episodes of urinary frequency and also that she was
profoundly weak and fatigued. They denied falling or hitting her head. The patient also states
she been having nausea vomiting with diarrhea.

VAERS ID: 939654 (history)
Form: Version 2.0
Age: 53.0
Sex: Male
Location: Virginia
Vaccinated: 2020-12-23
Onset: 2021-01-07
Days after vaccination: 15
Submitted: 0000-00-00
Entered: 2021-01-13

<table>
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<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EH9899 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private
Purchased by: ?
Symptoms: Platelet count decreased, Platelet transfusion
SMQs: Haematopoietic thrombocytopenia (narrow), Systemic lupus erythematosus (broad),
Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Allpurinol 100mg/day, amLopidine-olmesartan 4-40mg, atorvastatin
  40mg
Current Illness:
Preexisting Conditions: fatty liver
Allergies: seasonal allegeries
Diagnostic Lab Data:
CDC Split Type:
Write-up: Vaccine was given on 12/23/20 on 01/07.21 went to get a routine physical and
received an emergency call that my pallet blood count was around 10K instead of 150k. Was
instructed to go to the ER asap. However didn"t received the message until the next morning
at 6:30am. Was checked into the E.R. , given sterioids, pallets, hemogolibin. Stayed overnight
in the hospital was able to leaved the next day around 1pm with pallets at 47k.

VAERS ID: 940067 (history)  Vaccinated: 2021-01-04
Form: Version 2.0  Onset: 2021-01-05
Age: 93.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Minnesota  Entered: 2021-01-13

<table>
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<tr>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>026L20A / 1</td>
<td>AR / IM</td>
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</tbody>
</table>

Administered by: Senior Living  Purchased by: ?
Symptoms: Dyspnoea, Hypotension, Pyrexia
SMQs:; Anaphylactic reaction (narrow), Neuroleptic malignant syndrome (broad),
Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary
hypertension (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic
symptoms syndrome (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: Painful Lower right tooth
Preexisting Conditions: None
Allergies: None
Diagnostic Lab Data: 1/11/21: ESR 74/CRP 156. CT neck soft tissue 3x2cm L neck necrotic mass with significant inflammatory surrounding changes level 2. blood cultures negative, lactate negative, CBC, CMP unremarkable

VAERS ID: 940351 (history)  Vaccinated: 2021-01-05
Form: Version 2.0  Onset: 2021-01-11
Age: 62.0  Days after vaccination: 6
Sex: Female
Location: New York  Submitted: 0000-00-00
 Entered: 2021-01-13

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20-2A / 1</td>
<td>LA / IM</td>
</tr>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Abscess neck, Blood culture negative, Blood lactic acid normal, C-reactive protein increased, Chills, Computerised tomogram neck, Dysphagia, Dysphonia, Full blood count normal, Headache, Inflammation, Malaise, Metabolic function test, Necrosis, Pyrexia, Red blood cell sedimentation rate increased, Swelling
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Parkinson-like events (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: None
Current Illness: Systemic: Fever-Severe, Systemic: hypotension, dyspnea-Severe; symptoms lasted 1 day
Write-up: Systemic: Fever-Severe, Systemic: hypotension, dyspnea-Severe; symptoms lasted 1 day
CDC Split Type:
Write-up: Patient day after vaccination had fever, chills, headache and malaise but recovered the next day. Starting four days after vaccination started to have left neck swelling. Of note, day prior vaccination had left wisdom teeth removal and maxillary root canal. 1 week after vaccination and 8 days after oral procedures worsening left neck swelling, trouble swallowing"s and change voice found resulting left neck 3x2cm necrotic neck abscess and significant neck inflammation. Patient was seen by ENT and started on IV Unysan and admitted for airway monitoring due to swelling with improvement over next 48 hours.

VAERS ID: 940367 (history)
Form: Version 2.0
Age: 53.0
Sex: Female
Location: Florida
Vaccinated: 2020-12-23
Onset: 2020-12-23
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2021-01-13

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<tr>
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<td>EK9231 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private
Purchased by: ?

Symptoms: Blood pressure increased, Cardiac monitoring, Chest discomfort, Dizziness, Feeling abnormal, Headache, Laboratory test normal, Malaise, Muscle spasms

SMQs:; Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Dystonia (broad), Hypertension (narrow), Vestibular disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
  Extended hospital stay? No

Previous Vaccinations:
Other Medications: FIORICET, SUMATRIPTAN
Current Illness: NONE
Preexisting Conditions: CLUSTER MIGRAINES,
Allergies: NONE
Diagnostic Lab Data: CARDIAC WORK AND LAB RESULTS ARE NOT AVAILABLE-
PATIENT REPORTS ALL TESTS AND LABS WERE NORMAL.

CDC Split Type:
Write-up: 12/23/2020-RECEIVED VACCINE AT 9:52 AM. REPORTS NOT FEELING WELL IN THE AFTERNOON, LIGHTHEADED AND DIZZY, THROBBING HEADACHE, CRAMPING/ACHING IN BACK OF CALVES. 12/24/2020 CONTINUED WITH DIZZINESS, THROBBING HEADACHE, BLOOD PRESSURE ELEVATED, CHEST PRESSURE 8:00 PM
REPORTED FEELING THAT SHE WAS GOING TO DIE, WENT TO LAKE CITY MEDICAL CENTER- BLOOD PRESSURE ON ARRIVAL 184/101 HR. 117. GIVEN NITRO AND MEDICATIONS. ADMITTED, DISCHARGED 48 HOURS LATER ON 12/26/2020. DISCHARGED ON BLOOD PRESSURE MEDICATION 12/27/2020-LESS THAN 24 HOURS AFTER BEING DISCHARGED SHE WAS READMITTED TO MEDICAL CENTER WITH SAME SYMPTOMS. 36 HOURS AFTER ADMISSION, TRANSFERRED TO MEDICAL CENTER. FOR CARDIC WORKUP AND HIGHER LEVEL OF CARE.

VAERS ID: 940438 (history) Vaccinated: 2021-01-08
Form: Version 2.0 Onset: 2021-01-09
Age: 88.0 Days after vaccination: 1
Sex: Female
Location: Nebraska Submitted: 0000-00-00
Entered: 2021-01-13

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Administered by: Private Purchased by: ?
Symptoms: Blood lactic acid increased, Chest X-ray abnormal, Chills, Culture negative, Hypotension, Lung hyperinflation, Nausea, Urine leukocyte esterase, Vomiting, White blood cell count increased
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Asthma/bronchospasm (broad), Lactic acidosis (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Dehydration (broad), Hypokalaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Oxybutynin Levothyroxine Meloxicam Metoprolol Pantoprazole ASA Tylenol PM Potassium Acetate Calcium Carbonate Glucosamine
Current Illness: Urinary Incontinence (UA negative 12/29/2020)
Preexisting Conditions: Hearing Loss Hyperlipidemia Hypothyroidism Osteoarthritis Osteopenia Urinary Incontinence
Allergies: Naproxen
Diagnostic Lab Data: 1.9.2021 Lactic Acid 3 WBC 19 Urine with Moderate Leuk. Est. Few Bacteria, WBC 65-70. Sent for culture (Culture negative) B/P 84/50, 96/58, 104/64, 96/60 Chest X-ray Chronic Mild hyperinflation with coarse interstitial markings. No focal consolidation, pleural effusions, or pneumothorax 1/10/2021 WBC 13.97
CDC Split Type:
Write-up: Had Covid Vaccine AM of 1.8.2021. Woke up with Nausea, Vomiting X 4, Chills the following AM. Presented to ED. Found to be hypotensive during ER. Nausea Vomiting resolved. Tx with fluid replacement and dismissed home instructed to monitor BP. B/P dropped again at home returned and admitted to hospital.

<table>
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<tr>
<th>VAERS ID: 940470 (history)</th>
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<tr>
<td>Form: Version 2.0</td>
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<tr>
<td>Age: 94.0</td>
<td>Days after vaccination: 0</td>
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<tr>
<td>Sex: Female</td>
<td>Submitted: 0000-00-00</td>
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<tr>
<td>Location: Iowa</td>
<td>Entered: 2021-01-13</td>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living    Purchased by: ?
Symptoms: Blood pressure decreased, Headache, Heart rate decreased, Injection site pain, Oxygen saturation decreased, Pain
SMQs: Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Acute central respiratory depression (broad), Extravasation events (injections, infusions and implants) (broad), Respiratory failure (broad), Infective pneumonia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
    Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Unknown
Diagnostic Lab Data:
CDC Split Type:
Write-up: Site: Pain at Injection Site-Medium, Systemic: Generalized Body Aches -Severe, Systemic: Headache-Severe, Systemic: Severe drop in blood pressure, pulse, and o-sat-Severe
VAERS ID: 940519 (history) Vaccinated: 2021-01-12
Form: Version 2.0 Onset: 2021-01-12
Age: 33.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Indiana Entered: 2021-01-13

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<td>COVID19 COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>- / -</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Chest X-ray normal, Computerised tomogram head normal, Echocardiogram, Electrocardiogram normal, Hypoaesthesia, Laboratory test normal, Magnetic resonance imaging brain, Paraesthesia, Tachycardia, Ultrasound Doppler
SMQs: Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Dehydration (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: norethindrone 0.35 mg tab
Current Illness: none
Preexisting Conditions: none
Allergies: NKDA
Diagnostic Lab Data: Patient currently admitted for TIA workup as part of differential diagnosis. Will likely discharge today. All tests so far negative, MRI brain pending for today. Testing done so far: CT head without contrast, carotid doppler, chest xray, EKG, TTE all done on 01/12/21
CDC Split Type:
Write-up: Patient reported symptoms started ~15 mins s/p dose. Symptoms reported LUE and LLE numbness/tingling, and notable tachycardia

VAERS ID: 940651 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2020-12-23
Age: 46.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Tennessee Entered: 2021-01-13
**VAERS ID:** 940708 (history)  
**Vaccinated:** 2020-12-30  
**Onset:** 2021-01-01  
**Days after vaccination:** 2  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-13

**Vaccination / Manufacturer**  
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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>RA / SC</td>
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</table>

**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:**  
Computerised tomogram normal, SARS-CoV-2 test negative, Seizure, Status epilepticus, Urine analysis abnormal, Vomiting

**SMQs:**  
Acute pancreatitis (broad), Systemic lupus erythematosus (broad), Convulsions
(narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad), COVID-19 (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Lysinopril, Lipitor, Limictal, tegratol, lexapro, eiquis, careg, prilosec, torsamid, B12, Vit D. Tylenol, lexapro

Current Illness: Epilepsy. High BP,
Preexisting Conditions: Epilepsy
Allergies: None

Diagnostic Lab Data: CT scan negative for blood clot or stroke. UTI tested negative on friday Jan. 1 Tested postive on Monday January 3rd. Arrived at the hospital with a BP of 221/98. 96.6 temp. 02 93% Tested Negative for Covid

CDC Split Type:

Write-up: Jan 1st, patient had a seizure after breakfast. Temperature was 98.5 Pulse 95. B.P. 160/70 Two hours later another seizure at the home, with emesis, Sent to hospital at 2pm. Focal Status elepticus. Seizure activity along with continuous persistent activity with emesis throughout the 12 hour time in the ED. Seizure during the CT scan.

VAERS ID: 940792 (history)
Form: Version 2.0
Age: Days after vaccination: 0
Sex: Female
Location: Massachusetts

Vaccinated: 2021-01-05
Onset: 2021-01-05
Submitted: 0000-00-00
Entered: 2021-01-13

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<td>- / 1</td>
<td>LA / OT</td>
</tr>
</tbody>
</table>

Administered by: Other
Purchased by: ?

Symptoms: Hypertension
SMQs:, Neuroleptic malignant syndrome (broad), Hypertension (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: Test Name: BP (Blood pressure); Result Unstructured Data: Test Result:180/94; Comments: BP 180/94/vaccine given on 05Jan2021 at 10:30 am, by 10:45am BP was 180/94; Test Date: 20210105; Test Name: BP (Blood pressure); Result Unstructured Data: Test Result:202/110; Comments: (Hospital name) where her pressure was 202/110 /Sister took her home but made her go to the hospital where her BP rose to 202/110
CDC Split Type: USPFIZER INC2021010117
Write-up: high blood pressure within 15 min post vaccination. BP 180/94/BP rose to 202/110; This is a spontaneous report from a contactable nurse. An adult female (age:18-64 Years) patient (pregnant: No) received first dose of BNT162B2 (Pfizer), intramuscularly in left arm on 05Jan2021 10:30 at single dose for COVID-19 immunization. The patient"s medical history was not reported. The patient was received other concomitant drugs. The patient experienced high blood pressure within 15 min post vaccination. BP (blood pressure) 180/94 rose to 202/110 on 05Jan2021 10:45. The event resulted in doctor or other healthcare professional office/clinic visit, Emergency room/department or urgent care. The events were reported as non-serious. Recipient experienced high blood pressure within 15 min post vaccination. Went to hospital where her pressure was 202/110, vaccine given on 05Jan2021 at 10:30 am, by 10:45 am BP was 180/94, recipient refused hospitalization. Sister took her home but made her go to the hospital where her BP rose to 202/110. IV (intravenous) steroids given. The outcome of event was resolved in Jan2021. The patient didn't receive any other vaccines within 4 weeks prior to the COVID vaccine. The medications the patient received within 2 weeks of vaccination: Protein drink. Unknown whether was the patient diagnosed with COVID-19 prior to vaccination. Unknown whether the patient been tested for COVID-19 Since the vaccination. Unknown allergies to medications, food, or other products. Information on the lot/batch number has been requested.; Sender"s Comments: Based on temporal association, a possible contributory role of BNT162B2 cannot be excluded for reported event hypertension. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

VAERS ID: 940819 (history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-07
Age: 21.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Kansas  Entered: 2021-01-13
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Other
Purchased by: ?
Symptoms: Cough, Dizziness, Pharyngeal swelling, Throat irritation
SMQs: Anaphylactic reaction (broad), Angioedema (narrow), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Vestibular disorders (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: LAMICTAL
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Bipolar disorder; Cushing's disease (recovering)
Allergies:
Diagnostic Lab Data:
CDC Split Type: USPFIZER INC2021014015
Write-up: dizzy; itchy throat; coughing; swollen throat; This is a spontaneous report from a contactable pharmacist. A 21-year-old female patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, Batch/lot number: EL0142, NDC number: 59267-1000-1; Expiry Date: Mar2021), via an unspecified route of administration on 07Jan2021 11:20 at 0.3 mL, single at left arm for vaccination. Medical history included Cushing's disease (recovering), bipolar disorder from an unknown date and unknown if ongoing. Concomitant medication included lamotrigine (LAMICTAL) for bipolar disorder. On 07Jan2021, looked like after receiving the vaccine about 30 minutes later patient was standing and felt like dizzy. About 15 or 20 more minutes, or 45-50 minutes after received injection, she felt like itchy throat, then itchy throat triggered coughing, then she felt like swollen throat. For the treatment on scene patient was administered 50mg of diphenhydramine hydrochloride (BENADRYL) and when she complained of swollen throat was administered epinephrine (EPI-PEN) 0.3mg injection to right thigh. Then they called EMS who transported her to the hospital where she was admitted to the hospital. Outcome of events was unknown. This report was considered as serious per caused/prolonged hospitalization. Causality: Cannot jump to that conclusion.; Sender"s Comments: Based on temporal association, the causal relationship between bnt162b2 and the events dizziness, throat irritation, cough and pharyngeal swelling cannot be excluded. The information available in this report is limited and does not allow a medically meaningful assessment. This case will be reassessed once additional information becomes available. The impact of this report on
the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety
evaluation, including the review and analysis of aggregate data for adverse events. Any safety
concern identified as part of this review, as well as any appropriate action in response, will be
promptly notified to Regulatory Authorities, Ethics Committees, and Investigators, as
appropriate.

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**VAERS ID:** 940956 (history)  
**Vaccinated:** 2021-01-05  
**Onset:** 2021-01-07  
**Days after vaccination:** 2  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-13

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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / UNK</td>
<td>- / -</td>
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</table>

**Administered by:** Unknown  
**Purchased by:** ?

**Symptoms:** Atrial fibrillation, Feeling abnormal

**SMQs:** Supraventricular tachyarrhythmias (narrow), Dementia (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No

**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:**

**Preexisting Conditions:**

**Allergies:**

**Diagnostic Lab Data:**

**CDC Split Type:** USPFIZER INC2021018648

**Write-up:** Patient admitted for a fib; This is a spontaneous report from a contactable consumer. A female patient in her 70s received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection) lot number was unknown, via an unspecified route of administration on 05Jan2021 at a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. It was reported that the patient received vaccine on Tuesday, 05Jan2021. On Thursday, 07Jan2021, patient did not feel good-pulse and blood pressure. It was mentioned that the patient admitted for a fib. Two days after receiving Pfizer-BioNTech Covid 19 vaccine, the woman patient in her 70s was admitted for a fib. Information about lot/batch number has been requested.
**VAERS ID:** 940990  (history)  **Vaccinated:** 2020-12-31  
**Form:** Version 2.0  **Onset:** 2020-12-31  
**Age:** 45.0  **Days after vaccination:** 0  
**Sex:** Female  **Submitted:** 0000-00-00  
**Location:** Washington  **Entered:** 2021-01-13

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<td>EH9899 / UNK</td>
<td>LA / IM</td>
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</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Chest discomfort, Dizziness, Flushing, Malaise, Pallor, Palpitations

**SMQs:** Anaphylactic reaction (narrow), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Cardiomyopathy (broad), Vestibular disorders (broad), Hypotonic-hyporesponsive episode (broad), Hypersensitivity (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No  

**Previous Vaccinations:**  
**Other Medications:**  
**Current Illness:**  
**Preexisting Conditions:**  
**Allergies:** Amoxicillin, Bee Stings  
**Diagnostic Lab Data:**  
**CDC Split Type:**  

**Write-up:** Vaccine administered at 08:16--08:25 patient c/o feeling unwell and dizzy 87, 143/84, 18, 100%; 08:28: Pt c/o dizzy & chest tightness, appeared pale, monitoring; 08:34: Pt c/o increased chest tightness 130, 144/81, 22, 100% monitoring 08:36: Epinephrine .3mg given IM to R thigh, pt. reported flushing, pounding heart, 911 called; 08:40: Pt flushed.

**VAERS ID:** 941217  (history)  **Vaccinated:** 0000-00-00  
**Form:** Version 2.0  **Onset:** 0000-00-00  
**Age:** Unknown  **Submitted:** 0000-00-00  
**Sex:** Unknown  **Entered:** 2021-01-13

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<th>Lot / Dose</th>
<th>Site / Route</th>
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</table>
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Unknown    Purchased by: ?
Symptoms: Malaise, Skin discolouration, Ultrasound scan normal
SMQs: Hypotonic-hyporesponsive episode (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 14 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: Test Name: ultrasound; Result Unstructured Data: Test Result: Unknown results
CDC Split Type: USPFIZER INC2021021179
Write-up: My right leg from the knee down was purple and they thought I have a blood clot; My right leg from the knee down was purple and they thought I have a blood clot; This is a spontaneous report from a non-contactable consumer (patient). A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The patient medical history and concomitant medications were not reported. Three days after vaccination the patient felt very sick and he/she was so bad that he/she thought he/she might die with outcome of recovered after one week. The patient reported also that on unknown date his/her right leg from the knee down was purple and they thought he/she have a blood clot, due to which the patient was hospitalized for 14 days. The patient ended in the hospital because his/her right leg from the knee down was purple and they thought he/she have a blood clot but they did an ultrasound that was not the case but they put he/she on antibiotic. The patient was still taking them but his/her leg has got better. No follow-up attempts are possible. Information about lot/batch number cannot be obtained. No further information is expected.

VAERS ID: 941246 (history)    Vaccinated: 2020-12-24
Form: Version 2.0    Onset: 2020-12-27
Age: 68.0    Days after vaccination: 3
Sex: Male
Location: Texas
Submitted: 0000-00-00
Entered: 2021-01-13
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA 037K20A / UNK LA / IM

Administered by: Private  Purchased by: ?
Symptoms: COVID-19, Chest X-ray abnormal, Dyspnoea, Fibrin D dimer normal, Lung infiltration, Lung opacity
SMQs: Anaphylactic reaction (broad), Interstitial lung disease (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: DM2
Allergies:
Diagnostic Lab Data: see above
CDC Split Type:
Write-up: Covid symptoms began 2-3 days after shot. Presented to ER day 11 day after positive with extreme dyspnea O2 Sat at 88% Chest xray opacities throughout the bilateral hemithoraces would suggest multifocal infiltrate Admitted on high flow oxygen reduced to 6 liters currently D-dimer is $g35.20

VAERS ID: 941361 (history)  Vaccinated: 2020-12-21
Form: Version 2.0  Onset: 2020-12-22
Age: 59.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: Massachusetts  Entered: 2021-01-13

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<td>EK5730 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Blood pressure decreased, Blood pressure immeasurable, Body temperature decreased, Computerised tomogram, Depressed level of consciousness, Diarrhoea, Full blood count, Hyperhidrosis, Malaise, Metabolic function test, Nausea, Syncope, Vomiting
SMQs: Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Acute
pancreatitis (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Pseudomembranous colitis (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Generalised convulsive seizures following immunisation (broad), Noninfectious diarrhoea (narrow), Hypoglycaemia (broad), Dehydration (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Labetalol, Buspirone, Rosuvastatin, Levothyroxine, Lisinopril, Bupropion, Gabapentin, Rabeprazole, Probiotic, Vitamin D, Cevimeline, Scopolamine

Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: 12/21/2020 CBC, metabolic panel, CT scan

Write-up: Went to bed not feeling well. My husband came to check on me approx. 12:30 am. He was unable to arouse me. When he tried to get me up out of bed I collapsed and then had syncopal episode. He call 911. Paramedics could not get blood pressure and I was diaphoretic and body temp was cold. They rushed me to the hospital. My blood pressure was dangerously low along with my body temperature. I was given epinephrine and LEVOPHED to get a blood pressure. I was warmed up. Then I had GI issues of vomiting, diarrhea, nausea. I spend 4 days in hospital.

VAERS ID: 941401 (history)
Form: Version 2.0
Age: 99.0
Sex: Female
Location: California

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<td>2021-01-13</td>
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Administered by: Senior Living  
**Purchased by:** ?

**Symptoms:** Asthenia, Atrial fibrillation, Dysarthria, Electrocardiogram abnormal, Magnetic resonance imaging brain abnormal, Mental status changes, Thalamic infarction

**SMQs:** Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Ischaemic central nervous system vascular conditions (narrow), Dementia (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Hypoglycaemia (broad)

**Life Threatening?** Yes

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** Yes

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, 2 days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Levothyroxine

**Current Illness:** None

**Preexisting Conditions:** hypothyroidism, secondary hyperparathyroidism, chronic kidney disease stage 3

**Allergies:** None

**Diagnostic Lab Data:** MRI 1/11/21: acute infarct in the right medial thalamus EKG 1/11/21: atrial fibrillation

**CDC Split Type:**

**Write-up:** Patient is a 99yr old female who got a covid vaccine in the afternoon of 1/10/21 and woke up in the morning of 1/11/21 with altered mental status, weakness, and dysarthria. She was taken from her assisted living facility to the hospital and MRI showed a small stroke in the right medial thalamus. She was also found to have new onset atrial fibrillation. She was treated appropriately for both conditions and discharged to a skilled nursing facility on 1/13/21.
Symptoms: Dyspnoea, Feeling abnormal
SMQs: Anaphylactic reaction (broad), Dementia (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: COPD, CHF, HTN, hyperlipidemia
Allergies: 
Diagnostic Lab Data: 

Write-up: Pt was accompanied by daughter, who drove pt to clinic. Pt was correctly identified, screened, given vaccine, monitored for appropriate time. Pt left clinic as passenger of vehicle and was being driven by daughter. Pt started complaining of Shortness of breath and not feeling right.. Daughter brought pt to local emergency room, Pt was later transferred to higher care hospital. Information regarding symptoms and further medical care was relayed to clinic by family member.

VAERS ID: 941476 (history) 
Form: Version 2.0 
Age: 45.0 
Sex: Male 
Location: Florida 
Vaccinated: 2020-12-28 
Onset: 2020-12-28 
Days after vaccination: 0 
Submitted: 0000-00-00 
Entered: 2021-01-13 

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<tr>
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<td>011J20A / 1</td>
<td>RA / IM</td>
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Administered by: Private 
Purchased by: ?

Symptoms: Angiogram, Chills, Computerised tomogram, Hemianopia, Intensive care, Ischaemic stroke, Magnetic resonance imaging, Malaise, Migraine, Nausea, Pyrexia
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Ischaemic central nervous system vascular conditions (narrow), Embolic and thrombotic events, arterial (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Optic nerve disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 6 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Valacyclovir 1gm daily Spirinolactone 100mg TID Januva 100mg 1 daily Glimepiride 2mg BID Elmiron 100mg TID Lisinopril 20mg once daily Escitalopram 10mg once daily
Current Illness:
Preexisting Conditions: Diabetes Morbid obesity Hypertension Herpes
Allergies: None
Diagnostic Lab Data: CT CT Angio MRI/MRA
CDC Split Type:
Write-up: Patient received vaccine in afternoon of 12/28. She works in ER as housekeeper 7pm-7am. The day she received the vaccine she became ill with fever chills and nausea and left work at 2am. On 12/31 she developed hemianopia. She went to ER and they did CT scan. She was told it was complex migraine. She left and came Home. On 1/1/21 her vision was back to normal. On 1/3 she suffered bilateral cerebellum ischemic stroke. She is currently in medical center. In Trauma.

VAERS ID: 941499 (history) Vaccinated: 2021-01-11
Form: Version 2.0 Onset: 2021-01-11
Age: 36.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: California Entered: 2021-01-13

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<td>EL1283 / 1</td>
<td>UN / IM</td>
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Administered by: Work Purchased by: ?
Symptoms: Chest pain, Electroencephalogram normal, Feeling hot, Hyperventilation, Muscular weakness, Sinus tachycardia, Syncope, Tachycardia, Unresponsive to stimuli SMQs:, Torsade de pointes/QT prolongation (broad), Rhabdomyolysis/myopathy (broad), Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Peripheral neuropathy (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypotonic-hyposesponsive episode (broad), Hypoglycaemia (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: None
Diagnostic Lab Data: 1/12/21 EEG normal
CDC Split Type:
Write-up: Patient experienced a syncopal episode post vaccination, accompanied by feeling hot and tachycardic. Prior to the syncope, she reported hyperventilating. She remained unresponsive for about 10 minutes and was brought to the ED. There she became responsive, and reported chest pain and had sinus tachycardia episodes. She also had lower extremity weakness. This has improved per the latest neurology notes. She also had a negative EEG. Unsure if this is an allergic reaction or if the syncope was due to hyperventilation. Patient is currently on day 3 of hospitalization.

VAERS ID: 941503 (history)  Vaccinated: 2021-01-04
Form: Version 2.0  Onset: 2021-01-05
Age: 90.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: South Carolina  Entered: 2021-01-13

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<td>025J20A / 1</td>
<td>LA / IM</td>
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Administered by: Senior Living  Purchased by: ?
Symptoms: Headache, Memory impairment, Mydriasis
SMQs: Anticholinergic syndrome (broad), Dementia (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Depression (excl suicide and self injury) (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness: None
Preexisting Conditions: Hypothyroid, environmental allergies
Allergies: Environmental
Diagnostic Lab Data: Head CT with and without contrast - normal CTA Head and Neck _ normal Blood work all normal Lumbar Puncture- Clearly showed viral meningitis. Film Array Meningitis/Encephalitis all negative for bacteria, viruses and fungi. HIV -negative UA with culture- normal and negative. aPTT, PT- normal UHCG - negative Covid- negative FLU A/B- negative
CDC Split Type:
Write-up: 2 Hours after the injection, my arm hurt so bad I could not raise it laterally. This continued for 3 days. After that I felt tired and achy until Jan 4th, I had chills and whole body aches. I came home from work, took the next day off. Feeling better, I worked 3 more days and developed the worst headache of my life. I consulted my PCP and went to the emergency room. I was diagnosed with viral meningitis and admitted to the hospital for 3 days.

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VAERS ID: 941633 (history) Vaccinated: 2021-01-08
Form: Version 2.0 Onset: 2021-01-09
Age: 75.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: North Carolina Entered: 2021-01-13

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<td>011J20A / 1</td>
<td>RA / IM</td>
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Administered by: Public   Purchased by: ?
Symptoms: Asthenia, Injection site swelling, Myalgia
SMQs: Rhabdomyolysis/myopathy (broad), Guillain-Barre syndrome (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Eosinophilic pneumonia (broad), Tendinopathies and ligament disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: hypertension spinal stenosis
Allergies: none known
Diagnostic Lab Data:
CDC Split Type:
Write-up: The morning following COVID-19 vaccination, patient"s right shoulder had swelling, generalized weakness and myalgia. Hospitalized for 2 days, received intravenous fluids and bedrest, and acetaminophen. He was prostrate for 2 days.
VAERS ID: 941641 (history) Vaccinated: 2020-12-01
Form: Version 2.0 Onset: 2021-01-02
Age: 44.0 Days after vaccination: 32
Sex: Female Submitted: 0000-00-00
Location: Florida Entered: 2021-01-13

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<td>EH9899 / 1</td>
<td>LA / IM</td>
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Administered by: Private  Purchased by: ?
Symptoms: Angiogram cerebral normal, Aphasia, Arteriogram carotid normal, Computerised tomogram head normal, Electroencephalogram normal, Electromyogram normal, Feeling abnormal, Hypoaesthesia, Laboratory test normal, Magnetic resonance imaging brain normal, Magnetic resonance imaging neck, Magnetic resonance imaging spinal normal, Muscular weakness
SMQs: Rhabdomyolysis/myopathy (broad), Peripheral neuropathy (broad), Dementia (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: see above. hospitalized jan 7-jan 9
CDC Split Type:
Write-up: numbness to forearm then to lower leg that then took on a dermatomal pattern, brain fog w word finding issues that progressively worsened, LLE weakness. ct brain neg. MRI/MRA head and neck neg. labs neg. MRI of c spine t spine l spine s spine neg. emg and eeg neg. discharged from hospital. symptoms fluctuating. slowly improving.
VAERS ID: 941740 (history) Vaccinated: 2020-12-30
Form: Version 2.0 Onset: 2021-01-11
Age: 66.0 Days after vaccination: 12
Sex: Female
Location: Oklahoma Submitted: 0000-00-00
 Entered: 2021-01-13

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<td>025J20-2A / 1</td>
<td>RA / IM</td>
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Administered by: Public Purchased by: ?
Symptoms: Chest X-ray abnormal, Chills, Cough, Dyspnoea, Fatigue, Headache, Influenza virus test negative, Oxygen saturation decreased, Pneumonia, Pyrexia, SARS-CoV-2 test negative, White blood cell count decreased
SMQs: Anaphylactic reaction (broad), Haematopoietic leukopenia (narrow), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Infective pneumonia (narrow), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days Extended hospital stay? No
Previous Vaccinations:
Other Medications: Lexapro 20 mg daily, VitD 3 50,000 units twice daily, ASA 81 mg daily, NovoLog 100units s/s, Lantus 30 u BID, Pantoprazole 40 mg daily, Synthroid .05 mg daily, clopidolgrel 75 mg, daily, Hydorchlorothiazide-Losartan 12.5100 mg daily, Ator
Current Illness:
Preexisting Conditions: IDDM, Type1, HTN ,Migraine HA
Allergies: cipro, Morphine, Flagyl, Augmentin
Diagnostic Lab Data: 01/05/2021 WBC 2800, COVID negative, 01/07/2021 WBC 3300, COVID and FLU negative. 01/11/2021 WBC 4500, COVID negative, CXR revealed Pneumonia.
CDC Split Type:
Write-up: Presented to MD"S office on 01/05/2021 with cough, HA, fever 101.9, chills, and fatigue. Returned on 01/07/2021 with no improvement. Returned on 01/11/2021 with fatigue, elevated temp 101.2, SOB, 02 Sat at 90%, Rocephin 1G IM administered, CXR revealed pneumonia. MD received call from patients husband stating worsening 02 Sat levels at 81-82%. Was transferred to hospital and admitted with pneumonia.
VAERS ID: 941937
Form: Version 2.0
Age: 59.0
Sex: Female
Location: Illinois
Vaccinated: 2021-01-12
Onset: 2021-01-12
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2021-01-13

Vaccination / Manufacturer | Lot / Dose | Site / Route |
---|---|---|
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 012L20A / 1 | LA / IM |

Administered by: Private
Purchased by: ?
Symptoms: Chest pain, Dysphonia, Dyspnœa
SMQs: Anaphylactic reaction (broad), Parkinson-like events (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: Codiene, Compazine, Macrobid, Sulfa Drugs, traMADol
Diagnostic Lab Data:
CDC Split Type:
Write-up: Patient received vaccine at 0939. 30 minute wait period related to history of previous anaphylactic reaction. 10:05 patient walked from observation area to vaccinator and reported that her "chest was burning" and "feels like it is getting tighter to breathe. Pt had change in voice. Patient moved to chair and started on oxygen 1.5 L/m per nasal cannula. MD came to room to assess patient. ED arrived and checked patient B/P. Patient transferred by cart to ED.

VAERS ID: 941992
Form: Version 2.0
Age: 25.0
Sex: Female
Location: Oregon
Vaccinated: 2021-01-05
Onset: 2021-01-05
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2021-01-13

Vaccination / Manufacturer | Lot / Dose | Site / Route |
---|---|---|
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 025J20-2A / 1 | RA / IM |
Administered by: Private    Purchased by: ?
Symptoms: Blood electrolytes, Chest discomfort, Chest pain, Dyspnoea, Flushing, Full blood count, Muscle rigidity, Muscle spasms, Muscle tightness, Nausea, Pain in extremity, Rash, SARS-CoV-2 test, Swelling, Swelling face
SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Dystonia (broad), Parkinson-like events (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: ETONOGESTROL 68 MG IMPLANT EVERY 3 YEARS, OMPERAZOLE 40MG DAILY, RIZATRIPTAN 10 MG AS NEEDED FOR HEADACHE
Current Illness: MIGRAINE HEADACHES
Preexisting Conditions: SURGICAL TREATMENT OF PERFORATED ULCER
Allergies: NO KNOW DRUG ALLERGIES
Diagnostic Lab Data: CBC on 1/5 and 1/6, complete electrolyte panel on 1/5 and basic electrolyte on 1/5 and 1/6. COVID test 1/5.
CDC Split Type:
Write-up: Patient began having cramping of her upper extremities and subsequent swelling of her face and neck and also shortness of breath, chest pressure and flushed appearance. She denies any tongue or throat swelling. She is also complaining of bilateral arm pain. The initial reaction treatment was started in the conference room and then the patient was transferred to the emergency room. She continued to has arm and chest pain in the emergency room. She had muscle tension/rigidity in the upper extremity which caused significant pain. She also developed a nonspecific rash on the chest and abdomen that persisted for through out her hospital stay. Treatment was started with epinephrine 0.5 mg IM x2 and diphenhydramine 50 mg IM x1, prior to transfer to emergency room. In the emergency room treatment was dexamethasone 10mg IV x 1, famotidine 20mg IV x1, KETOROLAC 30mg IV x 1, lorazepam, 1mg IV x 2, morphine 4mg IV x 2, 1000ml Saline Solution. As an inpatient the treatment included scheduled acetaminophen 500mg TID, as need morphine for pain after treatment with fentanyl, scheduled diphenhydramine 25mg IV q8 and compazine 5mg IV for nausea, cyclobenzapine 10mg as need for muscle spasms, dexamethasone as a scheduled dose started at 4 mg BID and tapered to 2 mg BID, Naproxen 500mg BID and Norco 7.5/325 as need for pain. with famotidine 20mg BID.
VAERS ID: 941994 (history) Vaccinated: 2020-12-22
Form: Version 2.0 Onset: 2020-12-22
Age: 36.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-13

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<td>ELV140 / 1</td>
<td>RA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Anaemia, Blood test, Chills, Computerised tomogram, Cough, Dyspnoea, Headache, Mycoplasma test positive, Nausea, Pain, Pyrexia, SARS-CoV-2 test positive
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Haematopoietic erythropenia (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Norethindrone - .35mg/day; Nasacort - 2 sprays a day; Symbicort - 160/4.5 - 2 puffs 2x/day; 600mg of Calcium/day; 10 mg of Zyrtec; 1 x/day prenatal vitamin; 500 mg of Valacyclovir; Colace =100 mg/day; Escitalopram - 20 mg/day; Omeprazole -
Current Illness: Covid - positive test after vaccine that same day Myoplasm pneumonia - positive test later that same day. Anemia - new diagnosis on that same day.
Preexisting Conditions: depression; anxiety; asthma; migraines; chronic constipation; seasonal allergies;
Allergies: no
Diagnostic Lab Data: Bloodwork; CT test; covid test
CDC Split Type: vsafe
Write-up: Note: I am currently breastfeeding. Had body aches; chills; fever of 102.6; headache; nausea; cough; shortness of breath - I went to ER and that is where I received COVID positive test and positive tests for COVID Pneumonia and Microplasm Pneumonia as well. Stayed overnight in ER observation - 2 am to 8 am . Went home next morning and was quarantined approximately 8 days. Body aches and a cough had started two days prior to injection. IV antibiotics at the hospital and oral antibiotics at home. Received nebulizer breathing treatments. Pain meds and anti-inflammatory medication.
VAERS ID: 942002 (history)  Vaccinated: 2021-01-12
Form: Version 2.0  Onset: 2021-01-12
Age: 26.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Minnesota  Entered: 2021-01-13

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<td>EK4176 / 2</td>
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</table>

Administered by: Private  Purchased by: ?

Symptoms: Blood bicarbonate decreased, Blood glucose normal, Blood thyroid stimulating hormone normal, Chest X-ray normal, Electrocardiogram abnormal, Full blood count normal, Glycosylated haemoglobin increased, Metabolic function test, Sinus tachycardia, Tachycardia SMQs:, Lactic acidosis (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Chronic kidney disease (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Adderall, modafinil, duloxetine, Latuda, Rybelsus, levothyroxine, topamax, spironolactone, prazosin, trazodone, gabapentin, Ativan, pindolol, fludrocortisone, Seasonale birth control

Current Illness: N/A
Preexisting Conditions: POTS, idiopathic hypersomnia, PCOS, hypothyroidism, depression, anxiety, PTSD, PMDD, Diabetes Type 2
Allergies: Metformin

CDC Split Type:
Write-up: Onset of tachycardia was 8:30pm on 1/12/21 with a noted HR of 164 and SR. Went to ER and had HR of 171 upon arriving to triage window. EKG said Sinus Tachycardia. Admitted to observation station with telemetry to monitor HR. HR normalized around 100 when up and walking at 10:45am on 1/13/21.
VAERS ID: 942029 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-29
Age: 43.0 Days after vaccination: 0
Sex: Female
Location: Tennessee Submitted: 0000-00-00
Entered: 2021-01-13

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</tbody>
</table>

Administered by: Work  Purchased by: ?
Symptoms: Anaphylactic shock, Throat tightness, Urticaria
SMQs: Anaphylactic reaction (narrow), Angioedema (narrow), Anaphylactic/anaphylactoid shock conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Zoloft, Valsartan, propranolol, lasix,
Current Illness: None
Preexisting Conditions: Htn, asthma, diabetes environmental allergies
Allergies: Contrast dye, triptans, Topamax, imitrex, reception, pravastatin, CATS( HAIR AND DANDER, pfizer-biontech covid 19 vaccine
Diagnostic Lab Data:
CDC Split Type:
Write-up: I received my covid vaccine on 12/29/2020 at 4:42pm. In 10 minutes after the shot, I went into anaphylactic shock, I broke out in hives, and my throat was closing

VAERS ID: 942030 (history) Vaccinated: 2021-01-11
Form: Version 2.0 Onset: 2021-01-11
Age: 45.0 Days after vaccination: 0
Sex: Female
Location: Oregon Submitted: 0000-00-00
Entered: 2021-01-13

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COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Private  Purchased by: ?
Symptoms: Chest discomfort, Throat tightness
SMQs: Anaphylactic reaction (broad), Angioedema (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypersensitivity (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: unknown
Current Illness: unknown
Preexisting Conditions: none
Allergies: penicillin
Diagnostic Lab Data: n/a
CDC Split Type:
Write-up: Pt reported chest tightness and throat tightness following vaccination. Time course following vaccination unknown.

VAERS ID: 942197 (history)  Vaccinated: 2021-01-12
Form: Version 2.0  Onset: 2021-01-12
Age: 74.0  Days after vaccination: 0
Sex: Female
Location: Oklahoma  Submitted: 0000-00-00
Entered: 2021-01-13

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Administered by: Public  Purchased by: ?
Symptoms: Blood pressure increased, Echocardiogram normal, Electrocardiogram normal, Laboratory test normal, Swollen tongue, Ventricular tachycardia
SMQs: Torsade de pointes/QT prolongation (narrow), Anaphylactic reaction (broad), Angioedema (narrow), Neuroleptic malignant syndrome (broad), Ventricular tachyarrhythmias (narrow), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Torsade de pointes, shock-associated conditions (narrow), Oropharyngeal allergic conditions (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Hypertension (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No

**Previous Vaccinations:**

Other Medications: Buspar, Lexapro, fish oil, Xanax, vistaril, lisinopril, vitamin D, levothyroxine, probiotic

**Current Illness:**

**Preexisting Conditions:** HTN, hyperlipidemia, hypothyroidism, GERD, history of breast cancer  

**Allergies:** NKDA  

**Diagnostic Lab Data:** Labs, EKG, echo essentially unremarkable. There is a 30 day event recorder pending.

**Write-up:** A few minutes after the vaccine, she had mild tongue swelling. It only lasted a few minutes, and then she felt fine. However, her BP went up. I'm not sure how high. she then has a short run of asymptomatic V tach. Taken to hospital observed overnight. No further events or problems.

---

**VAERS ID:** 942237 (history)  

**Vaccinated:** 2020-12-23  

**Form:** Version 2.0  

**Onset:** 2021-01-04  

**Age:** 63.0  

**Days after vaccination:** 12  

**Sex:** Female  

**Submitted:** 0000-00-00  

**Location:** Oklahoma  

**Entered:** 2021-01-13

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**Administered by:** Public  

**Purchased by:** ?

**Symptoms:** Angiogram cerebral abnormal, Cerebral artery stenosis, Cerebral infarction, Cerebrovascular accident, Facial paresis, Hemiparesis, Lacunar infarction, Magnetic resonance imaging brain abnormal  

**SMQs:** Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, arterial (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious meningitis (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow), Immune-mediated/autoimmune disorders (broad)

**Life Threatening?** Yes  

**Birth Defect?** No  

**Died?** No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Aspirin, atorvastatin, citalopram, metoprolol, vitamin D.
Current Illness:
Preexisting Conditions: CAD, hyperlipidemia, HTN, smoker
Allergies: sulfa, nicotine patch adhesive
Diagnostic Lab Data: CTA showed 80% stenosis of R MCA. MRI head showed small, acute lacunar infarct in the R MCA distribution.

CDC Split Type:
Write-up: She got the vaccine on Dec 23, and then on Jan 4 she had a mild stroke with left sided arm and face weakness. She did recover fully. She already has known CAD and risk factors for CVD. It is possible, but by no means certain, that the vaccine was an indirect cause of the event. Since the vaccine provoked an immune response, as it was supposed to, it is possible that this inflammation may have set up a metabolic predisposition that may have contributed to the event, which was 12 days later.

VAERS ID: 942240
Vaccinated: 2021-01-04
Onset: 2021-01-10
Days after vaccination: 6
Submitted: 0000-00-00
Entered: 2021-01-13

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Administered by: Private  
Purchased by: ?

Symptoms: Fall, Mental status changes, Unresponsive to stimuli, Urinary tract infection
SMQs: Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Dementia (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Accidents and injuries (narrow), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: no known allergies
Diagnostic Lab Data:
CDC Split Type:

Write-up: New onset altered mental status after fall. Person, she was found in bed, unresponsive at around 12:15 AM on 1/10 by her husband. Brought to the emergency room and admitted, Began treatment for UTI w/ CTX. Discharged 1/11/21 with f/u appointments

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<td>026L20A / 1</td>
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Administered by: Work  Purchased by: ?

Symptoms: Blood test normal, Chest X-ray normal, Electrocardiogram normal, Headache, Hypoesthesia, Paraeesthesia

SMQs: Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Sexual dysfunction (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Pantoprazole, Multivitamin (gummies)
Current Illness: None
Preexisting Conditions: Gastritis
Allergies: Bees

Diagnostic Lab Data: I went to ED to be seen for headache and chest pain. They did an EKG and bloodwork, and CXR- everything was normal.

CDC Split Type:

Write-up: I had a headache at the top of my head, and a tingling sensation down my left leg from my buttocks to my calf. The tingling lasted until the next morning then went away. On 1/3/2021 I experienced a strong headache followed by facial numbness and tingling. This
lasted for an hour or so and slowly subsided. The headache lingered for 3 days.

VAERS ID: 942879 (history) Vaccinated: 2021-01-11
Form: Version 2.0 Onset: 2021-01-12
Age: 53.0 Days after vaccination: 1
Sex: Male Submitted: 0000-00-00
Location: Hawaii Entered: 2021-01-13

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<td>RA / IM</td>
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Administered by: Military  Purchased by: ?
Symptoms: Arthropathy, Chest X-ray normal, Cold sweat, Computerised tomogram head normal, Computerised tomogram neck, Echocardiogram normal, Hyperhidrosis, Magnetic resonance imaging brain normal, Magnetic resonance imaging neck, Motion sickness, Muscle disorder, Troponin I increased, Urinary incontinence, Vertigo, Vision blurred, Vomiting
SMQs: Rhabdomyolysis/myopathy (broad), Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Glaucoma (broad), Lens disorders (broad), Retinal disorders (broad), Vestibular disorders (narrow), Arthritis (broad), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: LIPITOR, CYMBALTA, 81 MG ASA
Current Illness: N/A
Preexisting Conditions: PTSD, SCIATICA
Allergies: PEANUTS, OXYCODONE, PCN, PRAZOSIN, AMIDE CLASS ANESTHETICS
Diagnostic Lab Data: Troponin I mildly elevated (0.059 ng/ml. CXR, Echocardiogram, CT and MRI of head and neck NL.
CDC Split Type: Write-up: Received 2nd vaccination in series on 11 JAN 21. By next morning started to experience some muscle and joint symptoms. By afternoon of 12 JAN 21 experienced sudden onset loss of bladder control for first time in his life, followed a few hours later by blurry vision, vertigo, motion sickness, emesis and cold sweats that drenched his clothes. Taken to ER by paramedics, and admitted for further observation and evaluation for underlying neurologic vs. cardiogenic problems. Given positional treatments by PT for possible otoliths. Feels much improved on afternoon of 13 JAN 21, but symptoms not fully resolved. Will likely be
discharged from hospital on 14 JAN 21 if problems continue to resolve.

VAERS ID: 942886 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 84.0 Days after vaccination: 0
Sex: Male Submitted: 0000-00-00
Location: Pennsylvania Entered: 2021-01-13

Vaccination / Manufacturer | Lot / Dose | Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 01J20A / 1 | RA / IM

Administered by: Private Purchased by: ?

Symptoms: Aphonia, Arthralgia, Ascites, Asthenia, Bacterial infection, Bilirubin conjugated increased, Blood lactate dehydrogenase increased, Chest X-ray abnormal, Chills, Cholelithiasis, Computerised tomogram abdomen, Device dependence, Diverticulum intestinal, Gastrointestinal oedema, Gram stain negative, Intraductal papillary mucinous neoplasm, Magnetic resonance imaging abdominal abnormal, Pulmonary vascular disorder, Renal cyst, Retroperitoneal oedema, Salmonella test positive, Sepsis, Splenomegaly, Troponin I increased, Ultrasound Doppler normal, Ultrasound abdomen abnormal, Weight bearing difficulty, White blood cell count increased, X-ray limb normal

SMQs: Liver related investigations, signs and symptoms (narrow), Hepatic failure, fibrosis and cirrhosis and other liver damage-related conditions (narrow), Acute pancreatitis (broad), Angioedema (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal premalignant disorders (narrow), Biliary system related investigations, signs and symptoms (narrow), Gallbladder related disorders (narrow), Gallstone related disorders (narrow), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific dysfunction (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Hypersensitivity (broad), Arthritis (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (broad), Sepsis (narrow), Opportunistic infections (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 11 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Medication List As of 1/6/2021 11:25 AM amLODIPine Besylate 5 mg Oral Apixaban 5 mg Oral 2 times daily Aspirin 81 mg Oral Daily Cholecalciferol 10,000 Units Oral 2 times weekly cloNIDine HCl 0.1 mg/day Transdermal Weekly Clopidogrel B

Current Illness:
stage renal

**Allergies:** Atorvastatin Iodinated Diagnostic Agents Metrizamide Nsaids All statins Tolmetin

**Diagnostic Lab Data:**
- **1/7/21:** XR chest 1 view: IMPRESSION: No acute cardiopulmonary disease
- **1/8/21:** lower limb venous duplex study, complete bilateral: CONCLUSION: Impression: RIGHT LOWER LIMB: No evidence of acute or chronic deep vein thrombosis. No evidence of superficial thrombophlebitis noted.
- LEFT LOWER LIMB: No evidence of acute or chronic deep vein thrombosis. No evidence of superficial thrombophlebitis noted.
- **1/9/21**: XR knee 1 or 2 vw right IMPRESSION: No acute osseous abnormality. Degenerative changes as described.

**Diagnostic Lab Data:**
- **1/11/21:** XR chest portable IMPRESSION: Mild pulmonary vascular congestion.
- **1/12/21:** MRI OF THE ABDOMEN WITHOUT CONTRAST WITH MRCP IMPRESSION: Dominant 2.2 cm stone in the gallbladder neck with prominent distention of the gallbladder but without gallbladder wall thickening. Trace nonspecific pericholecystic fluid in this patient with trace perihepatic and upper abdominal ascites as well as mesenteric and retroperitoneal edema. No choledocholithiasis. Borderline common duct. Minor prominence of central infrahepatic biliary tree. Multiple cystic pancreatic lesions most consistent with intraductal papillary mucinous pancreatic neoplasm. The largest these measures up to 21 mm in the pancreatic head. No main pancreatic ductal enlargement. Based on institutional consensus and recent literature gastroenterology consult and/or surgical oncology consult is recommended. By these criteria, endoscopic ultrasound is likely warranted. Considerations related to the patient's age and/or comorbidities may be used to alter these recommendations.

**CDC Split Type:**

**Write-up:** Admission Note: ? Weakness - Generalized Patient reports feeling weak prior to dialysis, but demanded clinic to perform dialysis. Had full tx done and brought to ER. Reports still feels weak after dialysis. 84 year old male comes in today after completing dialysis for evaluation of generalized weakness x 5 days. He has also lost his voice. He tells me he received his COVID vaccine yesterday, but he is concerned he may have COVID. He denies any fevers, cough, sore throat, NVD, abd pain. Transfer Note: HOSPITAL COURSE: Patient is a 84 y.o. male who presented with shaking chills and was found to have Gram-negative rods in the blood. The source of infection was unclear. Initially it was thought that it could possibly be cholecystitis but imaging was negative for that. There was concern that it could be UTI but the patient is on dialysis and is an uric and therefore no urinalysis could be got. Early this
morning when I saw the patient the patient did have significant pain and tenderness in the right knee and is not able to put weight on that. I.e. Consulted Dr. Today with per lumbar from Orthopedics who said that it would be in the best interest of the patient for him to be transferred to hospital where he could decide on aspiration and or washout of the right knee. Transfer center has been called and we are trying to finalize a transfer of the patient hospital at this point of time Please see problem list listed below. REASON FOR ADMISSION/ADMISSION DIAGNOSES Sepsis cause unclear

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<td>011J20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Other  
Purchased by: ?

Symptoms: SARS-CoV-2 test positive

SMQs: Infective pneumonia (broad), Opportunistic infections (broad), COVID-19 (narrow)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: 1/11 asymptomatic COVID Positive test Narrative:

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<th>Days after vaccination</th>
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<td>942897</td>
<td>2020-12-29</td>
<td>2021-01-01</td>
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<tr>
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<td>011J20A / 1</td>
<td>LA / IM</td>
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</tbody>
</table>
Administered by: Private    Purchased by: ?
Symptoms: Bundle branch block right, Chest pain, Electrocardiogram abnormal, Eructation, Gastrointestinal disorder, Troponin I normal
SMQs: Arrhythmia related investigations, signs and symptoms (broad), Conduction defects (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Medication List As of 12/29/2020 ?4:07 PM ALPRAZolam 1 mg Oral
Daily at bedtime Atorvastatin Calcium 10 mg Oral Once at bedtime (Medrol Dose Pack ONLY)
Celecoxib 200 mg TAKE ONE CAPSULE BY MOUTH EVERY DAY Gabapentin 300 mg Caps, TAKE
Current Illness: n.a.
Preexisting Conditions: Past Medical History: Diagnosis Date ? Anxiety ? ? Arthritis ? ?
Allergies: Nsais High GI Bleeding Long term NSAID use, 30 years for back pain/migraines.
Experienced GI bleed in 2013, no longer takes NSAIDS Vicodin [hydrocodone-acetaminophen] Medium GI Intolerance NAUSEA/VOMITING
Diagnostic Lab Data: 1/1/21 2318 Troponin I ng/mL <0.02 ECG 12 lead Status: Final result
Study Result Normal sinus rhythm Left axis deviation Right bundle branch block Abnormal ECG
CDC Split Type:
Write-up: History of Present Illness: ? Patient is a 80 y.o. male who presents with chest pain.
Patient reported that he 1st had the chest pain approximately 2 weeks ago when he woke
from sleep. At that time patient pain lasted about 5 minutes or so and resolved when he got
out of bed. He did well for the rest of the day up until yesterday. Patient reported that
yesterday morning he woke up with the pain at the lasted about 30 minutes or so. Patient also
had associated burping felt that it is likely GI in nature. The pain was located mainly in the left
side of the chest without any radiation. No diaphoresis. No shortness of breath or palpitation.
No radiation for the pain. Since yesterday morning he had another 3 episodes of pain the last
after dinner tonight. Patient reported that this pain was located more on the left side of the
chest, likely lasted about 10 minutes or so. There was no exertional component to the pain.
No known history of heart disease. Due to rather recurrent nature of the pain patient was
brought to the hospital by his son who is a cardiologist to be evaluated. No fever or chills. No
cough . Patient reported that he got vaccination for COVID 2 days ago-of a concern that this
may be a side effect of the vaccine. No dizziness lightheadedness. Patient with history of GI
bleed in the past at that time patient was on NSAIDs. Patient with burping associated with the

---

**VAERS ID:** [942904](#) *(history)*  
**Form:** Version 2.0  
**Age:** 50.0  
**Sex:** Male  
**Location:** Pennsylvania  
**Vaccinated:** 2020-12-29  
**Onset:** 2021-01-09  
**Days after vaccination:** 11  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-14  
**VAERS Form:** Version 2.0  
**VAERS Entry Date:** 2021-01-14  
**VAERS ID:** [942904](#) *(history)*  
**VAERS Form:** Version 2.0  
**VAERS Entry Date:** 2021-01-14  

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<td>026L20A / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?  
**Symptoms:** Asthenia, C-reactive protein increased, COVID-19 pneumonia, Chest X-ray abnormal, Cough, Decreased appetite, Dyspnoea, Dyspnoea exertional, Electrocardiogram QRS complex abnormal, Electrocardiogram abnormal, Hypopnoea, Limb discomfort, Lung opacity, Myocardial infarction, Pain, Pyrexia, SARS-CoV-2 test positive, Serum ferritin increased  
**SMQs:**: Anaphylactic reaction (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Embolic and thrombotic events, arterial (narrow), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad), COVID-19 (narrow)  
**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** Yes  
**Office Visit?** Yes  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, 4 days  
**Extended hospital stay?** No  
**Previous Vaccinations:**  
**Other Medications:** cholecalciferol (VITAMIN D3) 1,000 units tablet fingolimod (Gilenya) 0.5 MG capsule gabapentin (NEURONTIN) 100 mg capsule ibuprofen (MOTRIN) 600 mg tablet vitamin B-12 (VITAMIN B-12) 1,000 mcg tablet  
**Current Illness:** n.a.  
**Preexisting Conditions:** Crohn"s disease (HCC) ? Migraine ? ? Multiple sclerosis (HCC) 2010 ? Vitamin D deficiency  
**Allergies:** Keflex [Cephalexin]  
**Diagnostic Lab Data:** 1/9/21 2217 CRP mg/L 34.2 Ferritin ng/mL 558 1/10/20 XR CHEST PORTABLE Images: 2 FINDINGS: Cardiomediasitinal silhouette appears unremarkable. Shallow depth of inspiration. Groundglass opacities right mid and left lower lung zones. No pneumothorax or pleural effusion. Osseous structures appear within normal limits for patient
age. IMPRESSION: Groundglass opacities right mid and left lower lung zones. Although nonspecific, given clinical scenario, findings are suggestive of Covid-19 viral pneumonia. ECG 12 lead Status: Final result Study Result *** Age and gender specific ECG analysis *** Normal sinus rhythm Low voltage QRS Septal infarct , age undetermined Abnormal ECG No previous ECGs available

CDC Split Type:
Write-up: Chief Complaint Patient presents with ? Generalized Body Aches ? ? Pt presents via EMS c/o DOE, dry non-productive cough, subjective fevers Tmax 101.9, decreased appetite, aches since testing + for COVID on 1/5. ? Patient is a 50 year old male with PMH of Crohns/MS on fingolimod presenting to the Hospital for fevers, shortness of breath and weakness. Patient received COVID vaccine on 12/29. Patient had initial left arm discomfort though has had worsening weakness, cough, shortness of breath and fevers since that time. Patient tested positive for COVID19 on Patient has shortness of breath with exertion that is relieved by rest. Patient denies N/V/D. Patient has taken tylenol at home to attempt to alleviate symptoms.

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<tr>
<td>Age: 68.0</td>
<td>Days after vaccination: 15</td>
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<td>Sex: Male</td>
<td>Submitted: 0000-00-00</td>
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<td>Location: Pennsylvania</td>
<td>Entered: 2021-01-14</td>
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<td>EK5730 / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Private  
Purchased by: ?

Symptoms: Angiogram cerebral normal, Arteriogram carotid abnormal, Carotid arteriosclerosis, Cerebral microangiopathy, Magnetic resonance imaging brain abnormal, Nausea, Retching, Scan with contrast abnormal, Tinnitus, Vertigo, Vomiting

SMQs: Acute pancreatitis (broad), Ischaemic central nervous system vascular conditions (narrow), Embolic and thrombotic events, arterial (narrow), Malignancy related therapeutic and diagnostic procedures (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Central nervous system vascular disorders, not specified as haemorrhagic or ischaemic (broad), Hearing impairment (narrow), Vestibular disorders (narrow)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? No  
Hospitalized? Yes, ? days  
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Medication List As of 12/28/2020 ?9:21 AM Lisinopril 20 mg Oral Daily Sildenafil Citrate 20 mg Take 3-5 tablets PO PRN erectile dysfunction Tamsulosin HCI 0.4 mg
Oral Daily with dinner

**Current Illness:** n.a

**Preexisting Conditions:** Benign hypertension Elevated PSA Elevated LDL cholesterol level

**Allergies:** n.a

**Diagnostic Lab Data:** 1/12/2021 CTA NECK AND BRAIN WITH AND WITHOUT CONTRAST: IMPRESSION: ? No mass effect, acute intracranial hemorrhage or evidence of recent infarction. ? No evidence for high-grade stenosis, major branch vessel occlusion or vascular aneurysm of the intracranial circulation. ? Atherosclerotic plaque at the carotid bulbs. No evidence for high-grade stenosis or focal occlusion. 1/13/21 MRI BRAIN WITHOUT CONTRAST IMPRESSION: ? Mild chronic microangiopathic change within the cerebral hemispheres. No mass, hemorrhage or acute ischemia. No etiology for vertigo identified.

**CDC Split Type:**

**Write-up:** Chief Complaint Patient presents with ? Vomiting ? ? pt reports dry heaving and nausea that started an hour ago ? Patient is an 68 y.o. year old male with PMHx significant for HTN, BPH, who presents to the ED today with nausea and dry heaving for one hour PTA. States that he was at work as a courier when he had onset of sensation of room spinning, nausea, and dry heaving. Also having tinnitus which he thinks is b/l. This happened once about two weeks ago and resolved spontaneously overnight when he was asleep. No preceding illnesses, medication changes, or other associated symptoms. Vertigo has no clear exacerbating or relieving factors. Has not yet taken anything for symptoms. ? The patient denies fevers, chills, headaches, syncope, chest pain, shortness of breath, rhinorrhea, sore throat, cough, abdominal pain, changes in usual bowel movements, changes with urination, back pain, pain anywhere else in body. The patient has no sick contacts, recent travel history.

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**VAERS ID:** 942914 (history)

**Vaccinated:** 2020-12-23

**Form:** Version 2.0

**Onset:** 2021-01-03

**Age:** 50.0

**Days after vaccination:** 11

**Sex:** Female

**Submitted:** 0000-00-00

**Location:** Pennsylvania

**Entered:** 2021-01-14

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<td>EL0104 / 1</td>
<td>RA / IM</td>
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**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** C-reactive protein increased, Chest X-ray normal, Cough, Dehydration, Diarrhoea, N-terminal prohormone brain natriuretic peptide increased, SARS-CoV-2 test positive

**SMQs:** Cardiac failure (broad), Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Pseudomembranous colitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Noninfectious diarrhoea (narrow), Infective pneumonia (broad), Dehydration (narrow), Opportunistic infections (broad), COVID-19 (narrow)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 5 days
   Extended hospital stay? No

Previous Vaccinations:

Other Medications: Medication List As of 12/23/2020 10:38 AM Albuterol Sulfate 90 mcg/act
2 puffs Inhalation Every 4 hours PRN ALPRAZolam 0.25 mg Oral Daily PRN Butalbital-APAP-
Caffeine 50-325-40 mg 1 tablet Oral Daily PRN FLUoxetine HCl 20 mg Oral Daily

Current Illness: Nausea, Body aches

Preexisting Conditions: Digestive Esophageal reflux IBS (irritable bowel syndrome)
Respiratory Asthma Cardiovascular and Mediastinum Essential (primary) hypertension
Migraine, unspecified, not intractable, without status migrainosus Nervous and Auditory
Carpal tunnel syndrome Cubital tunnel syndrome Decreased hearing of left ear Dysfunction of
both eustachian tubes Wartenberg syndrome Musculoskeletal and Integument Bunion, right
foot Folliculitis Biceps tendonitis on left Calcific tendonitis of left shoulder Lateral epicondylitis
of left elbow Genitourinary Chronic interstitial cystitis Other MDD (major depressive disorder),
recurrent severe, without psychosis (HCC) Acute pain of left knee Atypical chest pain
Constipation Cough Edema Insomnia Low back pain Obesity Pain in toe Snoring Urge and
stress incontinence GAD (generalized anxiety disorder)

Allergies: n.a

Diagnostic Lab Data: Lab Results Component Value Date SARCov2 Detected (A)
01/01/2021 SARCov2 Not Detected 12/04/2020 1/3/21 2314 CRP mg/L 60.1 1/3/21 2314
NT-proBNP pg/mL 220 1/4/21 CHEST INDICATION: sob/cp/covid. Patient has confirmed
PERFORMED/VIEWS: XR CHEST PORTABLE FINDINGS: Cardiomediastinal silhouette
appears unremarkable. The lungs are clear. No pneumothorax or pleural effusion. Osseous
structures appear within normal limits for patient age. IMPRESSION: No acute
cardiopulmonary disease

CDC Split Type:

Write-up: HOSPITAL COURSE: Patient is a 50 y.o. female with a history of anxiety and
migraine headaches who presented to hospital with cough and diarrhea. The patient had felt
the symptoms on 12/31/2020 and eventually went to have a COVID test on 1/1/2021. She
was subsequently positive but due to dehydration and diarrhea she came to the emergency
department where she was admitted for remdesivir and dexamethasone. She was able to be
weaned off any supplemental oxygen. Her diarrhea resolved. She is feeling well and will be
discharged home in good condition.

VAERS ID: 942922 (history) Vaccinated: 0000-00-00
Form: Version 2.0 Onset: 0000-00-00
Age: 76.0 Submitted: 0000-00-00
Sex: Female Entered: 2021-01-14
Location: Arizona
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

Administered by: Pharmacy  Purchased by: ?
Symptoms: Unevaluable event
SMQs: 
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations: 
Other Medications: none
Current Illness: gallstones
Preexisting Conditions: none
Allergies: none
Diagnostic Lab Data: 

VAERS ID: 943095 (history)  Vaccinated: 2021-01-12
Form: Version 2.0  Onset: 2021-01-12
Age: 33.0  Days after vaccination: 0
Sex: Male
Location: Puerto Rico  Submitted: 0000-00-00
Entered: 2021-01-14

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<td>01J20A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Military  Purchased by: ?
Symptoms: Muscle spasms, Pyrexia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dystonia (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations: None
Other Medications: None
Current Illness: None
Preexisting Conditions: None
Allergies: Tremedol
Diagnostic Lab Data: None
CDC Split Type:
Write-up: Pt experienced 103.7 fever and muscle spasms. Hospitalized.

VAERS ID: 943158 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2021-01-06
Age: 39.0 Days after vaccination: 14
Sex: Female Submitted: 0000-00-00
Location: Massachusetts Entered: 2021-01-14

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<td>EK5730 / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Angiogram cerebral, Arteriogram carotid, Blood test, Computerised tomogram head, Hypoesthesia, Immunology test, Lumbar puncture, Magnetic resonance imaging brain, Magnetic resonance imaging spinal, Myelitis transverse, Paraesthesia
SMQs: Peripheral neuropathy (broad), Guillain-Barre syndrome (broad), Demyelination (narrow), Immune-mediated/autoimmune disorders (narrow), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Sertraline 75 mg, Baby aspirin, Metoprolol 60 mg as needed
Current Illness: N/A
Preexisting Conditions: Depression, Anxiety Brain Aneurysm and Brain Cyst
Allergies: Monk Fish
Diagnostic Lab Data: CT Head, MRI Brain, MRI Cervical, Thoracic and Lumbar, Lumbar Puncture, CTA Head/Neck, Testing for autoimmune, Blood work for Infectious etiology Results Pending
CDC Split Type:
Write-up: Numbness tingling in feet, toes progressed to waist. ER Sunday hosp, pt was admitted inpatient, diagnosis transverse myelitis.
VAERS ID: 943163 (history)  Vaccinated: 2021-01-04
Form: Version 2.0  Onset: 2021-01-04
Age: 40.0  Days after vaccination: 0
Sex: Female
Location: Michigan  Submitted: 0000-00-00
Entered: 2021-01-14

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<td>011L20A / 1</td>
<td>- / IM</td>
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</table>

Administered by: Senior Living  Purchased by: ?

Symptoms: **Dizziness, Hyperventilation**

SMQs: Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Anticholinergic syndrome (broad), Eosinophilic pneumonia (broad), Vestibular disorders (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions:
Allergies: KNDA
Diagnostic Lab Data:
CDC Split Type:
Write-up: Systemic: Dizzy, hyperventilation-Medium

VAERS ID: 943220 (history)  Vaccinated: 2021-01-11
Form: Version 2.0  Onset: 2021-01-11
Age: 43.0  Days after vaccination: 0
Sex: Female
Location: New Jersey  Submitted: 0000-00-00
Entered: 2021-01-14

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<td>EL1284 / 2</td>
<td>LA / IM</td>
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Administered by: Private  Purchased by: ?

Symptoms: **Cough, Dysphagia, Dyspnoea, Enlarged uvula, Feeling abnormal, Intensive care, Oral pruritus, Pallor, Paraesthesia oral, Rash, Rash erythematous, Rash pruritic, Speech**
disorder, Throat tightness, Tongue pruritus, Vomiting, Wheezing

SMQs: Anaphylactic reaction (narrow), Acute pancreatitis (broad), Angioedema (broad), Asthma/bronchospasm (broad), Anticholinergic syndrome (broad), Dementia (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Psychosis and psychotic disorders (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Hypotonic-hypoactive episode (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 4 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Multivitamin
Current Illness: No
Preexisting Conditions: None
Allergies: No
Diagnostic Lab Data: N/a
CDC Split Type:

Write-up: Began with tingling/itching to tongue and roof of mouth approx 15 minutes after administration, progressed to tingling of lips, was sent to the ED for observation. Within 20-30 minutes developed cough, throat tightness, difficulty swallowing, breathing, vomiting, shortness of breath. Noted to have uvular swelling and wheezing on examination. Given Benadryl, Pepcid, Solumedrol, Zofran, Albuterol MDI, Epi IM. within a few minutes symptoms returned and were worse where I felt like I could not breathe, throat was closing, could not talk. Noted to be pale, HR in 140?s. Given second dose of epi IM and symptoms improved. Was transferred to Obs Unit., within 2 hours (approx 6 hours after administration), developed SOB, throat tightness, cough, vomiting, difficulty breathing. Again noted to have swelling of uvula, wheezing on exam. Given Solumedrol, Benadryl, SQ epi, Albuterol, Racemic Epi nebulizer. Was transferred to ICU, all meds held except Pepcid. Day #2 ~10 am (25 hours from administration) developed throat tightness, diffuse red rash to arms, difficulty breathing. Again noted to have swelling of uvula, wheezing on exam. Given Solumedrol, Benadryl, Pepcid, Albuterol MDI, Racemic Epi neb. Solumedrol started q12hour dosing. Strange feeling/fullness in throat continued all day, got additional racemic Epi neb that night with improvement of symptoms. Following morning (day#2 after vaccine) noted to have diffuse red rash to chest and face, spread to arms, then began coughing. Given Solumedrol, Pepcid, Benadryl, Advair, Racemic Epi nebulizer. Solumedrol changed to q8 dosing. Approx 4 hrs later nurse noted rash worse on face, associated with itching, throat tightness. Given additional Benadryl, Racemic Epi neb with improvement. Rash continued that night with throat tightness, got additional Benadryl and Racemic Neb that night (total of 3 Racemic nebulizer on Day#2
post vaccine). Transferred to telemetry floor. Day#3 post vaccine rash improved, but still present to chest and face. Throat fullness present, especially after drinking. Am still hospitalized while writing this report

VAERS ID: 943266 (history)  Vaccinated: 2021-01-12
Form: Version 2.0  Onset: 2021-01-12
Age: 88.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: Arizona  Entered: 2021-01-14

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<td>EL3249 / 1</td>
<td>LA / SYR</td>
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</table>

Administered by: Other  Purchased by: ?

Symptoms: Cerebral haemorrhage, Coma, Craniotomy, Death, Endotracheal intubation, Headache, Intracranial aneurysm, Magnetic resonance imaging brain abnormal, Vomiting

SMQs: Acute pancreatitis (broad), Angioedema (broad), Haemorrhage terms (excl laboratory terms) (narrow), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Haemorrhagic central nervous system vascular conditions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow), Respiratory failure (broad), Hypoglycaemia (broad)

Life Threatening? No
Birth Defect? No
Died? Yes
  Date died: 2021-01-13
  Days after onset: 1
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: Losartan, Levothyroxine, Carvedilol
Current Illness:
Preexisting Conditions: Arthritis, high blood pressure
Allergies: Penicillin, Sulfur, Gluten
Diagnostic Lab Data:
CDC Split Type:

Write-up: Initial pain in back of head and extreme headache. Some vomiting. At emergency, went into coma and was intubated. Hole drilled in skull to relieve pressure. MRI taken. Lot of bleeding in brain - aneurism lead to death approximately 14 hours after initial symptoms.
**VAERS ID:** 943359 (history)  
**Vaccinated:** 2020-12-30  
**Onset:** 2021-01-12  
**Days after vaccination:** 13  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-14

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL3246 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Computerised tomogram, Electroencephalogram, Generalised tonic-clonic seizure, Laboratory test, Magnetic resonance imaging brain

**SMQs:** Systemic lupus erythematosus (broad), Convulsions (narrow), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Hypoglycaemia (broad)

**Life Threatening?** Yes  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** Yes  
**ER Visit?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** Yes, 2 days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Zoloft, buspirone, multivitamin, protonix

**Current Illness:** None

**Preexisting Conditions:** Obesity

**Allergies:** Betadine, citalprozam

**Diagnostic Lab Data:** Labs, CT, EEG, MRI brain

**CDC Split Type:**

**Write-up:** Unprovoked seizure (clonic tonic) 13 days later, requiring hospitalization and testing

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**VAERS ID:** 943614 (history)  
**Vaccinated:** 2020-12-21  
**Onset:** 2020-12-28  
**Days after vaccination:** 7  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-14

<table>
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<tr>
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<td>EL3246 / 1</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>
Administered by: Private  Purchased by: ?
Symptoms: Angiogram cerebral, Arteriogram carotid, Blood glucose, Diplopia, Echocardiogram, Electrocardiogram, Feeling abnormal, Full blood count, Glycosylated haemoglobin, Hypoaesthesia, Impaired work ability, Lipids, Loss of personal independence in daily activities, Magnetic resonance imaging brain, Metabolic function test, Moaning, Muscular weakness, Musculoskeletal disorder, Nausea, Paraesthesia, Speech disorder, Urine analysis, Vertigo
SMQs: Rhabdomyolysis/myopathy (broad), Acute pancreatitis (broad), Peripheral neuropathy (broad), Dementia (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (narrow), Ocular motility disorders (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Dupixent 300mg injection every two weeks, diazepam 5mg PRN, albuterol inhaler PRN, Claritin, ocuvite vitamin, calcium/mag/vit d, multivitamin with iron, methyl folate +,
Current Illness: None
Preexisting Conditions: Obesity, PCOS
Allergies: Biaxin, Skelaxin, Codeine, Morphine
Diagnostic Lab Data: CTA of head and neck, MRI Brain, Echo with bubble study, CBC, CMP, Lipid panel, Glucose check, HA1C, EKG, UA.
CDC Split Type:
Write-up: Day 7 post vaccine, woke with vertigo, nausea and double vision prior to my alarm going off at 5:30am, told my husband that I did not feel right and it felt like something was wrong with me. I asked him to send a message to work that I was not feeling well and would not be in. I was not able to see my phone clearly as I had double vision. I went back to sleep to try to get relief, woke up and called out to husband for help and he said I was just making groaning noises but I know in my head I was saying please help me as I could not move my right side and I was not sleeping or having a dream. At approximately 9:30am my husband kept telling me someone was trying to text me and needed a response. I tried to get up and still could not move my right side. He helped me sit up and I could not use my right arm and hand. He helped me get some clothes on and took me to the ED. When we arrived I still could not use my right hand and my arm still felt weak. The weakness resolved within a couple of
hours and I got the strength back in my hand. I did have some concern that my TIA type symptoms could possibly be related to vaccine but it was just a thought until I received my second dose. 3 hours post vaccine my face became numb and tingly. It remained that way until I went to sleep. This is why I am reporting this incident.

VAERS ID: 943667 (history) Vaccinated: 2020-12-29
Form: Version 2.0 Onset: 2020-12-30
Age: 43.0 Days after vaccination: 1
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-14

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025L20A / 1</td>
<td>RA / IM</td>
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</table>

Administered by: Private Purchased by: ?
Symptoms: Headache, Nausea, Vomiting
SMQs: Acute pancreatitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
 Extended hospital stay? No
Previous Vaccinations:
Other Medications: furosemide, tacrolimus, myfortic
Current Illness:
Preexisting Conditions:
Allergies: Cefazolin, penicillins
Diagnostic Lab Data:
CDC Split Type:
Write-up: Per patient report on follow-up: admitted to hospital following initial vaccine on 12/29 with N/V and severe HA. Patient placed on Morphine for pain, now resolved. Admission occurred outside of hospital system providing initial vaccine.

VAERS ID: 943741 (history) Vaccinated: 2020-12-23
Form: Version 2.0 Onset: 2021-01-08
Age: 71.0 Days after vaccination: 16
Sex: Male Submitted: 0000-00-00
Location: Oregon Entered: 2021-01-14

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<th>Vaccination / Manufacturer</th>
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</table>

Write-up: Per patient report on follow-up: admitted to hospital following initial vaccine on 12/29 with N/V and severe HA. Patient placed on Morphine for pain, now resolved. Admission occurred outside of hospital system providing initial vaccine.
**COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH**

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<th>Dose</th>
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<tr>
<td>EJ165 / 1</td>
<td>AR / IM</td>
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</table>

Administered by: Private  
Purchased by: ?

**Symptoms:** Fatigue, Mucosal inflammation, Pyrexia, Rash, Rash macular

**SMQs:** Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

**Life Threatening?** Yes
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** No
**ER Visit?** No
**ER or Doctor Visit?** Yes
**Hospitalized?** Yes, 3 days
  - **Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:**

**Current Illness:** Prostate Cancer, completing radiation therapy

**Preexisting Conditions:** Prostate Cancer undergoing radiation therapy, history of Afib

**Allergies:** Azithromycin

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** Patient reports no symptoms until 1/8/21 at which time a rash developed along with fatigue and fevers. Patient was seen in ED 1/8 and 1/11/21. Was admitted 1/11/21 with Concern for STevens Johnson and sepsis. Patient subsequently developed full body macular rash and mucosal lesions. Fevers to 102-104.

**VAERS ID:** 943759 (history)

**Form:** Version 2.0

**Age:** 58.0

**Sex:** Female

**Location:** Iowa

**Vaccinated:** 2020-12-29

**Onset:** 2021-01-05

**Days after vaccination:** 7

**Submitted:** 0000-00-00

**Entered:** 2021-01-14

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**COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA**

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>025J20-2A / 1</td>
<td>LA / IM</td>
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</table>

Administered by: Private  
Purchased by: ?

**Symptoms:** Diarrhoea, Dizziness, Injection site erythema, Injection site pain, Injection site swelling, Neurological symptom

**SMQs:** Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Haemodynamic oedema, effusions and fluid overload (narrow), Vestibular disorders (broad), Noninfectious diarrhoea (narrow)

**Life Threatening?** No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: 
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: 
Write-up: Reported redness, swelling and pain at injection site, diarrhea and light 
headedness 1/5/21. Evaluated in ED and hospitalized for neurological symptoms that started 
1/8/21.

VAERS ID: [943814](history) Vaccinated: 2021-01-12
Form: Version 2.0 Onset: 2021-01-13
Age: 25.0 Days after vaccination: 1
Sex: Female
Location: New York Submitted: 0000-00-00
Entered: 2021-01-14

<table>
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<td>EK9231 / UNK</td>
<td>LA / IM</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Abdominal pain upper, Hyperhidrosis, Nausea, Vomiting
SMQs: Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypoglycaemia (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: unknown
Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data:
CDC Split Type:
Write-up: vaccinated at Hospital on 1/12/2021. According to patients father she developed stomach pains, constant vomiting, sweating which started at approx. 4am. She arrived at Medical center at approx. 7:20 stating she had been vomiting since 4am. Attempted PO fluids while in ED. Uncontrolled nausea persisted despite medication. Admitted to Hospital for observation for uncontrolled nausea. IV fluids given

VAERS ID: 943868 (history) Vaccinated: 2020-12-28
Form: Version 2.0 Onset: 2021-01-04
Age: 66.0 Days after vaccination: 7
Sex: Male Submitted: 0000-00-00
Location: Georgia Entered: 2021-01-14

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<td>EK5730 / UNK</td>
<td>- / IM</td>
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</tbody>
</table>

Administered by: Other Purchased by: ?
Symptoms: Computerised tomogram, Painful respiration, Pulmonary embolism, X-ray
SMQs: Embolic and thrombotic events, venous (narrow)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: zyrTEC 10 mg 1 tab daily; BuPROPion Hal XL 300 mg 1 tab daily; Furosemide 40 mg 1 tab daily; Mirapex 1 mg 3 tabs at bedtime; Lipitor 40 mg 1 tab at bedtime; Seroquel 100 mg tab 2 tabs at bedtime; Pyridoxine Hal 50 mg 2 tabs twice daily; G

Current Illness: None
Preexisting Conditions: Type 2 Diabetes, HBP
Allergies: N/A
Diagnostic Lab Data: CT Scan and xray

CDC Split Type:
Write-up: Developed pulmonary embolism in right lung one week after vaccination. Sharp pain on right side when breathing. Treated with IV Apixaban while inpatient for 2 days, oral Apixaban 5 mg, 2 tabs twice daily 1/5/21-1/11/21, then one 5 mg tab twice a day. Pain has subsided as of 1/14/21.
VAERS ID: 944169  Vaccinated: 2020-12-29
Form: Version 2.0  Onset: 2020-12-29
Age: 59.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: Delaware  Entered: 2021-01-14

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<td>- / 1</td>
<td>UN / IM</td>
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Administered by: Senior Living  Purchased by: ?
Symptoms: Agitation, Band neutrophil percentage increased, Blood creatinine increased, Blood culture, Blood glucose normal, Blood pH increased, Haemoglobin decreased, Hypoxia, Mental status changes, Neutrophil percentage increased, Nitrite urine, Pyrexia, Respiratory failure, Urine leukocyte esterase positive, White blood cell count decreased, White blood cells urine positive
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Haematopoietic erythropenia (broad), Haematopoietic leukopenia (narrow), Haemorrhage laboratory terms (broad), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-Septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Dementia (broad), Acute central respiratory depression (narrow), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hostility/aggression (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Chronic kidney disease (broad), Hypersensitivity (broad), Tumour lysis syndrome (broad), Respiratory failure (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Hypoglycaemia (broad), Infective pneumonia (broad), Hypokalaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 15 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: metoprolol amlodipine hydralazine omeprazole
Current Illness: hx CKD, DM, HTN lymphedema, bipolar d/o, previous covid infection dx 11/21 now admitted 12/29 with altered mental status, hypoxemic resp failure
Preexisting Conditions: see above
Allergies: lisinopril seasonal allergies
Diagnostic Lab Data: Normotensive. Labs are significant for glucose 112. Creatinine 1.49 (baseline creatinine approximately 1.3) VBG 7.49. UA showed positive leukocytosis esterase, Nitrites, $g 100 WBC. Blood culture blood cultures were obtained and are pending. CBC showed WC count of 2.6, hemoglobin 10.9. Neutrophils of 71% 6.3% bands.

CDC Split Type:
Write-up: altered mental status, hypoxic, fever 39.3, agitated

VAERS ID: 944252 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2020-12-19
Age: 64.0 Days after vaccination: 3
Sex: Male Submitted: 0000-00-00
Location: Florida Entered: 2021-01-14

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<td>20201216-1 / 1</td>
<td>LA / -</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Catheterisation cardiac, Myocardial infarction, SARS-CoV-2 test negative
SMQs: Myocardial infarction (narrow), Embolic and thrombotic events, arterial (narrow), COVID-19 (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 3 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Arthritis; Sulfonamide allergy
Allergies:
Diagnostic Lab Data: Test Date: 20201220; Test Name: Covid test via Nasal Swab; Test Result: Negative
CDC Split Type: USPFIZER INC2021013419
Write-up: Myocardial Infarction; This is a spontaneous report from a contactable Other healthcare professional (patient). A 64-year-old male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Batch/lot number: 20201216-1), via an unspecified route of administration on 16Dec2020 08:15 at single dose for COVID-19 immunization, vaccine location provided as Left arm. Medical history included arthritis and sulfa allergy. Prior to vaccination, the patient was not diagnosed with COVID-19.
The patient's concomitant medications were not reported. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient experienced myocardial infarction on 19Dec2020 23:00. The patient was hospitalized for myocardial infarction for 3 days. The patient underwent lab test which included Covid test via Nasal Swab post vaccination on 20Dec2020 with test result Negative. Therapeutic measure Cardiac cath procedure was taken as a result of myocardial infarction. The outcome of the event was recovering. This case was reported as Serious with seriousness criteria hospitalization.; Sender’s Comments: The Company cannot completely exclude the possible causality between the reported myocardial infarction and the administration of COVID-19 vaccine, BNT162B2, based on the reasonable temporal association. However, more information is required, such as the complete medical history, clinical course, for the Company to make a more meaningful causality assessment. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, IEC, as appropriate.

VAERS ID: 944270 (history) Vaccinated: 2020-12-16
Form: Version 2.0 Onset: 2020-12-16
Age: 58.0 Days after vaccination: 0
Sex: Male
Location: Massachusetts Submitted: 0000-00-00
Entered: 2021-01-14

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Administered by: Private Purchased by: ?
Symptoms: Basal ganglia haemorrhage, Blood pressure increased, Brain oedema, Cerebrovascular accident, Coagulation test normal, Computerised tomogram head abnormal, Culture negative, Fatigue, Hemiparesis, Impaired work ability, Intracranial mass, Muscular weakness, Myalgia, Platelet count decreased, Pyrexia, Syncope
SMQs:; Torsade de pointes/QT prolongation (broad), Rhabdomyolysis/myopathy (broad), Haematopoietic thrombocytopenia (narrow), Peripheral neuropathy (broad), Haemorrhage terms (excl laboratory terms) (narrow), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Hyponatraemia/SIADH (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypertension (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (narrow), Hypotonic-hyporesponsive episode (broad), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? Yes
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 22 days
  Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: Medical History/Concurrent Conditions: Hypertension; Stress
Allergies:
Diagnostic Lab Data: Test Date: 20201218; Test Name: BP; Result Unstructured Data: Test Result: high as 200s/100; Test Date: 20201218; Test Name: BP; Result Unstructured Data: Test Result: 179/101; Test Date: 20201218; Test Name: head CT; Result Unstructured Data: Test Result: Rt basal ganglia hemorrhage w/ edema and mass effe; Comments: Rt basal ganglia hemorrhage w/ edema and mass effect; Test Name: platelets; Result Unstructured Data: Test Result: normal coags; Test Date: 20201218; Test Name: platelets; Result Unstructured Data: Test Result: 114 (unknown baseline); Test Date: 20201218; Test Name: platelets; Result Unstructured Data: Test Result: Low; Test Date: 20201218; Test Name: Nasal Swab; Result Unstructured Data: Test Result: Negative
CDC Split Type: USPFIZER INC2021014540
Write-up: He collapsed with left sided hemiparesis; Stroke; Rt basal ganglia hemorrhage w/ edema and mass effect.; Low platelets, 114; His bp as high as 200s/100; Hand weakness; Myalgia; Fever; Severe fatigue; This is a spontaneous report from a contactable physician. A 58-year-old male patient received first dose of bnt162b2 (Pfizer BioNTech COVID vaccine), intramuscularly on 16Dec2020 at a single dose for COVID-19 immunization. Medical history included hypertension with reported med noncompliance in the last few months due to stress. Concomitant medication included hypertension medications in two weeks. The patient was presumed neg covid status prior to vaccine. He worked as a Pulm/critical care physician. He reported fever, myalgia, fatigue on 16Dec2020. Next day (17Dec2020), he took off from work due to his symptoms. The following day (18Dec2020), he came to work. He c/o ongoing severe fatigue & hand weakness in am. Staff noted him to be evaluating his hands during clinic. At 12:15, he collapsed with left sided hemiparesis. The reporter had suspicion for stroke. He was transported to the Emergency Room (ER), head CT showed Rt basal ganglia hemorrhage w/ edema and mass effect. Labs notable for Low platelets, 114 (unknown baseline) on 18Dec2020, normal coags on an unspecified date. BP recorded as 179/101, but it was noted in trauma room his bp as high as 200s/100. He had a history of hypertension with reported med noncompliance in the last few months due to stress. Patient was transferred for further care. Full course was unknown but had rebleed there with low plts. Adverse event (he collapsed with left sided hemiparesis) resulted in hospitalization (22 days), life threatening illness (immediate risk of death from the event), disability/incapacitating or permanent damage. Treatment was received for adverse events. Results of tests and procedures for investigation of the patient: on 18Dec2020, Nasal Swab test: negative. The outcome of events was not recovered. Unknown if 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 was not tested for COVID-19. Information on the lot/batch number has been requested.; Sender’s Comments: Collapsed with left sided hemiparesis/suspicion for stroke are as consequences of basal ganglia hemorrhage with edema, which is caused by worsening of hypertension. Low platelet also contributes to brain hemorrhage. All these serious events are unrelated to the vaccine use. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.

VAERS ID: 944280 (history) Vaccinated: 2021-01-06
Form: Version 2.0 Onset: 2021-01-06
Age: 25.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Illinois Entered: 2021-01-14

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<td>- / 1</td>
<td>LA / -</td>
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</tbody>
</table>

Administered by: Private Purchased by: ?
Symptoms: Blood test, Chest X-ray, Chest pain, Dizziness, Electrocardiogram, Heart rate increased, Hypoaesthesia, Nausea
SMQs: Acute pancreatitis (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Cardiomyopathy (broad), Vestibular disorders (broad), Dehydration (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications: VALTREX; TOPAMAX; LAMICTAL; CYMBALTA; GEODON [ZIPRASIDONE HYDROCHLORIDE]
Current Illness:
Preexisting Conditions: Comments: List of non-encoded Patient Relevant History: Patient Other Relevant History 1: None
Allergies:
Diagnostic Lab Data: Test Date: 202101; Test Name: Blood work; Result Unstructured Data: Test Result:Unknown results; Test Date: 202101; Test Name: Xray of heart; Result
Unstructured Data: Test Result: Unknown results; Test Date: 202101; Test Name: EKG; Result Unstructured Data: Test Result: Unknown results; Test Date: 20210106; Test Name: Heart rate; Result Unstructured Data: Test Result: 170; Comments: up to 170 with numbness of feet; Test Date: 202101; Test Name: Heart rate; Result Unstructured Data: Test Result: 135-140; Comments: Heart rate at the hospital was 135-140

**CDC Split Type:** USPFIZER INC2021016080

**Write-up:** Heart rate shot up to 170 with numbness of feet.; Heart rate shot up to 170 with numbness of feet.; Chest pain; feeling like I was going to vomit and faint; feeling like I was going to vomit and faint; This is a spontaneous report from a contactable other hcp (patient). A 25-year-old non-pregnant female patient received the first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 06Jan2021 at 11:45 at single dose in left arm for covid-19 immunization. There was no medical history. Concomitant medication included valaciclovir hydrochloride (VALTREX), topiramate (TOPAMAX), lamotrigine (LAMICTAL), duloxetine hydrochloride (CYMBALTA), ziprasidone hydrochloride (GEODON). On 06Jan2021 at 12:30, The patient experienced heart rate shot up to 170 with numbness of feet, started to feel chest pain, and feeling like she was going to vomit and faint. The events required emergency room visit and were reported as serious per hospitalization. Heart rate at the hospital was 135-140 where two EKG were done and fluids were given. An x-ray of the heart was done and blood work was completed. The patient didn"t receive treatment for the events. The patient didn"t receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient was not diagnosed with COVID-19 prior to vaccination, and has not been tested for COVID-19 since the vaccination. The outcome of the events was resolved in Jan2021. Information on batch/lot number has been requested.; Sender"s Comments: There is a reasonable possibility that the event "feeling like she was going to vomit" was related to BNT162b2 based on known drug safety profile. Based on the temporal relationship, the association between the other reported serious events with BNT162b2 can not be completely excluded. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.

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**VAERS ID:** 944283 (history)  
**Vaccinated:** 2021-01-08  
**Form:** Version 2.0  
**Age:** 34.0  
**Sex:** Female  
**Location:** Illinois  
**Onset:** 2021-01-01  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-14

**Vaccination / Manufacturer** | **Lot / Dose** | **Site / Route**
--- | --- | ---
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EL1283 / 2 | LA / OT

**Administered by:** Private  
**Purchased by:** ?

**Symptoms:** Appendectomy, Appendicitis, Chills, Headache, Hyperhidrosis, Hypersensitivity, Hypoaesthesia, Hypoaesthesia oral, Nausea, Paraesthesia, Paraesthesia oral, Pharyngeal hypoaesthesia, Pharyngeal paraesthesia, Rash

**SMQs:** Anaphylactic reaction (broad), Acute pancreatitis (broad), Angioedema (broad), Peripheral neuropathy (broad), Neuroleptic malignant syndrome (broad), Oropharyngeal
conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Sexual dysfunction (broad)

Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
   Extended hospital stay? No
Previous Vaccinations: 
Other Medications: 
Current Illness: 
Preexisting Conditions: Medical History/Concurrent Conditions: Anemia; Celiac disease; Gluten sensitivity (known allergies); Sulfonamide allergy (known allergies)
Allergies: 
Diagnostic Lab Data: 
CDC Split Type: USPFIZER INC2021017248
Write-up: Saturday had. Sweating. Chills. Headache. Nausea.; Saturday had. Sweating. Chills. Headache. Nausea.; Saturday had. Sweating. Chills. Headache. Nausea.; Saturday had. Sweating. Chills. Headache. Nausea.; Sunday had emergency appendectomy for actuate appendicitis.; Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat; Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat; Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat; Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat; Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat; Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat; Post surgery had allergic reaction unknown reason with head to toe rash; Post surgery had allergic reaction unknown reason with head to toe rash; This is a spontaneous report from a contactable nurse (patient). A 34-year-old female patient (pregnant: No) received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via intramuscular (lot number: EL1283) on left arm on 08Jan2021 at 6:30 AM at single dose for covid-19 immunisation. The relevant medical history included celiac, anemia, known allergies: Sulfa and Gluten. Concomitant medications were not reported. The patient received first dose of BNT162B2 via intramuscular (lot number: Ek5730) on left leg on 18Dec2020 at 11:00 AM at single dose for covid-19 immunisation. The patient previously took Codeine, fish oil and experienced allergies. Friday at 3pm, the patient had numbness and tingling to left hand, lips and throat. On Saturday the patient had sweating, chills, headache, nausea. On Sunday had emergency appendectomy for actuate appendicitis. Post surgery had allergic reaction unknown reason with head to toe rash. It was also reported that the adverse event started on 08Jan2021 at 03: 15 PM (as reported). The patient had 1-day hospitalization. The patient received treatment for the events. The adverse events resulted in Emergency room/department or urgent care. The events were reported as serious due to life threatening and hospitalization. The most recent COVID-19 vaccine was administered at hospital. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The outcome of the events was recovering.; Sender"s Comments: A
causal association between BNT162B2 and the reported events cannot be excluded based on a compatible temporal relation between vaccination and onset of events. Medications administered during appendectomy may confound reactions experienced post-surgery. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.

VAERS ID: 944287 (history)

Form: Version 2.0

Age: 66.0
Sex: Male
Location: Missouri

Vaccinated: 2020-12-29
Onset: 2020-12-29
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2021-01-14

Vaccination / Manufacturer

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL1284 / 1</td>
<td>LA / -</td>
</tr>
</tbody>
</table>

Administered by: Private
Purchased by: ?

Symptoms: Atrial fibrillation, Condition aggravated, Feeling cold, Heart rate increased
SMQs: Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: AFib (formally diagnosed around Jan2020)

Allergies:
 Diagnostic Lab Data: Test Name: heart rate; Result Unstructured Data: Test Result:117; Comments: watch told him his heart rate was 117

CDC Split Type: USPFIZER INC2021018815

Write-up: he was in AFIB for about 3 hours after receiving his first dose of the COVID19 Vaccine; he noticed the rest of the day, right up to going to bed that he felt cold; This is a spontaneous report from a contactable consumer. A 66-year-old male patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot Number: EL1284) at arm, left upper, via an unspecified route of administration on 29Dec2020 06:15 at single dose for
covid-19 immunisation. Medical history included atrial fibrillation (Afib) formally diagnosed around Jan2020. There were no concomitant medications. The patient reported he got the COVID-19 Vaccine at 06:15 on 29Dec2020 and had to sit for 15 minutes afterwards before he could leave. He said everything was fine, and he walked out to the hospital lobby, and was speaking with a work associate for 10 minutes before he headed to his car. When he got ready to leave, he got in his car, and started his car. He started driving home, and realized he was in AFIB. He did have an AFIB issue. His AFIB has been pretty well controlled for a year now, as long as, he didn"t do something stupid. He had a moderately aggressive run of AFIB. He said his "smart" watch told him his heart rate was 117. His normal heart rate is around 60-70. He was in AFIB for about 3 hours. His typical runs of AFIB are considerably shorter. He only had a total of 2 episodes of AFIB in the last year. His prior AFIB episodes would have been about 4-5 minutes. The last time he had AFIB that lasted any length of time was when he was hospitalized for AFIB around Jan2020. He said at that time, he was hospitalized overnight for observation. He received medication during the hospitalization and his AFIB broke. He didn"t remember what medications were given to him during the hospitalization. He said he had flutters before that hospitalization, but the flutters were always gone after a few minutes, so he never sought treatment because there would be nothing to treat. The patient reported he noticed the rest of the day on 29Dec2020, right up to going to bed that he felt cold. His house wasn"t cold, and he didn"t have a fever. He said the cold feeling went away during the night while he was sleeping. He said the cold feeling easily lasted for a 12 hours. He said the cold feeling could have been something else. The outcome of "he was in afib for about 3 hours after receiving his first dose of the covid19 vaccine" was recovered on 29Dec2020; of "he noticed the rest of the day, right up to going to bed that he felt cold" was recovered on 30Dec2020.

VAERS ID: 944289 (history)
Form: Version 2.0
Age: 22.0
Sex: Female
Location: New Jersey
Vaccinated: 2021-01-06
Onset: 2021-01-09
Days after vaccination: 3
Submitted: 0000-00-00
Entered: 2021-01-14

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK9231 / 2</td>
<td>LA / -</td>
</tr>
</tbody>
</table>

Administered by: Private     Purchased by: ?
Symptoms: Condition aggravated, Culture negative, Cyanosis, Deep vein thrombosis, Peripheral swelling, Pulmonary embolism
SMQs:, Cardiac failure (broad), Anaphylactic reaction (broad), Angioedema (broad), Embolic and thrombotic events, venous (narrow), Thrombophlebitis (broad), Acute central respiratory depression (broad), Extravasation events (injections, infusions and implants) (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Hypotonic-hyporesponsive episode (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
  Extended hospital stay? No
Previous Vaccinations:
Other Medications:
Current Illness:
Preexisting Conditions: Medical History/Concurrent Conditions: Clot blood; Fish allergy
Allergies:
Diagnostic Lab Data: Test Date: 20210109; Test Name: Nasal Swab; Test Result: Negative
CDC Split Type: USPFIZER INC2021023309
Write-up: she was diagnosed with bilateral deep vein thrombosis (DVT) and pulmonary
embolism (PE); she was diagnosed with bilateral deep vein thrombosis (DVT) and pulmonary
embolism (PE); This is a spontaneous report from a contactable nurse (patient). A 22-year-old
female patient received 2nd dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE,
lot# EK9231), via an unspecified route of administration in left arm on 06Jan2021 13:45 at
single dose for COVID-19 immunisation. Medical history included allergy to all fish, and clots.
The patient was not pregnant. There were no concomitant medications. The patient previously
received 1st dose of BNT162B2 (lot numer: EH9899) in left arm on 16Dec2020 13:45 for
COVID-19 immunisation and experienced left sided lower back pain on 20Dec2020. No other
vaccine received in four weeks. It was reported that the patient had the first covid vaccine on
16Dec2020 and on 20Dec2020 started with left sided lower back pain and then received the
second on 06Jan2021 and then on 09Jan2021 11:00 her legs became blue and swollen and
she was diagnosed with bilateral deep vein thrombosis (DVT) and pulmonary embolism (PE).
The patient otherwise healthy and had never had covid. Other than the clots, she had no other
health issues. The patient underwent lab tests and procedures which included nasal swab:
negative on 09Jan2021. Events resulted in doctor or other healthcare professional office/clinic
visit, emergency room/department or urgent care, hospitalization, and life threatening illness
(immediate risk of death from the event), hospitalized for 2 days (in Jan2021). Adverse event
treatment: heparin drip and xarelto at home. Recovered with lasting effects on an unspecified
date of Jan2020. This case was reported as serious, serious criteria was life threatening,
caused/prolonged hospitalization.; Sender”s Comments: The underlying risk
factors/predisposing condition of thrombotic diathesis have been assessed to have played a
contributory role toward the events.

VAERS ID: 944450 (history) Vaccinated: 2021-01-13
Form: Version 2.0 Onset: 2021-01-13
Age: 26.0 Days after
Sex: Female vaccination: 0
Location: Massachusetts Submitted: 0000-00-00
Entered: 2021-01-14

<table>
<thead>
<tr>
<th>Vaccination / Manufacturer</th>
<th>Lot / Dose</th>
<th>Site / Route</th>
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</thead>
<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EK4176 / 2</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>
Administered by: Work  Purchased by: 
Symptoms: Cough, Dyspnoea, Electrocardiogram ST segment depression, Feeling hot, Flushing, Heart rate irregular, Lip swelling, Paraesthesia oral, Pruritus, Urticaria
SMQs:, Anaphylactic reaction (narrow), Angioedema (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Cardiomyopathy (broad), Cardiac arrhythmia terms, nonspecific (narrow), Other ischaemic heart disease (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypokalaemia (broad)
Life Threatening? Yes
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations: Flu vaccine administered on 10/7/20 at Medical Center to (r) deltoid. Lot # UJ427AC, manufacturer Fluzone. Reportedly develop
Other Medications: Cymbalta
Current Illness: Fioricet - Hives Mushrooms & pineapple - swollen lips, cough, hives Flu vaccine - had lip swelling and hives at injection site x 1 on 10/8/20 after receiving flu vaccine this year at Hospital. Has had flu vaccine annually prior to 2020 through the hospital without issues.
Allergies:
Diagnostic Lab Data: Per pt report Epi Pen administered on 1/13/21 in ED. EKG done in ED 1/13/21 & 1/14/21; IV medication administered.
CDC Split Type:
Write-up: Per pt, sx onset began at 1520 with pruritus/hives of the scalp. She was in the post vaccine observation area at this time. At 1530, EE returned to vaccination room to alert staff of her reaction. Upon hearing her new onset cough, an assessment was performed immediately. Reported tingling and swelling of her lips, cough, minor difficulty breathing with mask on, facial flushing and feeling hot, and severe pruritus, especially on the scalp. 50 mg IM Benadryl administered and was taken to ED via wheelchair which is 7 minutes away. Epi Pen administered in ED and admitted overnight for observation d/t irregular HR and ST depression on monitor.

VAERS ID: 944595 (history)  Vaccinated: 2021-01-12
Form: Version 2.0  Onset: 2021-01-12
Age: 56.0  Days after vaccination: 0
Sex: Male  Submitted: 0000-00-00
Location: Florida  Entered: 2021-01-14
<table>
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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL3302 / 2</td>
<td>AR / IM</td>
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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>EL0140 / 1</td>
<td>AR / IM</td>
</tr>
</tbody>
</table>

Administered by: Senior Living  
Purchased by: ?

Symptoms: Brain death, Cardiac arrest, Death, Intensive care, Life support, Unresponsive to stimuli

SMQs: Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Respiratory failure (broad), Hypoglycaemia (broad)

Life Threatening? No  
Birth Defect? No  
Died? Yes  
  Date died: 2021-01-14  
  Days after onset: 2  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 2 days  
  Extended hospital stay? No  
Previous Vaccinations:

Other Medications: losartan, spironolactone, carvedilol  
Current Illness: No known new illnesses,  
Preexisting Conditions: Cardiomyopathy  
Allergies: nkda  
Diagnostic Lab Data: multiple Full ER code and then ICU support for 2 days  
CDC Split Type:

Write-up: Cardiac arrest within 1 hour Patient had the second vaccine approximately 2 pm on Tuesday Jan 12th He works at the extended care community and was in good health that morning with no complaints. He waited 10-15 minutes at the vaccine admin site and then told them he felt fine and was ready to get back to work. He then was found unresponsive at 3 pm within an hour of the 2nd vaccine. EMS called immediately worked on him 30 minutes in field then 30 minutes at ER was able to put him on life support yet deemed Brain dead 1-14-21 and pronounced dead an hour or so later
<table>
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<tr>
<th>Vaccination / Manufacturer</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>025L20A / 1</td>
<td>RA / IM</td>
</tr>
</tbody>
</table>

Administered by: Unknown  
Purchased by: ?

Symptoms: Joint range of motion decreased, Loss of personal independence in daily activities, Mobility decreased, Neck pain, Pain in extremity, Seizure

SMQs: Systemic lupus erythematosus (broad), Dementia (broad), Convulsions (narrow), Parkinson-like events (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Generalised convulsive seizures following immunisation (narrow), Arthritis (broad), Tendinopathies and ligament disorders (broad), Hypoglycaemia (broad)

Life Threatening? No  
Birth Defect? No  
Died? No  
Permanent Disability? No  
Recovered? No  
Office Visit? No  
ER Visit? No  
ER or Doctor Visit? Yes  
Hospitalized? Yes, 2 days  
Extended hospital stay? No  

Previous Vaccinations:
Current Illness:
Preexisting Conditions: Epilepsy under control, no seizures for 2 years
Allergies:
Diagnostic Lab Data:

Write-up: 1/7/2021 @ 5:00 a.m. patient woke up and couldn"t move her right side (neck, arm and leg). Sister helped dress her and drove her to the hospital. During the ride the hospital the patient had 2 seizures and a 3rd seizure in the ER at the hospital. Patient states she has never had multiple, back to back seizures before. States she hasn't had a seizure for 2 years. EEG was done. Was released from the hospital on 1/9/2021 and to have outpatient MRI of head, shoulder, c-spine. Does not have full range of motion of right neck, and arm, hand and fingers and is painful. 1/14/2021 - full release back to work on 1/14/2021.
VAERS ID: **944782** (history) Vaccinated: 2021-01-13
Form: Version 2.0 Onset: 2021-01-14
Age: 72.0 Days after vaccination: 1
Sex: Male
Location: Kentucky Submitted: 0000-00-00

<table>
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<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / UNK</td>
<td>LA / IM</td>
</tr>
</tbody>
</table>

Administered by: Private
Purchased by: ?
Symptoms: Atrial fibrillation, Atrial flutter, Palpitations, Supraventricular tachycardia, Tachycardia
SMQs: Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Supraventricular tachyarrhythmias (narrow), Cardiomyopathy (broad), Dehydration (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, ? days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Ramipril 10mg daily aspirin 325mg daily rosvastatin 10mg daily ezetimibe 10mg daily
Current Illness: NO KNOWN
Preexisting Conditions: Coronary artery disease
Allergies: NKDA
Diagnostic Lab Data: CBC, Magnesium troponin ekg chest x ray ordered on 1/14, cardiology consulted, 2-1 atrial flutter. differential diagnosis palpitations, tachycardia, SVT, atrial fibrillation
CDC Split Type:
Write-up: on 1/14/21 patients HR 155 at 0800 per patient"s home pulse ox device. arrived at ER, HR 148 at 1130. Continued to stay up even after 2 doses of 10mg iv push Cardizem and one dose of 30mg Cardizem. Cardizem drip started, heparin drip started, patient admitted to hospital

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VAERS ID: **944857** (history) Vaccinated: 2021-01-12
Form: Version 2.0 Onset: 2021-01-13
Age: 80.0 Days after vaccination: 1
Sex: Female
Location: Florida Submitted: 0000-00-00
Entered: 2021-01-14
**Vaccination / Manufacturer**

| COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH | EK9231 / UNK | RA / IM |

**Administered by:** Other  
**Purchased by:** ?

**Symptoms:** Cerebrovascular accident, Dizziness, Dysarthria, Feeling abnormal, Frustration tolerance decreased, Headache

**SMQs:** Anticholinergic syndrome (broad), Ischaemic central nervous system vascular conditions (narrow), Haemorrhagic central nervous system vascular conditions (narrow), Dementia (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Conditions associated with central nervous system haemorrhages and cerebrovascular accidents (broad), Vestibular disorders (broad), Hypoglycaemia (broad)

**Life Threatening?** No  
**Birth Defect?** No  
**Died?** No  
**Permanent Disability?** No  
**Recovered?** No  
**Office Visit?** No  
**ER Visit?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** Yes, ? days  
**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Aspirin 81 MG, Famotidine 20 MG, Lasix 20MG, Levsin0.125 MG  
Potassium Chloride ER 10 MQ, Protonix 40 MG, Zoloft 50MG, Mutli 50+ for her, Nystatin cream, Tylenol 325MG (as needed), Zofran 4MG (as needed)

**Current Illness:**

**Preexisting Conditions:** Anemia of Chronic illness, CVA/Stroke, Hyperlipidemia, Hypothyroidism, Unspecified Memory Loss

**Allergies:** NKDA

**Diagnostic Lab Data:**

**CDC Split Type:**

**Write-up:** Patient presented herself to LPN slurring words and "not herself". Upon evaluation, patient denied drinking alcohol, knew she was not able to speak correctly and visibly frustrated. With great difficulty she was able to communicate that she had a headache and was slightly dizzy. Failed FAST and does have a history of CVAs. EMS called and patient was taken to ER where they admitted her for observation post Stroke. Per the hosp nurse, patient received tPA treatment and will be moved to step-down unit when a bed is available.

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**VAERS ID:** [944973](https://www.vaers.org)  
**Form:** Version 2.0  
**Age:** 48.0  
**Sex:** Female  
**Location:** Unknown  
**Vaccinated:** 2021-01-07  
**Onset:** 2021-01-08  
**Days after vaccination:** 1  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-14
### Vaccination / Manufacturer | Lot / Dose | Site / Route
--- | --- | ---
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | 012L20A / 1 | RA / IM

**Administered by:** Other  
**Purchased by:** ?

**Symptoms:** Dizziness, Headache, Nausea

**SMQs:** Acute pancreatitis (broad), Anticholinergic syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad)

**Life Threatening?** No

**Birth Defect?** No

**Died?** No

**Permanent Disability?** No

**Recovered?** No

**Office Visit?** No

**ER Visit?** No

**ER or Doctor Visit?** No

**Hospitalized?** Yes, ? days

**Extended hospital stay?** No

**Previous Vaccinations:**

**Other Medications:** Unknown

**Current Illness:** unknown

**Preexisting Conditions:** unknown

**Allergies:** unknown

**Diagnostic Lab Data:** unknown

**CDC Split Type:**

**Write-up:** staff member reported headache, dizziness and nausea. Staff member currently hospitalized at hospital

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**VAERS ID:** [945045](https://www.vaers.org/vaers/record/945045) (history)  
**Vaccinated:** 2021-01-12  
**Form:** Version 2.0  
**Onset:** 2021-01-13  
**Age:** 87.0  
**Days after vaccination:** 1  
**Sex:** Male  
**Submitted:** 0000-00-00  
**Entered:** 2021-01-14

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**Administered by:** Senior Living  
**Purchased by:** ?

**Symptoms:** Body temperature increased, Diet refusal, Fatigue, Heart rate increased, Lethargy, Nausea

**SMQs:** Acute pancreatitis (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad)

**Life Threatening?** No

**Birth Defect?** No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, ? days
   Extended hospital stay? No

Previous Vaccinations:
Other Medications: ALBUTEROL, ASPIRIN, BREO ELLIPTA, COLACE, ELIZQUIS, FERROUS GLUCONATE, FLOMAX, LIPITOR, METOPROLOL, PROSCAR, PROTONIX, TRAMADOL, CIPROFLOXACIN HCL

Current Illness: I67.89, S80.12XD, Z97.8, L97.929, S91.302D, G47.29, S60.511A, S60.512A, M62.59, U07.1, K92.1, I48.20, G93.40, I95.9, J18.9, A41.50, E87.5, R33.9, F41.9, G47.00, R06.2, Z79.811, J30.9, R25.2, D49.9, D72.829, E43, C18.7, Z86.73, D63.8, G93.41, E87.2, N31.9, R74.8, R53.81, R78.81, H61.22, I63.10, Z29.9, J44.0, R05, A46, L03.9, I48.91, S61.412A, J44.1, F33.0, R29.898, N147.9, Z79.52, A41.9, Z98.890, R53.1, L97.129, E78.5, S70.12XA, Z98.818, L29.9, N32.81, E56.9, R19.7, K21.9, L03.116, E27.40, S81.802D, I87.2, R52, D64.9,H91.90, H40.89, Z41.8, G47.23, J44.9, H16.229, E87.6, E63.9, N40.0, M62.838, L21.96,73.9, R60.9, I10, I67.89, M62.89, L08.96, L97.922

Preexisting Conditions:

Allergies: LYRICA

Diagnostic Lab Data: UNKNOWN

CDC Split Type:
Write-up: EXTREME LETHERGY, NAUSEA, REFUSING TO EAT OR DRINK, ELEVATED HEARTRATE, FATIGUE, ELEVATED TEMP

VAERS ID: 945099 (history)

Vaccinated: 2020-12-22
Onset: 2020-12-24
Days after vaccination: 2
Submitted: 0000-00-00
Entered: 2021-01-14

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	- / 1	LA / IM

Administered by: Work	Purchased by: ?

Symptoms: Alanine aminotransferase increased, Aspartate aminotransferase increased, Asthenia, Blood alkaline phosphatase increased, Blood bilirubin increased, Blood chloride decreased, Blood potassium decreased, Blood sodium decreased, Chills, Decreased appetite, Dehydration, Dizziness, Dry eye, Dry mouth, Feeding disorder, Fluid intake reduced, Haemoglobin decreased, Influenza virus test negative, Jaundice, Liver function test abnormal, Lymphocyte count normal, Nausea, Pain, Pyrexia, SARS-CoV-2 test negative, White blood cell count increased

SMQs: Liver related investigations, signs and symptoms (narrow), Cholestasis and jaundice of hepatic origin (narrow), Acute pancreatitis (narrow), Haematopoietic erythropenia (broad),
Haemorrhage laboratory terms (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Biliary system related investigations, signs and symptoms (narrow), Biliary tract disorders (narrow), Guillain-Barre syndrome (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Hyponatraemia/SIADH (narrow), Corneal disorders (broad), Vestibular disorders (broad), Conjunctival disorders (narrow), Lacrimal disorders (narrow), Chronic kidney disease (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (narrow), Dehydration (narrow), Hypokalaemia (narrow), COVID-19 (broad)

**Life Threatening?** No
**Birth Defect?** No
**Died?** No
**Permanent Disability?** No
**Recovered?** No
**Office Visit?** Yes
**ER Visit?** No
**ER or Doctor Visit?** Yes
**Hospitalized?** Yes, 2 days
  - **Extended hospital stay?** No
**Previous Vaccinations:**
**Other Medications:** Pfizer Covid 19 vaccine, dose #1
**Current Illness:** none
**Preexisting Conditions:** low dose blood pressure med, corrected hypertension multivitamin
**Allergies:** shellfish
**Diagnostic Lab Data:** labs on Jan 2 and Jan 8 in comparison WBC 8.3, 11.9 Hgb 11.0-12.4, Lymphocytes 4.0 Na 137, 132 Potassium 3.4-4.3 Chloride 100, 95 Alk Phosphate 168, 520, ALT 54-353 AST 48, 198 Total Bili 6.7, 6.2

**CDC Split Type:**
**Write-up:** Dec 24 felt light headed and loss of appetite, Dec 25, fever 103 and chills, Dec 26 Team member Covid hub had me do a Covid test, negative result, continue high fever, no appetite, chills and body ache, Health Hub contacted me daily with app to review symptoms, Dec 27-29 continued symptoms, unable to eat and little bit of water intake, Dec 29 appointment made with Health Urgent Care, received text from Urgent Care cancelling appointment and instructed to take sips of water and Tylenol that I was having an immune reaction to vaccine. Dec 29 virtual appointment with PCP continued symptoms, Dec 31 repeat of COVID swab along with Flu swab both negative, Jan 2-3 hospital admission for abnormal labs, jaundice, dehydration, Sodium/Potassium and Magnesium boluses given, and work up for infectious process was negative. Discharged to home Jan 3 with low grade fever, dry mouth, dry eyes, nausea, body ache and continued loss of appetite. Jan 4-7 continued worsening jaundice and appetite with low grade fever, GI Clinic consulted at Health Clinic, PCP in daily contact, repeat liver function labs on Jan 8 showed worsening labs. Jan 9-12 afebrile, started Ursodiol, low appetite better energy, continue dry mouth, GI appointment Jan 12 with plan to repeat liver functions on Jan 15, jaundice improved and able to eat liquids. No Tylenol or antipyretic taken since Jan 3 due to liver function tests.
VAERS ID: 945133 (history)  Vaccinated: 2021-01-12
Form: Version 2.0  Onset: 2021-01-12
Age: 59.0  Days after vaccination: 0
Sex: Female
Location: Illinois
Vaccinated: 2021-01-12
Onset: 2021-01-12
Days after vaccination: 0
Submitted: 0000-00-00
Entered: 2021-01-14

Vaccination / Manufacturer | Lot / Dose | Site / Route
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COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA | - / 1 | LA / IM

Administered by: Other  Purchased by: ?
Symptoms: Angiogram normal, Chest discomfort, Echocardiogram abnormal, Electrocardiogram change, Left ventricular dysfunction, Left ventricular hypertrophy, Pyrexia, Troponin increased
SMQs: Cardiac failure (broad), Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Myocardial infarction (narrow), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Cardiomyopathy (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Thyroid compound T4 108 mcg T3 10 mcg ASA 162 mg sly D3 20 mcg Calcium 600 mg Amoxicillin 875 mg twice a day (one dose taken)
Current Illness: Ear infection diagnosed 1/12/21
Preexisting Conditions:
Allergies: Chloraprep rash
Diagnostic Lab Data: Angiogram normal, echo showed new left ventricular hypertrophy and decreased function. Cardiologist unclear if it was myocarditis or coronary spasm, waiting to have MRI outpatient to determine myocarditis
CDC Split Type:
Write-up: Developed chest pressure 8.5 hours after vaccine, unrelieved after 3 hours, went to ED, elevated troponin, EKG changes. Admitted to hospital low grade fever next day

VAERS ID: 945238 (history)  Vaccinated: 2020-12-17
Form: Version 2.0  Onset: 2020-12-25
Age: 36.0  Days after vaccination: 8
Sex: Male
Location: Illinois
Vaccinated: 2020-12-17
Onset: 2020-12-25
Days after vaccination: 8
Submitted: 0000-00-00
Entered: 2021-01-14
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

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<tr>
<th>Vaccination / Manufacturer</th>
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<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / SYR</td>
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</table>

Administered by: Private       Purchased by: ?
Symptoms: Abdominal pain, Computerised tomogram abdomen, Endoscopic ultrasound, Full blood count, Lipase, Lipids, Magnetic resonance cholangiopancreatography, Metabolic function test, Oesophagogastroduodenoscopy, Pancreatitis, Ultrasound scan
SMQs: Acute pancreatitis (narrow), Retroperitoneal fibrosis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Immune-mediated/autoimmune disorders (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 4 days
   Extended hospital stay? No
Previous Vaccinations:
Other Medications: Metformin, jardiance, victoza, lisinopril, atorvastatin, lexapro, Wellbutrin
Current Illness:
Preexisting Conditions: Dm2, HTN, anxiety, depression
Allergies: Clindamycin
Diagnostic Lab Data: CBC, cmp, lipase, lipid profile, abdominal CT, US, MRCP, EGD with EUS
CDC Split Type:
Write-up: I developed severe abdominal pain 3 days after injection that turned out to be pancreatitis

VAERS ID: 945289 (history) Vaccinated: 2020-12-18
Form: Version 2.0 Onset: 2020-12-18
Age: 57.0 Days after vaccination: 0
Sex: Female Submitted: 0000-00-00
Location: Texas Entered: 2021-01-14

COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH

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<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 1</td>
<td>LA / SYR</td>
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</tbody>
</table>

Administered by: Private       Purchased by: ?
Symptoms: Asthenia, Fatigue, Feeling abnormal, Headache, Laboratory test, Pain, SARS-CoV-2 test positive
VAERS ID: 945336 (history)  
Vaccinated: 2021-01-05  
Form: Version 2.0  
Onset: 2021-01-05  
Age: 74.0  
Sex: Male  
Days after vaccination: 0  
Submitted: 0000-00-00  
Entered: 2021-01-14  

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<th>Lot / Dose</th>
<th>Site / Route</th>
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<tbody>
<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>- / UNK</td>
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</table>

Administered by: Senior Living  
Purchased by: ?

Symptoms: Abnormal behaviour, Cerebral ventricle dilatation, Computerised tomogram abnormal, Eyelid ptosis, Facial paralysis, Laboratory test, Posture abnormal, Sinusitis

SMQs.: Dementia (broad), Dystonia (broad), Psychosis and psychotic disorders (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hostility/aggression (broad), Hearing impairment (broad), Periorbital and eyelid disorders (narrow), Ocular motility disorders (narrow)
Hospitalized? Yes, 2 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Vitamin D, Depacote, Fiber, Finasperiode, Glucosamine Sulfate, Multivitamin, Terazosin, Ibuprofen

Current Illness: Chest pains, COVID 11/6/2020
Preexisting Conditions: BPH, degenerative joint disease, GERD, Osteoporosis, Traumatic Brain Injury, Degenerative joint back

Allergies: no

Diagnostic Lab Data: CT Scan, labs

VAERS ID: [945380](history)  Vaccinated: 2021-01-07
Form: Version 2.0  Onset: 2021-01-07
Age: 37.0  Days after vaccination: 0
Sex: Female  Submitted: 0000-00-00
Location: North Carolina  Entered: 2021-01-14

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<th>Site / Route</th>
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<tr>
<td>COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH</td>
<td>- / 2</td>
<td>RA / SYR</td>
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Administered by: Private  Purchased by: ?

Symptoms: Chest pain, Computerised tomogram, Dyspnoea, Echocardiogram, Laboratory test

SMQs: Anaphylactic reaction (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? Yes
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 1 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Armodafinil Zoloft

Current Illness:
Preexisting Conditions:
Allergies:
Diagnostic Lab Data: CT scan Echo Several labs Ed x2 Admission
Write-up: Shortness of breath Chest pain Ongoing since

VAERS ID: 945433 (history) Vaccinated: 2021-01-05
Form: Version 2.0 Onset: 2021-01-07
Age: 67.0 Days after vaccination: 2
Sex: Male Submitted: 0000-00-00
Location: California Entered: 2021-01-14

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<tr>
<td>COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA</td>
<td>039K20A / 1</td>
<td>RA / IM</td>
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</tbody>
</table>

Administered by: Senior Living Purchased by: ?
Symptoms: Acute kidney injury, Blood creatinine increased, Pyrexia
SMQs: Rhabdomyolysis/myopathy (broad), Acute renal failure (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (broad), Torsade de pointes, shock-associated conditions (broad), Hypovolaemic shock conditions (broad), Toxic-septic shock conditions (broad), Anaphylactic/anaphylactoid shock conditions (broad), Hypoglycaemic and neurogenic shock conditions (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Dehydration (broad)

Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? Yes
Office Visit? No
ER Visit? No
ER or Doctor Visit? No
Hospitalized? Yes, 7 days
Extended hospital stay? No

Previous Vaccinations:
Other Medications: Alogliptin, glipizide, metformin, aspirin, amlodipine, atorvastatin, cholecalciferol, gabapentin, lidocaine patch, quetiapine, BiCitra, acetaminophen, bisacodyl, senna, polyethylene glycol, lubricating eyedrops, nystatin powder

Current Illness: History of COVID earlier in December
Preexisting Conditions: Type 2 diabetes complicated by nephropathy, neuropathy and retinopathy; CKD-3; mild cognitive impairment; peripheral vascular disease; coronary artery disease; schizophrenia
Allergies: ACE inhibitors, ARBs
Diagnostic Lab Data: See above.

CDC Split Type:
Write-up: Fever to 100.4 on day 1 after vaccine, to 101.9 on day 3 after vaccine. Acute kidney injury (creatinine rose from 1.73 to 2.43) requiring hospitalization.
VAERS ID: 945504 (history)  Vaccinated: 2021-01-11
Form: Version 2.0  Onset: 2021-01-12
Age: 36.0  Days after vaccination: 1
Sex: Female  Submitted: 0000-00-00
Location: California  Entered: 2021-01-14

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<td>EL1284 / 2</td>
<td>RA / -</td>
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</table>

Administered by: Private  Purchased by: ?
Symptoms: Angiogram, Anxiety, Arthralgia, Blood lactic acid increased, Blood test, Cardiovascular evaluation, Chest X-ray normal, Chest discomfort, Chest pain, Chills, Computerised tomogram thorax normal, Contusion, Diarrhoea, Dizziness, Dyspnoea, Echocardiogram, Fatigue, Fibrin D dimer increased, Headache, Heart rate increased, Hypoaesthesia, Nausea, Neck pain, Pain, Pain in extremity, Paraesthesia, Pyrexia, Scan with contrast, Tachycardia, Urine analysis normal, Visual impairment
SMQs: Anaphylactic reaction (broad), Acute pancreatitis (broad), Lactic acidosis (narrow), Peripheral neuropathy (broad), Haemorrhage terms (excl laboratory terms) (narrow), Haemorrhage laboratory terms (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Pseudomembranous colitis (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Accidents and injuries (narrow), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Glaucoma (broad), Optic nerve disorders (broad), Cardiomyopathy (broad), Lens disorders (broad), Retinal disorders (broad), Vestibular disorders (broad), Arthritis (broad), Noninfectious diarrhoea (narrow), Tendinopathies and ligament disorders (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad), Sexual dysfunction (broad)
Life Threatening? No
Birth Defect? No
Died? No
Permanent Disability? No
Recovered? No
Office Visit? No
ER Visit? No
ER or Doctor Visit? Yes
Hospitalized? Yes, 2 days
Extended hospital stay? No
Previous Vaccinations:
Other Medications: Vitamin D 50,000 IUs weekly, Ditropan 10mg daily, flexiril 10 mg PRN, melatonin 5mg at bedtime, multivitamins, Alani Nu Balance daily, probiotic
Current Illness: None
Preexisting Conditions: Interstitial cystitis, Vertigo, migraines
Allergies: No allergies
Diagnostic Lab Data: CTA chest with contrast, chest xray, urinalysis, echocardiogram, blood labs

CDC Split Type:

Write-up: After first vaccine i experienced fatigue, body aches, headache and nausea for 2 days and injection site pain for two weeks. After second Vaccine given at 9:55am. tingling of feet for about 20 mins, 30 mins after the vaccine. Two hours later fatigue, body aches, headache and nausea began. At 0030 1/12/2021 I woke up with severe chills and left chest pain, temp was 101.6 and heart rate was 160. I began to see black and chest pain was severe feeling like i was having a heart atack and was going to pass out so i called 911. I then began to get short of breath and got numbess on my legs, left arm and left side of neck. Chest pressure/pain radiated to left arm and neck. I was taken by the ambulance to hospital. Arrived around 0130. My heart rate sustained at 140s in the ER so I was admitted at 0530 am. My D Dimer was a bit elevated as well as my lactic so I was given a bolus of fluids plus maintenance. I had a CXR done, CTA chest(negative for PE), UA, Labs, entire cardiac workup including an ECHO during my admission. I also began to have loose stools and wrist joint pain. MY heart rate sustained at 125-147 for about 30 hours. Fevers on and off. After everthing was negative we determined this was secondary to the covid 19 vaccine. I was discharged 1/13/2021 at around 1:30 pm. My heart rate is still not at baseline which is 87-90. I"m 100-130 and still get very fatigued with a simple slow walking. Still having tachycardia, fevers, body aches, joint wrist pain, chest discomfort and headaches. My potassium was 3.0 at discharge so will be needing labs in a week. Also bruised a little different than I usually do with lab draws so keeping an eye on them and will be checking my platelets again in a week. Ive been taking tylenol for my fever and pain and ativan for any anxiety when my heart rate goes up. (treatment during hospital stay was normal saline bolus, nomal saline maintenance fluids at 150 cc/hr, tylenol, ativan, ice packs, rest)

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