

## Guidelines for immunisation medical exemption

### What is considered a valid medical contraindication to immunisation?

The medical basis for vaccine exemption is to be based on guidance in *The Australian Immunisation Handbook* which is available on the Immunise Australia website [immunisationhandbook.health.gov.au](http://immunisationhandbook.health.gov.au)

The Australian Technical Advisory Group on Immunisation has released expanded guidance on acute major medical conditions that warrant a temporary medical contraindication relevant for COVID-19 vaccines. This information is available on the Department of Health website [health.gov.au/resources/collections/covid-19-vaccination-provider-resources](http://health.gov.au/resources/collections/covid-19-vaccination-provider-resources)

Medical contraindications include:

- anaphylaxis following a previous dose of the relevant vaccine
- anaphylaxis following any component of the relevant vaccine
- significant immunocompromise (for live attenuated vaccines only).

For further details, including what is considered significant immunocompromise, see *The Australian Immunisation Handbook*. For example, HIV-infected persons in whom immunocompromise is mild can be given MMR and varicella vaccines.

Individuals should not be denied the benefits of immunisation by withholding vaccines for inappropriate reasons. A comprehensive list of false contraindications to vaccination is provided in *The Australian Immunisation Handbook*.

- Egg allergy, even severe, is not necessarily a valid exemption for any vaccine routinely recommended for children.
- Presence of a chronic underlying medical condition (apart from significant immunocompromise) is not a valid vaccine exemption.
- Family history of any adverse events following immunisation is not a valid vaccine exemption.

### In what circumstances should a vaccine be temporarily deferred?

There are some circumstances where the administration of a vaccine should be deferred. These include:

- acute major medical condition
- significantly impaired immune function that is anticipated to be of short duration
- pregnancy (for live attenuated vaccines only).

While vaccination should be deferred in persons with acute febrile illness (current  $T \geq 38.5^{\circ}\text{C}$ ) or other self-limiting acute systemic illness, this would usually be for short periods only and not require completion of this form. For detailed advice check *The Australian Immunisation Handbook*.

### What evidence should I consider when assessing a possible natural immunity?

A previous infection is not a contraindication to immunisation against that same disease. Laboratory testing (via serology, antigen detection or polymerase chain reaction [PCR]) can reliably provide evidence of immunity to hepatitis B, varicella, measles, mumps and rubella. A physician-based clinical diagnosis is accepted although is less reliable than laboratory testing as these diseases are now uncommon among Australian children due to the widespread immunisation and other infections can have similar clinical presentations.

### Who do I contact if I am uncertain whether to vaccinate or not?

Further advice can be sought from your state or territory health authority (see contact details below). In most states and territories specialist immunisation clinics exist which are equipped to assist with complex issues, such as how to manage patients who have experienced a previous adverse event following immunisation or who have an underlying medical condition.

### Resources for communicating the risks and benefits of immunisation

The following resources are available to facilitate discussion on the risks and benefits of immunisation with patients and/or their carers, including those who may have concerns relating to vaccines and immunisation:

- The summary table inside the back cover of the *The Australian Immunisation Handbook* providing 'Comparison of the effects of diseases and the side effects of NIP vaccines'.
- Other resources available at [health.gov.au/health-topics/immunisation/health-professionals](http://health.gov.au/health-topics/immunisation/health-professionals)
- Vaccine preventable disease and vaccine safety factsheets prepared by the National Centre for Immunisation Research and Surveillance  
[ncirs.edu.au/provider-resources/ncirs-fact-sheets](http://ncirs.edu.au/provider-resources/ncirs-fact-sheets)
- Commonwealth COVID-19 vaccine hub  
[health.gov.au/COVID19-vaccines](http://health.gov.au/COVID19-vaccines)

### Contact details for state and territory government health authorities

Australian Capital Territory Immunisation Enquiry Line	<b>02 6205 2300</b>
New South Wales (to contact your local public health unit)	<b>1300 066 055</b>
Northern Territory Centre for Disease Control	<b>08 8922 8044</b>
Queensland (to contact your local public health unit)	<b>13 HEALTH (13 4325 84)</b>
South Australia	<b>1300 232 272</b>
Tasmania	<b>1800 671 738</b>
Victoria	<b>1300 882 008</b>
Western Australia	<b>08 6456 0208</b>