# The Vaccine Adverse Event Reporting System (VAERS) Results

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ABDOMINAL PAIN | PFIZER\BIONTECH | 50-59 years | Death | 942106-1 | 54 y/o M with PMH of HTN, HLD, Alcoholic Cirrhosis, Aortic Valve Stenosis, and angina BIBA as a Medical Alert for cardiac arrest noted PTA. Per EMS, the patient called because he was having constant, diffuse abdominal pain x 1 day that radiated to his chest. On scene, the patient had a witnessed arrest with EMS starting CPR. He was given 3 rounds of epi without ROSC. Pt had no associated shockable rhythm. Of note, pt's wife, had noted pt had received covid vaccine the prior day. |
| ABDOMINAL PAIN | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| ABDOMINAL PAIN LOWER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909720-1 | 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. |
| ABDOMINAL PAIN LOWER | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |
| ABDOMINAL PAIN UPPER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| ABDOMINAL PAIN UPPER | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| ABDOMINAL X-RAY | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
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| ABNORMAL BEHAVIOUR | MODERNA | 65+ years | Death | 940866-1 | "Patient was found ""acting abnormal"" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest." |

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| ABNORMAL BEHAVIOUR | PFIZER\BIONTECH | 65+ years | Death | 920545-1 | "The resident received is vaccine around 11:00 am and tolerated it without any difficulty or immediate adverse effects. He was at therapy from 12:36 pm until 1:22 pm when he stated he was too tired and could not do anymore. The therapist took him back to his room at that time and he got into bed himself but stated his legs felt heavy. At 1:50 pm the CNA answered his call light and found he had taken himself to the bathroom. She stated that when he went to get back into the bed it was ""abnormal"" how he was getting into it so she assisted him. At that time he quit breathing and she called a RN into the room immediately. He was found without a pulse, respirations, or blood pressure at 1:54 pm. He was a DNR." |
| ABSENCE OF IMMEDIATE TREATMENT RESPONSE | PFIZER\BIONTECH | 65+ years | Death | 926462-1 | Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021 |
| ABSENCE OF IMMEDIATE TREATMENT RESPONSE | PFIZER\BIONTECH | 65+ years | Death | 926568-1 | patient declined 12/30/2020 and was transferred to hospital where he did not respond to treatment and passed away 1/4/2020 |
| ACTIVATED PARTIAL THROMBOPLASTIN TIME PROLONGED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| ACTIVATED PARTIAL THROMBOPLASTIN TIME SHORTENED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| ACTIVATED PARTIAL THROMBOPLASTIN TIME SHORTENED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| ACUTE CORONARY SYNDROME | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| ACUTE MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 909130-1 | Acute NSTEMI with symptom onset 4 days after vaccination |
| ACUTE MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 65+ years | Death | 934059-1 | Acute anterior MI with death |

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| ACUTE RESPIRATORY FAILURE | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| ACUTE RESPIRATORY FAILURE | MODERNA | 50-59 years | Death | 946293-1 | 51 year old M with h/o O2 dependent COPD, Severe pulmonary fibrosis became increasingly hypoxic around 1800hours 1/7/2021. He was transported to hospital for acute on chronic hypoxia respiratory failure. On 1/12/2021 he decompensated further, and after discussing with family and palliative care, He was changed to comfort care. He expired on 1/12/2021@2325 at medical center. |
| ACUTE RESPIRATORY FAILURE | PFIZER\BIONTECH | 6-17 years | Life Threatening | 921641-1 | 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. |
| ADENOVIRUS TEST | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |

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| AGITATION | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| ALANINE AMINOTRANSFERASE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| ALANINE AMINOTRANSFERASE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

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| ALBUMIN URINE PRESENT | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| ALOPECIA | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| ALTERED STATE OF CONSCIOUSNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| ANAL INCONTINENCE | MODERNA | 65+ years | Death | 941607-1 | The patient passed away today, 1/13/2021. She was a hospice patient. She showed no adverse effects after receiving the vaccine on 1/12/2021. This morning she woke up as normal and during her morning shower she had a bowel movement, went limp and was non-responsive. The patient passed away at 7:45 am. |
| ANAPHYLACTIC REACTION | MODERNA | 18-29 years | Life Threatening | 913445-1 | 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. |
| ANAPHYLACTIC REACTION | MODERNA | 18-29 years | Life Threatening | 930079-1 | Swelling of throat and tongue, anaphylaxis, hives, redness, swelling |
| ANAPHYLACTIC REACTION | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| ANAPHYLACTIC REACTION | MODERNA | 30-39 years | Life Threatening | 931772-1 | Anaphylaxis |

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| ANAPHYLACTIC REACTION | MODERNA | 40-49 years | Life Threatening | 907022-1 | 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 |
| ANAPHYLACTIC REACTION | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |
| ANAPHYLACTIC REACTION | MODERNA | 50-59 years | Life Threatening | 924050-1 | anaphylaxis, dyspnea |
| ANAPHYLACTIC REACTION | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914596-1 | Anaphalaxis reaction, stridor an unable to breathe. Happened in 30 seconds |

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| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 929526-1 | Anaphylactic reaction 6 days post vaccine 24Dec2020; I had severe chest tightness; SOB; throat soreness; hoarse voice; mouth swelling; This is a spontaneous report from a contactable physician, the patient. A 34-year-old non-pregnant female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL0140), via an unspecified route of administration in the left arm on 18Dec2020 at 15:30 (at the age of 34-years-old) as a single dose for COVID-19 immunization. Medical history included severe dust mite allergy (based on skin test). Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included cetirizine hydrochloride (MANUFACTURER UNKNOWN), hydrocodone bitartrate/paracetamol (NORCO), ibuprofen (MANUFACTURER UNKNOWN), and ondansetron (ZOFRAN); all for unspecified indications from unknown dates and unknown if ongoing. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 24Dec2020 at 10:00, 6 days post vaccination, the patient experienced anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling; all reported as life threatening. The events led to an emergency room visit and she was given epinephrine (EPI-PEN), methylprednisolone (SOLUMEDROL), and diphenhydramine hydrochloride (BENADRYL) as treatment. The patient stated that she developed the reactions 45 minutes after she took premedications for a dilatation and curettage procedure. The premedications included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron. She stated she had taken these medications several times before and this was the first time she had this reaction. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcomes of the anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling were recovered on unknown dates.; Sender's Comments: Anaphylactic reactions presented as chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling, developed 45 minutes after premedications including included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron for a dilatation and curettage procedure and 6 days post vaccination with BNT162B2, the event therefore is most likely attributed to these premedications 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. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |

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| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908003-1 | ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913239-1 | Pt. began to feel weak with palpitations about 8-10 minutes after vaccination, her pulse was extremely fast, she then began to complain of lower mid-esophageal burning |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 915765-1 | Patient had an anaphylactic reaction to the vaccine the day after it was given and went to the nearest ER. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 906988-1 | PT WAS OBSRVED IN HOLDING AREA LEANING FORWARD IN HER CHAIR ABOUT 7 MINUTES AFTER RECIEVING THE VACINE. RN ASSESSED AND NOTED: AUDIBLE WHEEZE, RESP 40/MIN, LIP SWELLING AND PT COMPLAINED OF NAUSEA. PT WAS ESCORTED TO ER IN WHEELCHAIR ACCOMPANIED BY 2 RN'S (2 MINUTE WALK) ONE HOUR LATER - AS REPORTED BY DR (ER) WORKING DIAGNOSIS - ANAPHYLAXIS / STATUS ASTHMATICUS MEDS RECIEVED: SOLUMEDROL 125, DIPHENHYDRAMINE 50MG, FAMOTIDINE 20MG -- ALL IV EPINEPHERINE 0.3MG IM X1 FOLLOWED BY 0.3MG IV X 1 FOLLOWED BY 0.1MG IV X1 PT IS RECIEVING O2 - AND PROGRESSING TO BIPAP |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 933369-1 | Anaphylactic reaction |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | 60-64 years | Life Threatening | 904504-1 | Throat closure (angioedema/anaphylaxis) requiring ambulance transport to Hospital emergency room and stay IV infusion of Benedryl, solumedrol, and Pepcid with excellent results. Observed twelve hours, then discharged. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ANAPHYLACTIC REACTION | PFIZER\BIONTECH | Unknown | Life Threatening | 911511-1 | anaphylaxis; This is a spontaneous report from a contactable physician reporting on behalf of patient. A patient of unspecified age and gender received single dose of BNT162B2 (batch/lot number and exp date not reported), via an unspecified route of administration on an unspecified date for immunisation. The patient's medical history and concomitant medications were not reported. On an unspecified date, the patient experienced anaphylaxis with a very protracted course requiring an epi dose for 4.5 days and was still in the ICU (date/s unspecified) following administration of the COVID vaccine. The physician would like to use a drop of leftover vaccine from one of the vials to do a future skin test after the patient is stable. They were unsure if they needed permission as this was standard practice in allergy to test afterwards but wanted to check in with the company. The outcome of event was unknown. Information about batch/lot number has been requested.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis 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. |
| ANAPHYLACTIC SHOCK | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |
| ANAPHYLACTOID REACTION | PFIZER\BIONTECH | Unknown | Life Threatening | 920367-1 | Patient (myself) had anaphylactoid reaction to the vaccine and required IV solucortef, IV Benadryl and Pepcid, and required hospitalization x 24 hours |
| ANEURYSM | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| ANEURYSM | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| ANGIOEDEMA | MODERNA | 40-49 years | Life Threatening | 907022-1 | 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 |
| ANGIOEDEMA | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| ANGIOEDEMA | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |
| ANGIOEDEMA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 902946-1 | Swelling of hands follwed by angioedema |
| ANGIOEDEMA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 904334-1 | Angioedema, hives, tachycardia, shortness of breath |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ANGIOEDEMA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| ANGIOEDEMA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 904504-1 | Throat closure (angioedema/anaphylaxis) requiring ambulance transport to Hospital emergency room and stay IV infusion of Benedryl, solumedrol, and Pepcid with excellent results. Observed twelve hours, then discharged. |
| ANGIOGRAM | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| ANGIOGRAM | PFIZER\BIONTECH | 65+ years | Life Threatening | 932623-1 | Acute ischemic stroke, basilar occlusion |
| ANGIOGRAM CEREBRAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| ANGIOGRAM CEREBRAL | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| ANGIOGRAM CEREBRAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| ANGIOGRAM CEREBRAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| ANGIOGRAM CEREBRAL NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| ANGIOPLASTY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930889-1 | 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. |
| ANION GAP | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | morning after the injection. |
| ANION GAP DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| ANTINUCLEAR ANTIBODY NEGATIVE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |
| ANTINUCLEAR ANTIBODY POSITIVE | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| ANTIPHOSPHOLIPID ANTIBODIES | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| ANXIETY | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| ANXIETY | MODERNA | 60-64 years | Life Threatening | 924078-1 | "Client received vaccine at approximately 3:50pm, waited in observational area x30min. Left with husband, stated that she got a few miles down the road and starting experiencing tightness in her chest and flushing. She took 50 mg of Benadryl, 30mg of prednisone and two puffs on her inhaler. She returned to the clinic, upon assessment from nursing she looked extremely flushed and anxious, she stated that she still felt tightness and that she had a history of anaphylaxis once before and had used an epi pen in the past. She had an epi pen with her and questioned whether or not she should give it to herself. BP was 190/68, pulse was normal, respirations normal, she continued to experience tightness and ""not able to catch my breath"", encouraged to use epi pen. She administered epi pen to right thigh at approximately 4:45PM, 911 called. Within a few minutes, she stated she was feeling better, less tightness in the chest, flushing was subsiding. BP at 190/70 at 4:52. EMS on scene at 5:03pm. Vitals normal , EKG normal. Client decided not to transport with EMS." |
| ANXIETY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913854-1 | anxiety, tachycardia, flushing, diaphoresis, HTN, SOB |
| ANXIETY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ANXIETY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| ANXIETY | PFIZER\BIONTECH | 65+ years | Death | 914690-1 | Within 24 hours of receiving the vaccine, fever and respiratory distress, and anxiety developed requiring oxygen, morphine and ativan. My Mom passed away on the evening of 12/26/2020. |
| APHASIA | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at 7:20am. |
| APHASIA | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| APHASIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| APHASIA | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| APPENDICECTOMY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909720-1 | 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. |
| APPENDICECTOMY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| APPENDICITIS | MODERNA | 18-29 years | Life Threatening | 916710-1 | 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) |
| APPENDICITIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909720-1 | 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. |
| APPENDICITIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |
| AREFLEXIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 930777-1 | Patient presented to the emergency department with sensory loss and loss of reflexes, evaluated by neurology and diagnosed with Guillain- Barre Syndrome thought to be secondary to the Pfizer Covid Vaccine |
| ARTERIOGRAM CAROTID | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| ARTERIOGRAM CAROTID | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| ARTERIOGRAM CAROTID | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| ARTERIOGRAM CAROTID | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| ARTERIOGRAM CAROTID NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| ARTHRALGIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weaklness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| ARTHRALGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930897-1 | Shortness of breath, cough, rash on face and neck, arthralgia |
| ARTHRALGIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 934676-1 | Chills Hip pain |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ARTHRALGIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| ARTHRITIS BACTERIAL | MODERNA | 60-64 years | Life Threatening | 919593-1 | Patient developed a septic knee (history of arthroplasty) need for immediate surgery, hospitalization and months to years of antibiotics in his future now. |
| ASPARTATE AMINOTRANSFERASE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| ASPARTATE AMINOTRANSFERASE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| ASPARTATE AMINOTRANSFERASE NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| ASPIRATION | PFIZER\BIONTECH | 65+ years | Death | 942072-1 | Death occurred 3 days after vaccine receipt; attributed to complications of her chronic advanced dementia with aspiration at age 87. No evidence of acute vaccine reaction. |
| ASPIRATION JOINT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 934676-1 | Chills Hip pain |
| ASTHENIA | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ASTHENIA | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| ASTHENIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| ASTHENIA | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ASTHENIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| ASTHENIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913239-1 | Pt. began to feel weak with palpitations about 8-10 minutes after vaccination, her pulse was extremely fast, she then began to complain of lower mid-esophageal burning |
| ASTHENIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| ASTHENIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| ASTHENIA | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| ASYMPTOMATIC COVID-19 | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| ATRIAL FIBRILLATION | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| ATRIAL FIBRILLATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| ATRIAL FIBRILLATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| AUTOPSY | MODERNA | 50-59 years | Death | 918518-1 | syncopal episode - arrested - CPR - death |
| AUTOPSY | MODERNA | 65+ years | Death | 934539-1 | Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021 |
| AUTOPSY | MODERNA | 65+ years | Death | 943362-1 | Pt collapsed at home approx 5:30 pm and died |
| AUTOPSY | PFIZER\BIONTECH | 30-39 years | Death | 921667-1 | LTCF Pfizer Vaccine clinic conducted 12/29/2020 Vaccine lead received a call indicating that a staff member deceased somewhere between 1/3/2021 and 1/4/2021. Cause of death is unknown, and an autopsy is being performed. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| AUTOPSY | PFIZER\BIONTECH | 65+ years | Death | 940955-1 | "Cardiac Arrest; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; This is a spontaneous report from a contactable other healthcare professional (HCP). A 66-year-old female patient (pregnant at the time of vaccination: no) received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL1284) via intramuscular at left arm on 11Jan2021 12:15 PM at single dose for COVID-19 immunization. Medical history included diastolic CHF, spinal stenosis, morbid obesity, epilepsy, pulmonary hypertension and COVID-19 (Prior to vaccination, the patient was diagnosed with COVID-19). The patient received medication within 2 weeks of vaccination included amiodarone, melatonin, venlafaxine hydrochloride (EFFEXOR), ibuprofen, aripiprazole (ABILIFY), lisinopril, cranberry capsules, diltiazem, paracetamol (TYLENOL), famotidine, furosemide (LASIX [FUROSEMIDE]), ipratropium bromide, salbutamol sulfate (IPRATROPIUM/ALBUTEROL), buspirone, senna alexandrina leaf (SENNA [SENNA ALEXANDRINA LEAF]), polyethylene glycol 3350 and morphine. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient used took Penicillin, propranolol, quetiapine, topiramate, Lamictal and had allergy to them. Patient used took the first dose of BNT162B2 (lot number: EJ1685) via intramuscular at right arm on 21Dec2020 12:00 PM at single dose for COVID-19 immunization. Since the vaccination, the patient been tested for COVID-19 (Sars-cov-2 PCR) via nasal swab on 06Jan2021, covid test result was negative. Patient was found pulseless and breathless 20 minutes following the vaccine administration (11Jan2021 12:30 AM). MD found no signs of anaphylaxis. Patient died on 11Jan2021 12:30 AM because of cardiac arrest. No treatment received for the events. Outcome of pulseless and breathless was unknown. the autopsy was performed, and autopsy remarks was unknown. Autopsy-determined cause of death was unknown. It was reported as non-serious, not results in death, Life threatening, caused/prolonged hospitalization, disabling/Incapacitating nor congenital anomaly/birth defect.; Sender's Comments: Based on the available information this patient had multiple underlying medical conditions including morbid obesity, diastolic CHF, epilepsy, pulmonary hypertension and COVID-19 diagnosed prior to vaccination. All these conditions more likely contributed to patients cardiac arrest resulting in death. However, based on a close temporal association (""Patient was found pulseless and breathless 20 minutes following the second dose of BNT162B2 vaccine administration, contributory role of BNT162B2 vaccine to the onset of reported events cannot 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.; Reported Cause(s) of Death: Cardiac arrest; Autopsy-determined Cause(s) of Death: autopsy remarks was unknown. Autopsy-determined cause of death was unknown" |
| BACK PAIN | MODERNA | 65+ years | Death | 933846-1 | "1-2-2021 10:30 PM Complained Right arm/back hurt - took Tylenol 1-3-2021 Complained Right arm hurt, dizzy 1-4-2021 Felt better - did laundry, daughter found her deceased at 3:30 pm. Dr. at hospital said it was ""cardiac event"" according to death certificate." |
| BACK PAIN | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| BACK PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909165-1 | At the time of the injection sharp pain across my back , then at about 5 mins after feelings of light headedness, progressing pain across my back, trouble feeling like I could get enough air in with breathing and dizziness and I tried to get to the floor to sit or lay down but passed out. Then the next event I recall was a sharp pain in my thigh(apparently administered Eli pen) . I regained consciousness and was gasping andI was told I had been given a shot of epi. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BACTERAEMIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| BACTERIAL TEST POSITIVE | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| BAND NEUTROPHIL PERCENTAGE INCREASED | MODERNA | 18-29 years | Life Threatening | 916710-1 | 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) |
| BASE EXCESS | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BASILAR ARTERY OCCLUSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 932623-1 | Acute ischemic stroke, basilar occlusion |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BASOPHIL COUNT DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BASOPHIL COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BASOPHIL COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BASOPHIL PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BASOPHIL PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BASOPHIL PERCENTAGE DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BILEVEL POSITIVE AIRWAY PRESSURE | MODERNA | 65+ years | Life Threatening | 930611-1 | Developed hypercapnic respiratory failure, CHF exacerbation - readmitted to Hospital. In ICU with BIPAP |
| BILEVEL POSITIVE AIRWAY PRESSURE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 906988-1 | PT WAS OBSRVED IN HOLDING AREA LEANING FORWARD IN HER CHAIR ABOUT 7 MINUTES AFTER RECIEVING THE VACINE. RN ASSESSED AND NOTED: AUDIBLE WHEEZE, RESP 40/MIN, LIP SWELLING AND PT COMPLAINED OF NAUSEA. PT WAS ESCORTED TO ER IN WHEELCHAIR ACCOMPANIED BY 2 RN'S (2 MINUTE WALK) ONE HOUR LATER - AS REPORTED BY DR (ER) WORKING DIAGNOSIS - ANAPHYLAXIS / STATUS ASTHMATICUS MEDS RECIEVED: SOLUMEDROL 125, DIPHENHYDRAMINE 50MG, FAMOTIDINE 20MG -- ALL IV EPINEPHERINE 0.3MG IM X1 FOLLOWED BY 0.3MG IV X 1 FOLLOWED BY 0.1MG IV X1 PT IS RECIEVING O2 - AND PROGRESSING TO BIPAP |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD ALBUMIN NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD ALBUMIN NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD ALBUMIN NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| BLOOD ALKALINE PHOSPHATASE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD ALKALINE PHOSPHATASE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD ALKALINE PHOSPHATASE NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |

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| BLOOD BICARBONATE NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BLOOD BILIRUBIN INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| BLOOD BILIRUBIN INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| BLOOD BILIRUBIN NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD BILIRUBIN NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD CALCIUM NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BLOOD CALCIUM NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD CALCIUM NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD CHLORIDE DECREASED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD CHLORIDE NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BLOOD CHLORIDE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD CHLORIDE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD CHOLESTEROL INCREASED | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| BLOOD CREATINE PHOSPHOKINASE NORMAL | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD CREATININE INCREASED | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| BLOOD CREATININE INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| BLOOD CREATININE INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| BLOOD CREATININE NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

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| BLOOD CREATININE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD CREATININE NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| BLOOD CULTURE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| BLOOD CULTURE | PFIZER\BIONTECH | 65+ years | Death | 919108-1 | Fever, Malaise |
| BLOOD CULTURE NEGATIVE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| BLOOD GLUCOSE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| BLOOD GLUCOSE INCREASED | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD GLUCOSE NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BLOOD GLUCOSE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD GLUCOSE NORMAL | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| BLOOD GLUCOSE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD GLUCOSE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909278-1 | Rapid onset of hoarseness, throat tingling and tightness |
| BLOOD GLUCOSE NORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| BLOOD HOMOCYSTEINE | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD LACTATE DEHYDROGENASE INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| BLOOD LACTIC ACID | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| BLOOD LACTIC ACID DECREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| BLOOD LACTIC ACID DECREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| BLOOD LACTIC ACID INCREASED | MODERNA | 65+ years | Death | 927260-1 | 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. |
| BLOOD LACTIC ACID INCREASED | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| BLOOD MAGNESIUM NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD MAGNESIUM NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD MAGNESIUM NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD OSMOLARITY DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD PH INCREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BLOOD POTASSIUM DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD POTASSIUM DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD POTASSIUM DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD POTASSIUM DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| BLOOD POTASSIUM DECREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| BLOOD POTASSIUM DECREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| BLOOD POTASSIUM DECREASED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| BLOOD PRESSURE ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 920545-1 | "The resident received is vaccine around 11:00 am and tolerated it without any difficulty or immediate adverse effects. He was at therapy from 12:36 pm until 1:22 pm when he stated he was too tired and could not do anymore. The therapist took him back to his room at that time and he got into bed himself but stated his legs felt heavy. At 1:50 pm the CNA answered his call light and found he had taken himself to the bathroom. She stated that when he went to get back into the bed it was ""abnormal"" how he was getting into it so she assisted him. At that time he quit breathing and she called a RN into the room immediately. He was found without a pulse, respirations, or blood pressure at 1:54 pm. He was a DNR." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD PRESSURE DIASTOLIC INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| BLOOD PRESSURE IMMEASURABLE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| BLOOD PRESSURE INCREASED | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| BLOOD PRESSURE INCREASED | MODERNA | 40-49 years | Life Threatening | 922279-1 | Patient presented to receive COVID-19 vaccine, received vaccine at approximately 10 am. Patient waited 15 minutes for observation and left observation area without complaining of any sx. Patient returned a few minutes after reporting tongue tingling which eventually got to her lips. . No difficulty breathing or any other sx. No history of allergies. NP/RN administered PO Benadryl 25 mg. As of report of this iReport no additional symptoms or intervention needed. Last vitals: 131/83 75spo2. BP higher than usual per patient, sp02 normal. |
| BLOOD PRESSURE INCREASED | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |
| BLOOD PRESSURE INCREASED | MODERNA | 65+ years | Life Threatening | 909061-1 | Reported sensation of tongue swelling during post-vaccination observation at 10 minutes. Epinephrine was refused and she was taken to ED for observation where she was given oral dose of Benadryl and Pepcid. Discharged with instructions to return PRN and follow up with PCP. Elevated BP noted. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD PRESSURE INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| BLOOD PRESSURE INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| BLOOD PRESSURE INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| BLOOD PRESSURE SYSTOLIC INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD SODIUM DECREASED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| BLOOD SODIUM NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| BLOOD SODIUM NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD SODIUM NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD TEST | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD TEST | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |
| BLOOD TEST | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| BLOOD TEST | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| BLOOD TEST | MODERNA | 65+ years | Death | 934539-1 | Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021 |
| BLOOD TEST | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| BLOOD TEST | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| BLOOD TEST | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| BLOOD THYROID STIMULATING HORMONE NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD UREA INCREASED | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| BLOOD UREA NITROGEN/CREATININE RATIO | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD UREA NITROGEN/CREATININE RATIO | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BLOOD UREA NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding |

her vaccination visit and two ER visits."

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BLOOD UREA NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| BLOOD UREA NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| BODY TEMPERATURE DECREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| BODY TEMPERATURE INCREASED | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| BODY TEMPERATURE INCREASED | PFIZER\BIONTECH | 65+ years | Death | 921175-1 | Resident received Covid Vaccine, noted after 30 mins with labored breathing BP 161/77, HR 116, R 38, T 101.4, |
| BODY TEMPERATURE INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 919620-1 | Decompensation and temp 103.6. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BORDETELLA TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| BRADYCARDIA | MODERNA | 65+ years | Death | 927260-1 | 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. |
| BRAIN DEATH | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |
| BRAIN DEATH | PFIZER\BIONTECH | 50-59 years | Death | 944595-1 | 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 |
| BRAIN HERNIATION | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| BRAIN NATRIURETIC PEPTIDE NORMAL | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BREATH SOUNDS ABNORMAL | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| BREATH SOUNDS ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 929359-1 | 3:07 pm lung sounds diminished oxygen sats 68%, oxygen applied Oxygen sats remained low for next 36 hours ( patient on Hospice care ) expired 6:22 am 1-8-21 |
| BRONCHIAL SECRETION RETENTION | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |
| BRONCHOSPASM | MODERNA | 40-49 years | Life Threatening | 907075-1 | Patient experienced bronchospasm with coughing and tongue itching approximately 10 minutes after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| BUNDLE BRANCH BLOCK RIGHT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| BURNING SENSATION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| BURNING SENSATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908973-1 | 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. |
| BURNING SENSATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| C-REACTIVE PROTEIN INCREASED | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| C-REACTIVE PROTEIN INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| C-REACTIVE PROTEIN INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| C-REACTIVE PROTEIN INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |
| C-REACTIVE PROTEIN INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| CARBON DIOXIDE DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| CARBON DIOXIDE DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| CARDIAC ARREST | MODERNA | 65+ years | Death | 918487-1 | Two days post vaccine patient went into cardiac arrest and passed away. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CARDIAC ARREST | MODERNA | 65+ years | Death | 927260-1 | 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. |
| CARDIAC ARREST | MODERNA | 65+ years | Death | 940866-1 | "Patient was found ""acting abnormal"" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest." |
| CARDIAC ARREST | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| CARDIAC ARREST | PFIZER\BIONTECH | 18-29 years | Death | 943397-1 | On day due for 2nd dose, Patient was found unresponsive at work in the hospital. Patient pupils were fixed and dilated. Full ACLS was initiated for 55 minutes with multiple rounds of bicarb, calcium chloride, magnesium, and epinephrine. Patient was intubated. Patient continued into V. Fib arrest and was shocked multiple times. |
| CARDIAC ARREST | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| CARDIAC ARREST | PFIZER\BIONTECH | 50-59 years | Death | 942106-1 | 54 y/o M with PMH of HTN, HLD, Alcoholic Cirrhosis, Aortic Valve Stenosis, and angina BIBA as a Medical Alert for cardiac arrest noted PTA. Per EMS, the patient called because he was having constant, diffuse abdominal pain x 1 day that radiated to his chest. On scene, the patient had a witnessed arrest with EMS starting CPR. He was given 3 rounds of epi without ROSC. Pt had no associated shockable rhythm. Of note, pt's wife, had noted pt had received covid vaccine the prior day. |
| CARDIAC ARREST | PFIZER\BIONTECH | 50-59 years | Death | 944595-1 | 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 |
| CARDIAC ARREST | PFIZER\BIONTECH | 60-64 years | Death | 924464-1 | coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer |
| CARDIAC ARREST | PFIZER\BIONTECH | 60-64 years | Death | 932898-1 | The patient had an apparent cardiac arrest on 12/23/20 and was admitted to the ICU. He was taken off of life support on 12/30/20. He had known cardiac disease. |
| CARDIAC ARREST | PFIZER\BIONTECH | 65+ years | Death | 915682-1 | Resident received vaccine per pharmacy at the facility at 5 pm. Approximately 6:45 resident found unresponsive and EMS contacted. Upon EMS arrival at facility, resident went into cardiac arrest, code initiated by EMS and transported to hospital. Resident expired at hospital at approximately 8 pm |
| CARDIAC ARREST | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| CARDIAC ARREST | PFIZER\BIONTECH | 65+ years | Death | 939845-1 | Three hours after receiving COVID 19 vaccination, Patient oxygen level decreased to a critical level and went into cardiac arrest. Staff performed full code but was unable to bring back patient from cardiac arrest. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CARDIAC ARREST | PFIZER\BIONTECH | 65+ years | Death | 940955-1 | "Cardiac Arrest; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; This is a spontaneous report from a contactable other healthcare professional (HCP). A 66-year-old female patient (pregnant at the time of vaccination: no) received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL1284) via intramuscular at left arm on 11Jan2021 12:15 PM at single dose for COVID-19 immunization. Medical history included diastolic CHF, spinal stenosis, morbid obesity, epilepsy, pulmonary hypertension and COVID-19 (Prior to vaccination, the patient was diagnosed with COVID-19). The patient received medication within 2 weeks of vaccination included amiodarone, melatonin, venlafaxine hydrochloride (EFFEXOR), ibuprofen, aripiprazole (ABILIFY), lisinopril, cranberry capsules, diltiazem, paracetamol (TYLENOL), famotidine, furosemide (LASIX [FUROSEMIDE]), ipratropium bromide, salbutamol sulfate (IPRATROPIUM/ALBUTEROL), buspirone, senna alexandrina leaf (SENNA [SENNA ALEXANDRINA LEAF]), polyethylene glycol 3350 and morphine. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient used took Penicillin, propranolol, quetiapine, topiramate, Lamictal and had allergy to them. Patient used took the first dose of BNT162B2 (lot number: EJ1685) via intramuscular at right arm on 21Dec2020 12:00 PM at single dose for COVID-19 immunization. Since the vaccination, the patient been tested for COVID-19 (Sars-cov-2 PCR) via nasal swab on 06Jan2021, covid test result was negative. Patient was found pulseless and breathless 20 minutes following the vaccine administration (11Jan2021 12:30 AM). MD found no signs of anaphylaxis. Patient died on 11Jan2021 12:30 AM because of cardiac arrest. No treatment received for the events. Outcome of pulseless and breathless was unknown. the autopsy was performed, and autopsy remarks was unknown. Autopsy-determined cause of death was unknown. It was reported as non-serious, not results in death, Life threatening, caused/prolonged hospitalization, disabling/Incapacitating nor congenital anomaly/birth defect.; Sender's Comments: Based on the available information this patient had multiple underlying medical conditions including morbid obesity, diastolic CHF, epilepsy, pulmonary hypertension and COVID-19 diagnosed prior to vaccination. All these conditions more likely contributed to patients cardiac arrest resulting in death. However, based on a close temporal association (""Patient was found pulseless and breathless 20 minutes following the second dose of BNT162B2 vaccine administration, contributory role of BNT162B2 vaccine to the onset of reported events cannot 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.; Reported Cause(s) of Death: Cardiac arrest; Autopsy-determined Cause(s) of Death: autopsy remarks was unknown. Autopsy-determined cause of death was unknown" |
| CARDIAC ARREST | PFIZER\BIONTECH | 65+ years | Death | 944365-1 | Resident expired on 12/30/20, dx cardiac arrest. |
| CARDIAC ARREST | PFIZER\BIONTECH | 65+ years | Life Threatening | 912574-1 | 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. |
| CARDIAC DISORDER | MODERNA | 65+ years | Death | 933846-1 | "1-2-2021 10:30 PM Complained Right arm/back hurt - took Tylenol 1-3-2021 Complained Right arm hurt, dizzy 1-4-2021 Felt better - did laundry, daughter found her deceased at 3:30 pm. Dr. at hospital said it was ""cardiac event"" according to death certificate." |
| CARDIAC DISORDER | PFIZER\BIONTECH | 60-64 years | Death | 932898-1 | The patient had an apparent cardiac arrest on 12/23/20 and was admitted to the ICU. He was taken off of life support on 12/30/20. He had known cardiac disease. |
| CARDIAC DISORDER | PFIZER\BIONTECH | Unknown | Death | 930431-1 | Cardiac event, 2 days after vaccination, patient expired. |
| CARDIAC FAILURE | PFIZER\BIONTECH | 65+ years | Life Threatening | 919620-1 | Decompensation and temp 103.6. |
| CARDIAC FAILURE CONGESTIVE | MODERNA | 65+ years | Life Threatening | 930611-1 | Developed hypercapnic respiratory failure, CHF exacerbation - readmitted to Hospital. In ICU with BIPAP |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CARDIAC PACEMAKER EVALUATION | PFIZER\BIONTECH | 65+ years | Death | 945603-1 | Had no immediate issues with the vaccine. He had returned from the hospital on 12/21 and had some concerns about his weight which were shared with his physician on 1/4/21. On 1/5/21 had a visit with his cardiologist for a pacemaker check. On 1/8/21 staff were called to his room, he was on the floor, bluish skin color. No vital signs found, no heart rhythm heard at 2200. |
| CARDIAC STRESS TEST NORMAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| CARDIAC VENTRICULOGRAM LEFT | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| CARDIO-RESPIRATORY ARREST | MODERNA | 50-59 years | Death | 918518-1 | syncopal episode - arrested - CPR - death |
| CARDIO-RESPIRATORY ARREST | MODERNA | 65+ years | Death | 940866-1 | "Patient was found ""acting abnormal"" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest." |
| CARDIO-RESPIRATORY ARREST | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CARDIO-RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 944282-1 | resident coded on 09Jan at 8am and expired; This is a spontaneous report from a contactable Other Health Professional. A 70-year-old male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Batch/lot number: EL0140), intramuscularly in left arm on 05Jan2021 15:15 at single dose for COVID-19 immunization. Medical history included DM2(Type two diabetes mellitus), CHF(congestive heart failure), open wound, wound infection, heart failure. Allergies to medications, food, or other products: none. Concomitant medications included unspecified products (List of any other medications the patient received within 2 weeks of vaccination: yes). If the patient received any other vaccines within 4 weeks prior to the COVID vaccine: Unknown. Facility where the most recent COVID-19 vaccine was administered: Nursing Home/Senior Living Facility. The resident coded on 09Jan2021 at 8 AM and expired. The patient died on 09Jan2021. An autopsy was not performed. AE resulted in: patient died. Death cause: unknown at this time. Was treatment received for the adverse event: Unknown. Prior to vaccination, was the patient diagnosed with COVID-19: No. Since the vaccination, has the patient been tested for COVID-19: No. Serious: Yes. Seriousness criteria-Results in death: Yes. Seriousness criteria-Life threatening: No. Seriousness criteria-Caused/prolonged hospitalization: No. Seriousness criteria-Disabling/Incapacitating: No. Seriousness criteria-Congenital anomaly/birth defect: No.; Sender's Comments: The old patient had diabetes mellitus, congestive heart failure, open wound complicated by infection, all these pre-existing medical conditions contribute to the patient death. More information including complete medical history, concomitant medications and event term details especially death cause and autopsy results are needed for a full assessment of the case. 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; Reported Cause(s) of Death: resident coded on 09Jan at 8am and expired |
| CARDIOVERSION | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| CARDIOVERSION | PFIZER\BIONTECH | 18-29 years | Death | 943397-1 | On day due for 2nd dose, Patient was found unresponsive at work in the hospital. Patient pupils were fixed and dilated. Full ACLS was initiated for 55 minutes with multiple rounds of bicarb, calcium chloride, magnesium, and epinephrine. Patient was intubated. Patient continued into V. Fib arrest and was shocked multiple times. |
| CARDIOVERSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904498-1 | Ventricular tachycardia. Defibrillator paced me out of rhythm. I have had my ICD for 3 years. This is the first abnormal rhythm I have had where it delivered a therapy to abort it. |
| CARDIOVERSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| CARDIOVERSION | PFIZER\BIONTECH | 65+ years | Death | 926269-1 | "Pt last seen at 1200 by nurse for ID band check. No visible signs of distress noted. Pt states ""I just want to be left alone"". 1230 nurse was called to pt room. Pt was noted unresponsive, no pulse and respiration noted. CPR started immediately, at 1239 first shock given. 1245 EMT took over, at 1319 EMT called time of death" |
| CATHETERISATION CARDIAC ABNORMAL | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| CATHETERISATION CARDIAC ABNORMAL | PFIZER\BIONTECH | 50-59 | Life | 909130-1 | Acute NSTEMI with symptom onset 4 days after |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CATHETERISATION CARDIAC ABNORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| CATHETERISATION CARDIAC NORMAL | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| CENTRAL NERVOUS SYSTEM LESION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| CENTRAL VENOUS CATHETERISATION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| CEREBELLAR HAEMORRHAGE | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| CEREBELLAR HAEMORRHAGE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| CEREBRAL ARTERY OCCLUSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| CEREBRAL HAEMORRHAGE | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CEREBROVASCULAR ACCIDENT | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| CEREBROVASCULAR ACCIDENT | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| CEREBROVASCULAR ACCIDENT | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| CEREBROVASCULAR ACCIDENT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| CEREBROVASCULAR ACCIDENT | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| CHEST DISCOMFORT | MODERNA | 18-29 years | Life Threatening | 913445-1 | 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. |
| CHEST DISCOMFORT | MODERNA | 18-29 years | Life Threatening | 919252-1 | 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 feeling of generalized sunburn. Later developed severe headache.. |
| CHEST DISCOMFORT | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| CHEST DISCOMFORT | MODERNA | 50-59 years | Life Threatening | 929418-1 | Swelling of lips & tongue, tightening of throat. Quivering of arms & legs. Tightening of chest. Dizzyness lightheaded. |
| CHEST DISCOMFORT | MODERNA | 60-64 years | Life Threatening | 924078-1 | "Client received vaccine at approximately 3:50pm, waited in observational area x30min. Left with husband, stated that she got a few miles down the road and starting experiencing tightness in her chest and flushing. She took 50 mg of Benadryl, 30mg of prednisone and two puffs on her inhaler. She returned to the clinic, upon assessment from nursing she looked extremely flushed and anxious, she stated that she still felt tightness and that she had a history of anaphylaxis once before and had used an epi pen in the past. She had an epi pen with her and questioned whether or not she should give it to herself. BP was 190/68, pulse was normal, respirations normal, she continued to experience tightness and ""not able to catch my breath"", encouraged to use epi pen. She administered epi pen to right thigh at approximately 4:45PM, 911 called. Within a few minutes, she stated she was feeling better, less tightness in the chest, flushing was subsiding. BP at 190/70 at 4:52. EMS on scene at 5:03pm. Vitals normal , EKG normal. Client decided not to transport with EMS." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST DISCOMFORT | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 929526-1 | Anaphylactic reaction 6 days post vaccine 24Dec2020; I had severe chest tightness; SOB; throat soreness; hoarse voice; mouth swelling; This is a spontaneous report from a contactable physician, the patient. A 34-year-old non-pregnant female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL0140), via an unspecified route of administration in the left arm on 18Dec2020 at 15:30 (at the age of 34-years-old) as a single dose for COVID-19 immunization. Medical history included severe dust mite allergy (based on skin test). Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included cetirizine hydrochloride (MANUFACTURER UNKNOWN), hydrocodone bitartrate/paracetamol (NORCO), ibuprofen (MANUFACTURER UNKNOWN), and ondansetron (ZOFRAN); all for unspecified indications from unknown dates and unknown if ongoing. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 24Dec2020 at 10:00, 6 days post vaccination, the patient experienced anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling; all reported as life threatening. The events led to an emergency room visit and she was given epinephrine (EPI-PEN), methylprednisolone (SOLUMEDROL), and diphenhydramine hydrochloride (BENADRYL) as treatment. The patient stated that she developed the reactions 45 minutes after she took premedications for a dilatation and curettage procedure. The premedications included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron. She stated she had taken these medications several times before and this was the first time she had this reaction. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcomes of the anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling were recovered on unknown dates.; Sender's Comments: Anaphylactic reactions presented as chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling, developed 45 minutes after premedications including included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron for a dilatation and curettage procedure and 6 days post vaccination with BNT162B2, the event therefore is most likely attributed to these premedications 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908003-1 | ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| CHEST DISCOMFORT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| CHEST PAIN | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| CHEST PAIN | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST PAIN | PFIZER\BIONTECH | 18-29 years | Life Threatening | 937932-1 | 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. |
| CHEST PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| CHEST PAIN | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| CHEST PAIN | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913239-1 | Pt. began to feel weak with palpitations about 8-10 minutes after vaccination, her pulse was extremely fast, she then began to complain of lower mid-esophageal burning |
| CHEST PAIN | PFIZER\BIONTECH | 50-59 years | Death | 942106-1 | 54 y/o M with PMH of HTN, HLD, Alcoholic Cirrhosis, Aortic Valve Stenosis, and angina BIBA as a Medical Alert for cardiac arrest noted PTA. Per EMS, the patient called because he was having constant, diffuse abdominal pain x 1 day that radiated to his chest. On scene, the patient had a witnessed arrest with EMS starting CPR. He was given 3 rounds of epi without ROSC. Pt had no associated shockable rhythm. Of note, pt's wife, had noted pt had received covid vaccine the prior day. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST PAIN | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| CHEST PAIN | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| CHEST PAIN | PFIZER\BIONTECH | 65+ years | Death | 930466-1 | Fever, shortness of breath and chest pain that resulted in a heart attack a few hours after vaccination |
| CHEST PAIN | PFIZER\BIONTECH | 65+ years | Death | 940954-1 | "Heart attack; This is a spontaneous report from a contactable consumer. An 82-year-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number: and Expiration Date: Unknown), via an unspecified route of administration in the left arm on 05Jan2021 at 13:00 at a single dose for COVID-19 immunization; administered in doctor's office/urgent care. The patient's medical history and concomitant medications were not reported. It was unknown if the patient received any other vaccines within four weeks prior to the COVID vaccine. Prior to the vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 05Jan2021, the patient experienced heart attack; which resulted in death and was assessed as medically significant. The patient also experienced the associated symptoms of cold sweats, chest pain, shortness of breath. Therapeutic measures were taken as a result of heart attack, which included ""life saving measures"" by the paramedics performed upon arrival with no success. The clinical outcome of the event, heart attack, was fatal. The patient died on 05Jan2021 due to heart attack; as ruled by the paramedics. It was unknown if an autopsy was performed. The batch/lot numbers for the vaccine, PFIZER-BIONTECH COVID-19 MRNA VACCINE, were not provided and will be requested during follow up.; Reported Cause(s) of Death: Heart attack" |
| CHEST X-RAY | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| CHEST X-RAY | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| CHEST X-RAY | MODERNA | 60-64 years | Life Threatening | 935090-1 | SOB, Sleeplessness, |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST X-RAY | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| CHEST X-RAY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| CHEST X-RAY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| CHEST X-RAY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907101-1 | 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 |
| CHEST X-RAY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| CHEST X-RAY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| CHEST X-RAY | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST X-RAY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| CHEST X-RAY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| CHEST X-RAY ABNORMAL | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| CHEST X-RAY ABNORMAL | MODERNA | 50-59 years | Life Threatening | 941522-1 | I was short of breath and went to emergency room on 1/5/2021. I was diagnosed with bilateral pulmonary embolisms. I was Covid negative and had no other symptoms. |
| CHEST X-RAY ABNORMAL | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST X-RAY ABNORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| CHEST X-RAY ABNORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| CHEST X-RAY NORMAL | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| CHEST X-RAY NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| CHEST X-RAY NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHEST X-RAY NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| CHEST X-RAY NORMAL | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| CHILLS | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| CHILLS | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| CHILLS | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |
| CHILLS | MODERNA | 60-64 years | Life Threatening | 934156-1 | 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. |
| CHILLS | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| CHILLS | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHILLS | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| CHILLS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |
| CHILLS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| CHILLS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHILLS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| CHILLS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 934676-1 | Chills Hip pain |
| CHILLS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| CHILLS | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CHLAMYDIA TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| CHOKING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| CHOLECYSTECTOMY | MODERNA | 30-39 years | Life Threatening | 918839-1 | Gallbladder removed, septic, 11mm axillary lymph node. |
| COAGULATION TEST | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| COAGULATION TIME | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COLD SWEAT | PFIZER\BIONTECH | 65+ years | Death | 940954-1 | "Heart attack; This is a spontaneous report from a contactable consumer. An 82-year-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number: and Expiration Date: Unknown), via an unspecified route of administration in the left arm on 05Jan2021 at 13:00 at a single dose for COVID-19 immunization; administered in doctor's office/urgent care. The patient's medical history and concomitant medications were not reported. It was unknown if the patient received any other vaccines within four weeks prior to the COVID vaccine. Prior to the vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 05Jan2021, the patient experienced heart attack; which resulted in death and was assessed as medically significant. The patient also experienced the associated symptoms of cold sweats, chest pain, shortness of breath. Therapeutic measures were taken as a result of heart attack, which included ""life saving measures"" by the paramedics performed upon arrival with no success. The clinical outcome of the event, heart attack, was fatal. The patient died on 05Jan2021 due to heart attack; as ruled by the paramedics. It was unknown if an autopsy was performed. The batch/lot numbers for the vaccine, PFIZER-BIONTECH COVID-19 MRNA VACCINE, were not provided and will be requested during follow up.; Reported Cause(s) of Death: Heart attack" |
| COLOSTOMY | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| COMA | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| COMPUTERISED TOMOGRAM | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| COMPUTERISED TOMOGRAM | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| COMPUTERISED TOMOGRAM | PFIZER\BIONTECH | 65+ years | Life Threatening | 932623-1 | Acute ischemic stroke, basilar occlusion |
| COMPUTERISED TOMOGRAM ABDOMEN | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM ABDOMEN | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM ABDOMEN | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| COMPUTERISED TOMOGRAM ABNORMAL | MODERNA | 65+ years | Death | 924664-1 | At approximately, 1855, I was alerted by caregiver, resident was not responding. Per caregiver, she was doing her rounds and found resident in bed, unresponsive, mouth open, observed gurgling noises and tongue hanging out of mouth. This primary caregiver observed resident at baseline and ambulating after dinner at approximately, 1800 less than an hour prior to incident. This PCG called 911 for EMS and gave report of incident. Resident was taken to Medical Center Emergency Department. At ER, CT scan and X-ray was performed. Per report from ER RN, CT scan and x-ray revealed an intracranial aneurysm and fluid in the lungs. Per RN, resident was still unresponsive and was admitted to Medical Center for observation and comfort measures. This primary caregiver reported to RN, resident recently received the first dose of COVID-19 vaccine on 1/2/21. Primary caregiver received a call from Castle RN at 0700, resident expired at 0615. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COMPUTERISED TOMOGRAM ABNORMAL | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| COMPUTERISED TOMOGRAM ABNORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| COMPUTERISED TOMOGRAM ABNORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909720-1 | 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. |
| COMPUTERISED TOMOGRAM ABNORMAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |
| COMPUTERISED TOMOGRAM ABNORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| COMPUTERISED TOMOGRAM ABNORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| COMPUTERISED TOMOGRAM CORONARY ARTERY NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COMPUTERISED TOMOGRAM HEAD | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| COMPUTERISED TOMOGRAM HEAD | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM HEAD | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM HEAD | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| COMPUTERISED TOMOGRAM HEAD | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| COMPUTERISED TOMOGRAM HEAD NORMAL | MODERNA | 65+ years | Death | 927260-1 | 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. |
| COMPUTERISED TOMOGRAM PELVIS | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM PELVIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM SPINE | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM SPINE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM THORAX | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| COMPUTERISED TOMOGRAM THORAX | PFIZER\BIONTECH | 50-59 years | Death | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM THORAX | PFIZER\BIONTECH | 50-59 years | Life Threatening | 938118-1 | on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm |
| COMPUTERISED TOMOGRAM THORAX ABNORMAL | MODERNA | 50-59 years | Life Threatening | 941522-1 | I was short of breath and went to emergency room on 1/5/2021. I was diagnosed with bilateral pulmonary embolisms. I was Covid negative and had no other symptoms. |
| CONDITION AGGRAVATED | MODERNA | 65+ years | Life Threatening | 930611-1 | Developed hypercapnic respiratory failure, CHF exacerbation - readmitted to Hospital. In ICU with BIPAP |
| CONDITION AGGRAVATED | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |
| CONDITION AGGRAVATED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912785-1 | Monitored x 15 min per guidelines. Began to experience SOB and throat swelling, after which pt presented to the ED for tx, dx acute hypertensive urgency with severe hypertension. |
| CONDITION AGGRAVATED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930153-1 | ITP Plt 2 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CONDITION AGGRAVATED | PFIZER\BIONTECH | 60-64 years | Death | 924464-1 | coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer |
| CONFUSIONAL STATE | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| CONFUSIONAL STATE | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| CONFUSIONAL STATE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ----------RN 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 ----------RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CONFUSIONAL STATE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| CONFUSIONAL STATE | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| CONSCIOUSNESS FLUCTUATING | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| CONTUSION | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| CONTUSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| CORONARY ARTERIAL STENT INSERTION | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| CORONARY ARTERIAL STENT INSERTION | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CORONARY ARTERY DISEASE | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| CORONARY ARTERY OCCLUSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930889-1 | 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. |
| CORONARY ARTERY OCCLUSION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 909130-1 | Acute NSTEMI with symptom onset 4 days after vaccination |
| CORONARY ARTERY STENOSIS | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| COUGH | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at 7:20am. |
| COUGH | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| COUGH | MODERNA | 40-49 years | Life Threatening | 907075-1 | Patient experienced bronchospasm with coughing and tongue itching approximately 10 minutes after the injection. |
| COUGH | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| COUGH | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COUGH | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| COUGH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| COUGH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |
| COUGH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COUGH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| COUGH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COUGH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| COUGH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907101-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COUGH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| COUGH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 926042-1 | 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. |
| COUGH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |
| COUGH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930897-1 | Shortness of breath, cough, rash on face and neck, arthralgia |
| COUGH | PFIZER\BIONTECH | 50-59 years | Life Threatening | 912826-1 | Itching, cough. Given benadryl 50mg and epinephrine 0.3 in vaccine clinic, and taken to ED for further tx. |
| COUGH | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COUGH | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| COUGH | PFIZER\BIONTECH | 65+ years | Death | 946225-1 | At approximately 10:30pm on 1/14/2021, resident was noted to have a rash on her face, hands, arms, and chest. VS:100.2, 113, 20,108/59, 84% room air. applied nasal cannula at 4-L, telephoned Physician orders 6mg Decadron one time order, a second set of Vitals , reads 99.3, 110, 20, 106/60, 90% on 4-L N/C. On coming shift advised. At approximately 2:00am on 1/15/2021, resident congested and coughing. BP 151/70, pulse 124, temp 98.1 forehead, resp 20 and pulse oc 79% on 3L. At approximately 2:30am PRN cough syrup and breathing tx. Resident's condition began to worsen with breathing tx. This LPN updated at 0248 doctor on resident's condition. Doctor gave permission for resident to go to hospital. At 4:19am the Er called to say resident passed away. |
| COVID-19 | MODERNA | 65+ years | Death | 917117-1 | After vaccination, patient tested positive for COVID-19. Patient was very ill and had numerous chronic health issues prior to vaccination. Facility had a number of patients who had already tested positive for COVID-19. Vaccination continued in an effort to prevent this patient from contracting the virus or to mitigate his risk. This was unsuccessful and patient died. |
| COVID-19 | MODERNA | 65+ years | Death | 917790-1 | At the time of vaccination, there was an outbreak of residents who had already tested positive for COVID 19 at the nursing home where patient was a resident. About a week later, patient tested positive for COVID 19. She had a number of chronic, underlying health conditions. The vaccine did not have enough time to prevent COVID 19. There is no evidence that the vaccination caused patient's death. It simply didn't have time to save her life. |
| COVID-19 | MODERNA | 65+ years | Death | 917793-1 | Prior to the administration of the COVID 19 vaccine, the nursing home had an outbreak of COVID-19. Patient was vaccinated and about a week later she tested positive for COVID-19. She had underlying thyroid and diabetes disease. She died as a result of COVID-19 and her underlying health conditions and not as a result of the vaccine. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COVID-19 | PFIZER\BIONTECH | 6-17 years | Life Threatening | 921641-1 | 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. |
| COVID-19 | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| COVID-19 | PFIZER\BIONTECH | 65+ years | Death | 920832-1 | Vaccine 12/30/2020 Screening PCR done 12/31/2020 Symptoms 1/1/2021 COVID test result came back positive 1/2/2021 Deceased 1/4/2021 |
| COVID-19 | PFIZER\BIONTECH | 65+ years | Death | 930386-1 | Patient received first dose of vaccine on 12/28, developed COVID-19 infection shortly thereafter and expired on 1/6/2021. |
| COVID-19 | PFIZER\BIONTECH | 65+ years | Death | 930418-1 | Patient received first dose of vaccine on 12/28, developed COVID-19 infection shortly thereafter and expired on 1/4/2021 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| COVID-19 | PFIZER\BIONTECH | Unknown | Death | 934966-1 | COVID-19; COVID-19; Pneumonia; respiratory failure; This is a spontaneous report from a contactable consumer. An 80-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Jan2021 for COVID-19 immunization. Medical history included Alzheimer's and others. No known allergies. Concomitant medications included unspecified medications. The reporter's mother in law was tested for COVID-19 at a nursing facility on 25Dec2020 and she was negative. On 02Jan2021, she received the first dose of Pfizer vaccine. On 04Jan2020, she developed a high fever, needed oxygen and was positive for COVID-19. Date of death was 04Jan2021. The cause of her death was listed as pneumonia, respiratory failure and COVID-19. No autopsy performed. No treatment received. No one knew if the vaccination contributed to her death. It was hard to know if her death was due to the administration of the vaccine or it exacerbated the COVID19 symptoms which led to her death. Since this was unknown, it could have been a possibility. The reporter wanted to give us this information because we might want to consider having high risk population, patients with underlying conditions, older population tested for COVID-19 prior to the vaccination, as this is not currently a recommendation or a requirement. All is very new and they are all learning so the reporter wanted to share this information with us. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. There are medications the patient received within 2 weeks of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has been tested for COVID-19. The outcome of the events was fatal. Information about Lot/Batch has been requested.; Sender's Comments: The association between the fatal event lack of effect (pneumonia, respiratory failure and COVID-19) with BNT162b2 can not be fully 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.; Reported Cause(s) of Death: Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19 |
| CRANIOTOMY | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| CRANIOTOMY | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| CREPITATIONS | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| CULTURE TISSUE SPECIMEN | MODERNA | 65+ years | Death | 934539-1 | Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021 |
| CULTURE URINE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| CULTURE URINE | PFIZER\BIONTECH | 65+ years | Death | 919108-1 | Fever, Malaise |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| CULTURE URINE NEGATIVE | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| CULTURE WOUND POSITIVE | MODERNA | 60-64 years | Life Threatening | 919593-1 | Patient developed a septic knee (history of arthroplasty) need for immediate surgery, hospitalization and months to years of antibiotics in his future now. |
| CYANOSIS | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |
| CYANOSIS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| CYANOSIS | PFIZER\BIONTECH | 65+ years | Death | 945603-1 | Had no immediate issues with the vaccine. He had returned from the hospital on 12/21 and had some concerns about his weight which were shared with his physician on 1/4/21. On 1/5/21 had a visit with his cardiologist for a pacemaker check. On 1/8/21 staff were called to his room, he was on the floor, bluish skin color. No vital signs found, no heart rhythm heard at 2200. |
| CYTOKINE STORM | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| DEATH | MODERNA | 18-29 years | Death | 936805-1 | Patient received the vaccine on 12/22/20 without complication. It was reported today that the patient was found unresponsive and subsequently expired at home on 1/11/21. |
| DEATH | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at 7:20am. |
| DEATH | MODERNA | 40-49 years | Death | 929764-1 | The patient was found deceased at home about 24 hours after immunization. Date of Death:: 12/29/2020; estimated time of death 6:00pm |
| DEATH | MODERNA | 40-49 years | Death | 933578-1 | Pronounced dead 1/9/2021 at 12:42. Received first dose of vaccine 1/8/2021 |
| DEATH | MODERNA | 50-59 years | Death | 918518-1 | syncopal episode - arrested - CPR - death |
| DEATH | MODERNA | 50-59 years | Death | 920815-1 | Found deceased in her home, unknown cause, 6 days after vaccine. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
|---|---|---|---|---|---|
| DEATH | MODERNA | 50-59 years | Death | 928933-1 | Patient had been diagnosed with COVID-19 on Dec. 11th, 2020. Symptoms were thought to have started on 12/5/2020. Received Moderna vaccine on 12/23. Unexpected death on 1/8/2021. Resuscitation attempts unsuccessful |
| DEATH | MODERNA | 50-59 years | Death | 930910-1 | Patient received COVID vaccination around 12:15pm. Patient was monitored for the appropriate amount of time by nursing staff. Patient passed away at 2:15pm. |
| DEATH | MODERNA | 50-59 years | Death | 935511-1 | Patient received the 1st dose of Moderna and was found deceased in her home the next day. |
| DEATH | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| DEATH | MODERNA | 50-59 years | Death | 946293-1 | 51 year old M with h/o O2 dependent COPD, Severe pulmonary fibrosis became increasingly hypoxic around 1800hours 1/7/2021. He was transported to hospital for acute on chronic hypoxia respiratory failure. On 1/12/2021 he decompensated further, and after discussing with family and palliative care, He was changed to comfort care. He expired on 1/12/2021@2325 at medical center. |
| DEATH | MODERNA | 60-64 years | Death | 918065-1 | 1/1/2020: Residents was found unresponsive. Pronounced deceased at 6:02pm |
| DEATH | MODERNA | 60-64 years | Death | 923993-1 | Patient was vaccinated Dec 30, 2020. Prime dose of Moderna vaccine. Observed for full 15 minutes post-injection. No complaints when asked during observation. Released. Subsequently, vaccine clinic staff learned from the patient's supervisor that on Jan 4, 2021 that the patient had expired on Jan 2, 2021. By report from the supervisor, the patient was found dead at his home. The patient's primary care provider was unaware of his death when contacted by this reporter today (Jan 6, 2021). Electronic Medical Record without any information since the vaccination. |
| DEATH | MODERNA | 60-64 years | Death | 930154-1 | Notified today that he passed away. No other details known at this time. |
| DEATH | MODERNA | 60-64 years | Death | 937569-1 | patient reported expired 1/7/2021 |
| DEATH | MODERNA | 60-64 years | Death | 941743-1 | This person was found to be deceased on routine rounds during the night, 3am. No symptoms of reaction noted post vaccine. No injection site reaction. No reports of any allergic reaction. |
| DEATH | MODERNA | 65+ years | Death | 910363-1 | Patient had mild hypotension, decreased oral intake, somnolence starting 3 days after vaccination and death 5 days after administration. He did have advanced dementia and was hospice eligible based on history of aspiration pneumonia. |
| DEATH | MODERNA | 65+ years | Death | 913733-1 | My grandmother died a few hours after receiving the moderna covid vaccine booster 1. While I don?t expect that the events are related, the treating hospital did not acknowledge this and I wanted to be sure a report was made. |
| DEATH | MODERNA | 65+ years | Death | 914621-1 | Resident in our long term care facility who received first dose of Moderna COVID-19 Vaccine on 12/22/2020, only documented side effect was mild fatigue after receiving. She passed away on 12/27/2020 of natural causes per report. Has previously been in & out of hospice care, resided in nursing home for 9+ years, elderly with dementia. Due to proximity of vaccination we felt we should report the death, even though it is not believed to be related. |
| DEATH | MODERNA | 65+ years | Death | 915880-1 | Patient died within 12 hours of receiving the vaccine. |
| DEATH | MODERNA | 65+ years | Death | 917117-1 | After vaccination, patient tested positive for COVID-19. Patient was very ill and had numerous chronic health issues prior to vaccination. Facility had a number of patients who had already tested positive for COVID-19. Vaccination continued in an effort to prevent this patient from contracting the virus or to mitigate his risk. This was unsuccessful and patient died. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | MODERNA | 65+ years | Death | 917790-1 | At the time of vaccination, there was an outbreak of residents who had already tested positive for COVID 19 at the nursing home where patient was a resident. About a week later, patient tested positive for COVID 19. She had a number of chronic, underlying health conditions. The vaccine did not have enough time to prevent COVID 19. There is no evidence that the vaccination caused patient's death. It simply didn't have time to save her life. |
| DEATH | MODERNA | 65+ years | Death | 917793-1 | Prior to the administration of the COVID 19 vaccine, the nursing home had an outbreak of COVID-19. Patient was vaccinated and about a week later she tested positive for COVID-19. She had underlying thyroid and diabetes disease. She died as a result of COVID-19 and her underlying health conditions and not as a result of the vaccine. |
| DEATH | MODERNA | 65+ years | Death | 918487-1 | Two days post vaccine patient went into cardiac arrest and passed away. |
| DEATH | MODERNA | 65+ years | Death | 920326-1 | Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21 |
| DEATH | MODERNA | 65+ years | Death | 921547-1 | DEATH ON 1/4/2021, RESIDENT RECIEVED VACCINE ON 1/2/20 |
| DEATH | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |
| DEATH | MODERNA | 65+ years | Death | 924126-1 | resident expired 1/1/2021 |
| DEATH | MODERNA | 65+ years | Death | 924186-1 | Resident expired 1/3/21 |
| DEATH | MODERNA | 65+ years | Death | 924664-1 | At approximately, 1855, I was alerted by caregiver, resident was not responding. Per caregiver, she was doing her rounds and found resident in bed, unresponsive, mouth open, observed gurgling noises and tongue hanging out of mouth. This primary caregiver observed resident at baseline and ambulating after dinner at approximately, 1800 less than an hour prior to incident. This PCG called 911 for EMS and gave report of incident. Resident was taken to Medical Center Emergency Department. At ER, CT scan and X-ray was performed. Per report from ER RN, CT scan and x-ray revealed an intracranial aneurysm and fluid in the lungs. Per RN, resident was still unresponsive and was admitted to Medical Center for observation and comfort measures. This primary caregiver reported to RN, resident recently received the first dose of COVID-19 vaccine on 1/2/21. Primary caregiver received a call from Castle RN at 0700, resident expired at 0615. |
| DEATH | MODERNA | 65+ years | Death | 925154-1 | Deceased |
| DEATH | MODERNA | 65+ years | Death | 925264-1 | PT was found deceased in his home on 1/5/2021 |
| DEATH | MODERNA | 65+ years | Death | 926600-1 | Patient did not report any signs or symptoms of adverse reaction to vaccine. Patient suffered from several comorbidities (diabetes and renal insufficiency). Patient reported not feeling well 01/06/2021 and passed away that day. |
| DEATH | MODERNA | 65+ years | Death | 927260-1 | 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. |
| DEATH | MODERNA | 65+ years | Death | 928513-1 | Resident passed away in her sleep |
| DEATH | MODERNA | 65+ years | Death | 929997-1 | Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair. |
| DEATH | MODERNA | 65+ years | Death | 930876-1 | Death |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | MODERNA | 65+ years | Death | 933846-1 | "1-2-2021 10:30 PM Complained Right arm/back hurt - took Tylenol 1-3-2021 Complained Right arm hurt, dizzy 1-4-2021 Felt better - did laundry, daughter found her deceased at 3:30 pm. Dr. at hospital said it was ""cardiac event"" according to death certificate." |
| DEATH | MODERNA | 65+ years | Death | 934050-1 | Staff reported that patient was found Friday morning (Jan 8) sitting at a table with his head tilted forward and unresponsive to verbal or physical stimuli. Staff lowered patient to floor and started CPR. EMS was called and continued CPR at scene, however they were not able to revive patient. Patient was pronounced dead at the scene. Staff written statements following the death of patient show that he had a fall about 1 hr. prior. It is unknown if this fall contributed to patient's death. An autopsy has been requested. |
| DEATH | MODERNA | 65+ years | Death | 934263-1 | The resident resides in an independent living facility/apartment. The reporter at the center was informed by his daughter he was not feeling well on 1/1/2021 (specific symptoms could not be ascertained). He reportedly went to be COVID tested on 1/1/2020 and observed to be deceased in his apartment on 1/2/2020. I do not have confirmation of his COVID results, although the reporter indicates his daughter reports his test was positive. |
| DEATH | MODERNA | 65+ years | Death | 934539-1 | Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021 |
| DEATH | MODERNA | 65+ years | Death | 935222-1 | Patient was reported to be deceased at home by law enforcement on 1/7/21 |
| DEATH | MODERNA | 65+ years | Death | 937127-1 | The facility had positive cases of COVID when we were able to begin vaccinating residents. Within about a week of vaccination, patient was tested positive for COVID. He was 91 years old and his immune system did not have the time to allow the vaccine to begin working before exposure. His age was a major contributing factor to his death. |
| DEATH | MODERNA | 65+ years | Death | 937434-1 | Pt expired due to possible cardiac arrest. Unsure if this was vaccine related. |
| DEATH | MODERNA | 65+ years | Death | 940602-1 | "Patient received vaccine on 1/8/2021. On 1/9/2021 I checked on patient via phone for symptoms or problems and he reported none but mild soreness at injection site. On 1/10/2021 family friend called me to tell me that patient had expired at about 8:00 pm. Patient reportedly complained of ""pain"" unspecific and collapsed at home. Hospital reportedly told family that it appeared to be a ""heart attack""." |
| DEATH | MODERNA | 65+ years | Death | 940855-1 | Patient received her vaccination on 1/12/21 administered by pharmacy*+. She expired on 1/12/21 an approximately 7:30pm. Resident did not have any adverse reactions and was a hospice patient. |
| DEATH | MODERNA | 65+ years | Death | 940866-1 | "Patient was found ""acting abnormal"" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest." |
| DEATH | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| DEATH | MODERNA | 65+ years | Death | 941607-1 | The patient passed away today, 1/13/2021. She was a hospice patient. She showed no adverse effects after receiving the vaccine on 1/12/2021. This morning she woke up as normal and during her morning shower she had a bowel movement, went limp and was non-responsive. The patient passed away at 7:45 am. |
| DEATH | MODERNA | 65+ years | Death | 943362-1 | Pt collapsed at home approx 5:30 pm and died |
| DEATH | MODERNA | 65+ years | Death | 943889-1 | No adverse reactions observed after administration of medication. Patient starting complaining of shortness of breath around 0500 the following morning. SP02 checked in the 80s. Patient expired 01/09/2021; |
| DEATH | MODERNA | 65+ years | Death | 944641-1 | Patient died on 1/21-2021 |
| DEATH | MODERNA | 65+ years | Death | 944659-1 | Patient died. A friend called to let us know. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 30-39 years | Death | 921667-1 | LTCF Pfizer Vaccine clinic conducted 12/29/2020 Vaccine lead received a call indicating that a staff member deceased somewhere between 1/3/2021 and 1/4/2021. Cause of death is unknown, and an autopsy is being performed. |
| DEATH | PFIZER\BIONTECH | 40-49 years | Death | 937527-1 | unsure if related to vaccine, but was notified by her next of kin that she died on 1/4/2021. No reports of side effects or hospitalization were reported to the facility prior to the notification of death. |
| DEATH | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| DEATH | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
|---|---|---|---|---|---|
| DEATH | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| DEATH | PFIZER\BIONTECH | 50-59 years | Death | 944595-1 | 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 |
| DEATH | PFIZER\BIONTECH | 60-64 years | Death | 914805-1 | RESIDENT CODED AND EXPIRED |
| DEATH | PFIZER\BIONTECH | 60-64 years | Death | 914917-1 | Death by massive heart attack. Pfizer-BioNTech COVID-19 Vaccine EUA |
| DEATH | PFIZER\BIONTECH | 60-64 years | Death | 933090-1 | Patient died, I have a copy of his vaccination card |
| DEATH | PFIZER\BIONTECH | 60-64 years | Death | 935815-1 | Difficulty breathing, death. |
| DEATH | PFIZER\BIONTECH | 60-64 years | Death | 944439-1 | Resident expired on 1/2/21. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 913143-1 | Vaccine administered with no immediate adverse reaction at 11:29am. Vaccine screening questions were completed and resident was not feeling sick and temperature was 98F. At approximately 1:30pm the resident passed away. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 914604-1 | Spouse awoke 12/20 and found spouse dead. Client was not transferred to hospital. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 65+ years | Death | 914690-1 | Within 24 hours of receiving the vaccine, fever and respiratory distress, and anxiety developed requiring oxygen, morphine and ativan. My Mom passed away on the evening of 12/26/2020. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 914895-1 | Injection given on 12/28/20 - no adverse events and no issues yesterday; Death today, 12/30/20, approx.. 2am today (unknown if related - Administrator marked as natural causes) |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 914961-1 | pt passed away with an hour to hour and 1/2 of receiving vaccine. per nursing home staff they did not expect pt to make it many more days. pt was unresponsive in room when shot was given. per nursing home staff pt was 14 + days post covid |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 914994-1 | pt was a nursing home pt. pt received first dose of covid vaccine. pt was monitored for 15 minutes after getting shot. staff reported that pt was 15 days post covid. Pt passed away with in 90 minutes of getting vaccine |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 915562-1 | pt received vaccine at covid clinic on 12/30 at approximately 3:30, pt vomited 4 minutes after receiving shot--dark brown vomit, staff reported pt had vomited night before. Per staff report pt became short of breath between 6 and 7 pm that night. Pt had DNR on file. pt passed away at approximately 10pm. Staff reported pt was 14 + days post covid |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 915682-1 | Resident received vaccine per pharmacy at the facility at 5 pm. Approximately 6:45 resident found unresponsive and EMS contacted. Upon EMS arrival at facility, resident went into cardiac arrest, code initiated by EMS and transported to hospital. Resident expired at hospital at approximately 8 pm |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 915920-1 | Resident received vaccine in am and expired that afternoon. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 918388-1 | Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 920832-1 | Vaccine 12/30/2020 Screening PCR done 12/31/2020 Symptoms 1/1/2021 COVID test result came back positive 1/2/2021 Deceased 1/4/2021 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 921481-1 | Vaccine given on 12/29/20 by Pharmacy. On 1/1/21, resident became lethargic and sluggish and developed a rash on forearms. He was a Hospice recipient and doctor and Hospice ordered no treatment, just to continue to monitor. When no improvement of codition reported, doctor and Hospice ordered comfort meds (Morphine, Ativan, Levsin). Resident expired on 1/4/2021 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 921880-1 | The resident was found deceased a little less than 12 hours following COVID vaccination, and he had had some changes over the last 2 days. He was 96 and had been on hospice care for a little while. Noone noticed any side effects from vaccine after it was given |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 925556-1 | Expired 1/05/2021 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 926269-1 | "Pt last seen at 1200 by nurse for ID band check. No visible signs of distress noted. Pt states ""I just want to be left alone"". 1230 nurse was called to pt room. Pt was noted unresponsive, no pulse and respiration noted. CPR started immediately, at 1239 first shock given. 1245 EMT took over, at 1319 EMT called time of death" |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 926462-1 | Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 926568-1 | patient declined 12/30/2020 and was transferred to hospital where he did not respond to treatment and passed away 1/4/2020 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 927189-1 | Patient was vaccinated at 11am and was found at the facility in his room deceased at approximately 3:00pm. Nurse did not have cause of death |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 929359-1 | 3:07 pm lung sounds diminished oxygen sats 68%, oxygen applied Oxygen sats remained low for next 36 hours ( patient on Hospice care ) expired 6:22 am 1-8-21 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 930386-1 | Patient received first dose of vaccine on 12/28, developed COVID-19 infection shortly thereafter and expired on 1/6/2021. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 930418-1 | Patient received first dose of vaccine on 12/28, developed COVID-19 infection shortly thereafter and |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | expired on 1/4/2021 |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 930912-1 | Diarrhea followed by death 24 hrs after vaccination |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 932346-1 | 1/7-21 - Received second dose of pfizer covid-19 vaccine 1/8/21 - Fever, dizziness, headache 1/10/21 0250 was found not breathing. EMS performed CPR and patient deceased |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 932787-1 | RECIEVED VACCINE 1/8/21 EXPIRED UNEXPECTED 1/10/21, NO ADVERSE REACTIONS NOTED |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 934059-1 | Acute anterior MI with death |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 934373-1 | Patient went to bed around 11pm on Saturday PM and sometime between then and 1:30am on Sunday morning got up and went into the living room without waking up her husband (which is normal). At 1:30am, the husband got up to use the restroom and she was out of bed then, but the husband did not know if she was having any problems at this time. When he got up at 7:45am, she was in the recliner and did not move or anything, which is normal for her. At 8:45am, the husband went back into the living room and tried to wake his wife and that is when he noticed there was no pulse and he called 9-1-1 at this time. EMS got on scene and did CPR for 30 mins and she was pronounced dead at 9:21am. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 935343-1 | There were no adverse reactions. Resident Died, she had a history of issues with her health prior to the vaccine. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 935767-1 | My mother was given Pfizer vaccine on Thursday and she died 3 days later yesterday on Sunday!!! |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 937444-1 | Resident was found deceased at approximately 6pm in her apartment |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 65+ years | Death | 940822-1 | patient passed away after receiving the Covid vaccine; This is a spontaneous report from a contactable nurse. An 81-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), intramuscular into the right arm on 07Jan2021 at 0.3 mL, single for covid-19 immunization. There was no medical history and no concomitant medications. On 08Jan2021, the patient passed away after receiving the COVID vaccine. The patient died on 08Jan2021. An autopsy was not performed. Investigations indicate that unspecified labs were done, but nothing two weeks prior; no further details were provided. The patient received the first dose the day prior. The reporting nurse discussed it with the medical director, and he thought that he potentially passed away from the COVID vaccine. The relatedness of the event to the suspect vaccine was reported as related by the reporting nurse per The Agency. The batch/lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up .; Sender's Comments: Based on the limited information available, it is medically not possible to make meaningful causality assessment, it is unlikely the vaccine could have contributed to the death of the patient based on the known safety profile. However case will be reevaluated when additional information is received during the follow-up 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.; Reported Cause(s) of Death: Stated that the patient passed away after receiving the Covid vaccine |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 940954-1 | "Heart attack; This is a spontaneous report from a contactable consumer. An 82-year-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number: and Expiration Date: Unknown), via an unspecified route of administration in the left arm on 05Jan2021 at 13:00 at a single dose for COVID-19 immunization; administered in doctor's office/urgent care. The patient's medical history and concomitant medications were not reported. It was unknown if the patient received any other vaccines within four weeks prior to the COVID vaccine. Prior to the vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 05Jan2021, the patient experienced heart attack; which resulted in death and was assessed as medically significant. The patient also experienced the associated symptoms of cold sweats, chest pain, shortness of breath. Therapeutic measures were taken as a result of heart attack, which included ""life saving measures"" by the paramedics performed upon arrival with no success. The clinical outcome of the event, heart attack, was fatal. The patient died on 05Jan2021 due to heart attack; as ruled by the paramedics. It was unknown if an autopsy was performed. The batch/lot numbers for the vaccine, PFIZER-BIONTECH COVID-19 MRNA VACCINE, were not provided and will be requested during follow up.; Reported Cause(s) of Death: Heart attack" |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 65+ years | Death | 940955-1 | "Cardiac Arrest; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; This is a spontaneous report from a contactable other healthcare professional (HCP). A 66-year-old female patient (pregnant at the time of vaccination: no) received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL1284) via intramuscular at left arm on 11Jan2021 12:15 PM at single dose for COVID-19 immunization. Medical history included diastolic CHF, spinal stenosis, morbid obesity, epilepsy, pulmonary hypertension and COVID-19 (Prior to vaccination, the patient was diagnosed with COVID-19). The patient received medication within 2 weeks of vaccination included amiodarone, melatonin, venlafaxine hydrochloride (EFFEXOR), ibuprofen, aripiprazole (ABILIFY), lisinopril, cranberry capsules, diltiazem, paracetamol (TYLENOL), famotidine, furosemide (LASIX [FUROSEMIDE]), ipratropium bromide, salbutamol sulfate (IPRATROPIUM/ALBUTEROL), buspirone, senna alexandrina leaf (SENNA [SENNA ALEXANDRINA LEAF]), polyethylene glycol 3350 and morphine. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient used took Penicillin, propranolol, quetiapine, topiramate, Lamictal and had allergy to them. Patient used took the first dose of BNT162B2 (lot number: EJ1685) via intramuscular at right arm on 21Dec2020 12:00 PM at single dose for COVID-19 immunization. Since the vaccination, the patient been tested for COVID-19 (Sars-cov-2 PCR) via nasal swab on 06Jan2021, covid test result was negative. Patient was found pulseless and breathless 20 minutes following the vaccine administration (11Jan2021 12:30 AM). MD found no signs of anaphylaxis. Patient died on 11Jan2021 12:30 AM because of cardiac arrest. No treatment received for the events. Outcome of pulseless and breathless was unknown. the autopsy was performed, and autopsy remarks was unknown. Autopsy-determined cause of death was unknown. It was reported as non-serious, not results in death, Life threatening, caused/prolonged hospitalization, disabling/Incapacitating nor congenital anomaly/birth defect.; Sender's Comments: Based on the available information this patient had multiple underlying medical conditions including morbid obesity, diastolic CHF, epilepsy, pulmonary hypertension and COVID-19 diagnosed prior to vaccination. All these conditions more likely contributed to patients cardiac arrest resulting in death. However, based on a close temporal association (""Patient was found pulseless and breathless 20 minutes following the second dose of BNT162B2 vaccine administration, contributory role of BNT162B2 vaccine to the onset of reported events cannot 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.; Reported Cause(s) of Death: Cardiac arrest; Autopsy-determined Cause(s) of Death: autopsy remarks was unknown. Autopsy-determined cause of death was unknown" |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 65+ years | Death | 941215-1 | Actual event and cause of death were unknown; This is a spontaneous report from a non-contactable consumer. A 90-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 06Jan2021 at single dose for COVID Prevention. The relevant medical history included aortic valve replacement from Nov2019. Concomitant medications were not reported. The consumer stated that she was taking the reporting responsibilities to report that a friend of hers, informed that the patient passed away on Friday, and had received the COVID vaccine on Wednesday. The consumer stated that it was unknown to her at this time, if the friend had called to complete a report herself, regarding the incident. Their conversation was very brief. The patient was 90 years old, and it was her friend's mother that was the patient. Actual event and cause of death were unknown. The patient had her vaccine on Wednesday 06Jan2021, and then the patient collapsed in front of the reporter at Friday night on 08Jan2021 and passed away that same day. The autopsy was unknown. The outcome of the event was fatal. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Actual event and cause of death were unknown |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 942040-1 | little bit of a reaction light headed after 5 minutes. vitals were low, so observed for 30 minutes after being light headed. Patient was found unresponsive and pronounced dead later that day. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 942072-1 | Death occurred 3 days after vaccine receipt; attributed to complications of her chronic advanced dementia with aspiration at age 87. No evidence of acute vaccine reaction. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 943442-1 | Systemic: reported by staff patient expired under suspicious circumstnces after receiving vaccine. Patient was on hospice, reported not expected to pass this soon; symptoms lasted 0 days |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 944273-1 | death 2 days after vaccine; 101 fever on day of booster shot; This is a spontaneous report from a contactable consumer. A 65-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 09Jan2021 (at the age of 65-years-old) as a single dose for COVID-19 immunization. Medical history included high blood pressure, high cholesterol, enlarged prostate, and lifelong digestive issues/irritable bowel syndrome (IBS). Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient had no allergies to medications, food, or other products. The patient's concomitant medications were not reported. The patient did not receive any other vaccines within four weeks prior to the vaccination. The patient experienced 101 fever on day of booster shot on 09Jan2021 and death 2 days after vaccine on 10Jan2021. The event, death 2 days after vaccine, was reported as fatal. The patient underwent lab tests and procedures, which included body temperature: 101 on 09Jan2021. The patient did not receive treatment for the events. The clinical outcome of 101 fever on day of booster shot was unknown and of death 2 days after vaccine was fatal. The patient died on 10Jan2021. The cause of death was unknown. It was unknown if an autopsy was done. It was also reported that since the vaccination, the patient had not been tested for COVID-19. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: death 2 days after vaccine |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 65+ years | Death | 944282-1 | resident coded on 09Jan at 8am and expired; This is a spontaneous report from a contactable Other Health Professional. A 70-year-old male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Batch/lot number: EL0140), intramuscularly in left arm on 05Jan2021 15:15 at single dose for COVID-19 immunization. Medical history included DM2(Type two diabetes mellitus), CHF(congestive heart failure), open wound, wound infection, heart failure. Allergies to medications, food, or other products: none. Concomitant medications included unspecified products (List of any other medications the patient received within 2 weeks of vaccination: yes). If the patient received any other vaccines within 4 weeks prior to the COVID vaccine: Unknown. Facility where the most recent COVID-19 vaccine was administered: Nursing Home/Senior Living Facility. The resident coded on 09Jan2021 at 8 AM and expired. The patient died on 09Jan2021. An autopsy was not performed. AE resulted in: patient died. Death cause: unknown at this time. Was treatment received for the adverse event: Unknown. Prior to vaccination, was the patient diagnosed with COVID-19: No. Since the vaccination, has the patient been tested for COVID-19: No. Serious: Yes. Seriousness criteria-Results in death: Yes. Seriousness criteria-Life threatening: No. Seriousness criteria-Caused/prolonged hospitalization: No. Seriousness criteria-Disabling/Incapacitating: No. Seriousness criteria-Congenital anomaly/birth defect: No.; Sender's Comments: The old patient had diabetes mellitus, congestive heart failure, open wound complicated by infection, all these pre-existing medical conditions contribute to the patient death. More information including complete medical history, concomitant medications and event term details especially death cause and autopsy results are needed for a full assessment of the case. 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; Reported Cause(s) of Death: resident coded on 09Jan at 8am and expired |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 944365-1 | Resident expired on 12/30/20, dx cardiac arrest. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 944998-1 | On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 945241-1 | 71yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, VS taken at 10am, B/P 99/60, O2 sats, 95% (trach w/O2). At 11:30am, Patient showed no s/sx of distress, A&Ox3. At 11:50am, a nurse went to perform a COVID test and assessment (the facility is experiencing an outbreak), and found the patient unresponsive on the bathroom floor. CPR was immediately started; no shock advised per AED; 12:15pm EMS arrived and took over. At 12:38pm, EMT called time of death. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | 65+ years | Death | 945578-1 | No reactions immediately after vaccine was given. Resident has dementia, has had multiple hospitalizations related to a renal stone recently. Had a tooth that was bothering her, went to see her dentist and it was extracted on 1/6/21. On 1/10 they noted feet and ankles are dark purple with white splotches appears to be mottling. Minimally responsive to voice and touch. Not eating. Compassionate visit with family. Family did not want hospice, did not feel it was needed, said, what more could they do for her than you're already doing? On 1/11 at 1950 was determined to be deceased. |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 946097-1 | died 3 days after receiving the vaccine/Death cause: Pneumonia per doctor; This is a spontaneous report from a contactable consumer. An 85-year-old non-pregnant female patient (reporter's mother) received the first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 07Jan2021 at single dose for covid-19 immunization. Medical history included dementia from an unknown date. The patient's concomitant medications were not reported. The patient died 3 days after receiving the vaccine on 10Jan2021 11:00, death cause was pneumonia per doctor. The event was reported as serious as resulted in death. It was unknown if the patient received treatment for the event. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient was not diagnosed with COVID-19 prior to vaccination, and it was unknow if the patient has been tested for COVID-19 since the vaccination. The patient died on 10Jan2021. It was not reported if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: Pneumonia |
| DEATH | PFIZER\BIONTECH | 65+ years | Death | 946225-1 | At approximately 10:30pm on 1/14/2021, resident was noted to have a rash on her face, hands, arms, and chest. VS:100.2, 113, 20,108/59, 84% room air. applied nasal cannula at 4-L, telephoned Physician orders 6mg Decadron one time order, a second set of Vitals , reads 99.3, 110, 20, 106/60, 90% on 4-L N/C. On coming shift advised. At approximately 2:00am on 1/15/2021, resident congested and coughing. BP 151/70, pulse 124, temp 98.1 forehead, resp 20 and pulse oc 79% on 3L. At approximately 2:30am PRN cough syrup and breathing tx. Resident's condition began to worsen with breathing tx. This LPN updated at 0248 doctor on resident's condition. Doctor gave permission for resident to go to hospital. At 4:19am the Er called to say resident passed away. |
| DEATH | PFIZER\BIONTECH | Unknown | Death | 930431-1 | Cardiac event, 2 days after vaccination, patient expired. |
| DEATH | PFIZER\BIONTECH | Unknown | Death | 934963-1 | Death; This is a spontaneous report from a contactable Physician. An elderly male patient received BNT162B2 (COVID vaccine), via an unspecified route of administration on an unspecified date in Dec2020 at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient experienced death in Jan2021. It was unknown if an autopsy was performed. It was unknown if any treatment was received for the event. It was unknown if the patient was diagnosed with COVID prior vaccination or if the patient had been tested for COVID post vaccination. Seriousness criteria for the event was reported as death and hospitalization. Pfizer is a marketing authorization holder of [COVID vaccine] in the country of incidence or the country where the product was purchased (if different). This may be a duplicate report if another marketing authorization holder of [COVID vaccine] has submitted the same report to the regulatory authorities. Information about lot/batch number has been requested.; Sender's Comments: Current information is very limited for full assessment. Further information such medical history, concomitant medications, concurrent illness and event term details especially death cause and autopsy results are needed for meaningful evaluation. 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.; Reported Cause(s) of Death: Death |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DEATH | PFIZER\BIONTECH | Unknown | Death | 934966-1 | COVID-19; COVID-19; Pneumonia; respiratory failure; This is a spontaneous report from a contactable consumer. An 80-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Jan2021 for COVID-19 immunization. Medical history included Alzheimer's and others. No known allergies. Concomitant medications included unspecified medications. The reporter's mother in law was tested for COVID-19 at a nursing facility on 25Dec2020 and she was negative. On 02Jan2021, she received the first dose of Pfizer vaccine. On 04Jan2020, she developed a high fever, needed oxygen and was positive for COVID-19. Date of death was 04Jan2021. The cause of her death was listed as pneumonia, respiratory failure and COVID-19. No autopsy performed. No treatment received. No one knew if the vaccination contributed to her death. It was hard to know if her death was due to the administration of the vaccine or it exacerbated the COVID19 symptoms which led to her death. Since this was unknown, it could have been a possibility. The reporter wanted to give us this information because we might want to consider having high risk population, patients with underlying conditions, older population tested for COVID-19 prior to the vaccination, as this is not currently a recommendation or a requirement. All is very new and they are all learning so the reporter wanted to share this information with us. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. There are medications the patient received within 2 weeks of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has been tested for COVID-19. The outcome of the events was fatal. Information about Lot/Batch has been requested.; Sender's Comments: The association between the fatal event lack of effect (pneumonia, respiratory failure and COVID-19) with BNT162b2 can not be fully 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.; Reported Cause(s) of Death: Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19 |
| DEATH | PFIZER\BIONTECH | Unknown | Death | 938097-1 | died; This is a spontaneous report from a non-contactable consumer via a Pfizer-sponsored program. 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 immunisation. The patient medical history and concomitant medications were not reported. It was reported the patient was a doctor, died after the vaccine with no apparent disease. It was not reported if an autopsy was performed. No follow-up attempts are possible. Information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Unknown cause of death |
| DEATH | PFIZER\BIONTECH | Unknown | Death | 940950-1 | thrombopenia; pulmonary embolism; neutropenia fever; This is a spontaneous report from a Pfizer-sponsored program . A contactable consumer reported for a patient that received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA 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. The patient experienced thrombopenia, pulmonary embolism and neutropenia fever on an unspecified date. The clinical outcome of thrombopenia, pulmonary embolism and neutropenia fever was fatal. The patient died on an unspecified date. It was unknown if an autopsy was performed. The batch/lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up.; Reported Cause(s) of Death: thrombopenia; pulmonary embolism; neutropenia fever |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DECREASED APPETITE | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| DECREASED APPETITE | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| DECREASED APPETITE | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DECREASED APPETITE | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| DECREASED APPETITE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |
| DECREASED APPETITE | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |
| DECREASED APPETITE | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on |

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| DECREASED APPETITE | PFIZER\BIONTECH | 65+ years | Death | 945578-1 | No reactions immediately after vaccine was given. Resident has dementia, has had multiple hospitalizations related to a renal stone recently. Had a tooth that was bothering her, went to see her dentist and it was extracted on 1/6/21. On 1/10 they noted feet and ankles are dark purple with white splotches appears to be mottling. Minimally responsive to voice and touch. Not eating. Compassionate visit with family. Family did not want hospice, did not feel it was needed, said, what more could they do for her than you're already doing? On 1/11 at 1950 was determined to be deceased. |
| DEHYDRATION | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| DEMENTIA | MODERNA | 65+ years | Death | 914621-1 | Resident in our long term care facility who received first dose of Moderna COVID-19 Vaccine on 12/22/2020, only documented side effect was mild fatigue after receiving. She passed away on 12/27/2020 of natural causes per report. Has previously been in & out of hospice care, resided in nursing home for 9+ years, elderly with dementia. Due to proximity of vaccination we felt we should report the death, even though it is not believed to be related. |
| DEMENTIA | PFIZER\BIONTECH | 65+ years | Death | 942072-1 | Death occurred 3 days after vaccine receipt; attributed to complications of her chronic advanced dementia with aspiration at age 87. No evidence of acute vaccine reaction. |

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| DEPRESSED LEVEL OF CONSCIOUSNESS | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| DEPRESSED LEVEL OF CONSCIOUSNESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| DIARRHOEA | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |

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| DIARRHOEA | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| DIARRHOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| DIARRHOEA | PFIZER\BIONTECH | 65+ years | Death | 930912-1 | Diarrhea followed by death 24 hrs after vaccination |
| DIARRHOEA | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |
| DIFFERENTIAL WHITE BLOOD CELL COUNT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| DISORIENTATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| DIZZINESS | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| DIZZINESS | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |

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| DIZZINESS | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| DIZZINESS | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| DIZZINESS | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| DIZZINESS | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| DIZZINESS | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| DIZZINESS | MODERNA | 50-59 years | Life Threatening | 929418-1 | Swelling of lips & tongue, tightening of throat. Quivering of arms & legs. Tightening of chest. Dizzyness lightheaded. |
| DIZZINESS | MODERNA | 65+ years | Death | 933846-1 | "1-2-2021 10:30 PM Complained Right arm/back hurt - took Tylenol 1-3-2021 Complained Right arm hurt, dizzy 1-4-2021 Felt better - did laundry, daughter found her deceased at 3:30 pm. Dr. at hospital said it was ""cardiac event"" according to death certificate." |
| DIZZINESS | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| DIZZINESS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 935180-1 | Scratchy throat, dizziness and eventually feeling like her throat is closing in |
| DIZZINESS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 936715-1 | 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. |

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| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909165-1 | At the time of the injection sharp pain across my back , then at about 5 mins after feelings of light headedness, progressing pain across my back, trouble feeling like I could get enough air in with breathing and dizziness and I tried to get to the floor to sit or lay down but passed out. Then the next event I recall was a sharp pain in my thigh(apparently administered Eli pen) . I regained consciousness and was gasping andI was told I had been given a shot of epi. |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |

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| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| DIZZINESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908973-1 | 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. |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |
| DIZZINESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| DIZZINESS | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| DIZZINESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 905544-1 | Pt expressed feeling tachycardic, jittery, shaky, site edema, shortness of breath and dizziness. Pt received epipen 0.3 mg IM injection x1 dose and benadryl PO, responded favorably and transported to ED for follow up care. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DIZZINESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| DIZZINESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| DIZZINESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| DIZZINESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| DIZZINESS | PFIZER\BIONTECH | 60-64 years | Life Threatening | 909577-1 | Dizziness, dyspnea, neck swelling |
| DIZZINESS | PFIZER\BIONTECH | 65+ years | Death | 932346-1 | 1/7-21 - Received second dose of pfizer covid-19 vaccine 1/8/21 - Fever, dizziness, headache 1/10/21 0250 was found not breathing. EMS performed CPR and patient deceased |
| DIZZINESS | PFIZER\BIONTECH | 65+ years | Death | 942040-1 | little bit of a reaction light headed after 5 minutes. vitals were low, so observed for 30 minutes after being light headed. Patient was found unresponsive and pronounced dead later that day. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DIZZINESS | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| DRY EYE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| DRY THROAT | MODERNA | 40-49 years | Life Threatening | 914309-1 | Within 3 minutes of vaccination patient became fully flushed head and neck, with rapid heart rate (112), and feeling like her airways were tightening.. Nurse immediately called for response, administered Epipen, when response arrived applied oxygen and transported to ED. Solumedrol 125 mg, Bendadryl 25 mg, and Famotidine 20 mg, she responded well and was released home with Rx Prednisone 40 mg x 3 days. Only residual effect was a dry/sore throat. |
| DRY THROAT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| DYSARTHRIA | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| DYSGEUSIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| DYSKINESIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPHAGIA | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| DYSPHAGIA | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| DYSPHAGIA | MODERNA | 65+ years | Death | 929997-1 | Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair. |
| DYSPHAGIA | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPHAGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903324-1 | 40 min after injection my throat and tongue started to feel weird and tight, pharmacy at my work hospital gave me 25 mg Benadryl and 650mg Tylenol. At about 1 hr 45 min after injection my throat got to the point of so swollen and itchy I couldn?t swallow. I went to nearest emergency room hospital they administered decadron orally, Pepcid P.O., and Toradol via IM. |
| DYSPHAGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| DYSPHAGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ---------- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ---------- ----------RN |
| DYSPHAGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| DYSPHAGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| DYSPHAGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936026-1 | Trouble swallowing, tingling around the mouth within 5 minutes of vaccine administration. IV started with 25mg Benadryl within 5 minutes of symptom onset. Transfer to ER at 1430. Symptoms unresolved, hr - 120, bp 140/100, O2 sats 100, resp: 21 Additional 25mg Benadryl, 125mg solumedrol, 1ml Ativan given IV at 1435. Symptoms began to resolve, patient discharged at 1600 to home with instructions to return if needed. Patient returned to ER Sunday January 10 at 1300 complaining of throat tightness. Patient was seen by doctor, no acute distress and airway issues seen. Patient elected to stay for 50mg benadryl and 40mg prednisone PO. Patient was discharged to home with script for 40mg prednisone q day for 3 days. Patient feels any remaining allergic symptoms have resolved. |
| DYSPHAGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPHAGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| DYSPHAGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| DYSPHAGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938829-1 | First Day after the injection I had a headache and nausea the entire day into the next day. The second day I still had the headache and the nausea. I work overnights. When I awoke in the afternoon, my throat was closing up. It was hard to swallow and I struggled to breath. I immediately drank liquid Benadryl and called my doctor in the morning. |
| DYSPHAGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| DYSPHAGIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPHAGIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| DYSPHAGIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 915813-1 | 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 adminsitered 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 |
| DYSPHAGIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 916414-1 | approximately 30 minutes after receiving vaccination i began to develop tongue and lip swelling as well as difficulty swallowing and breathing , i then proceeded immediately to the nearest er |
| DYSPHAGIA | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| DYSPHONIA | MODERNA | 40-49 years | Life Threatening | 932614-1 | Throat closing Pruritic throat and tongue Tingling lips and tongue Throat clearing Hoarse voice |
| DYSPHONIA | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| DYSPHONIA | MODERNA | 50-59 years | Life Threatening | 938443-1 | immediate tingling of lips, followed by fullness of posterior oropharynx, hoarseness and pruritus |
| DYSPHONIA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| DYSPHONIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| DYSPHONIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909278-1 | Rapid onset of hoarseness, throat tingling and tightness |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPHONIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 929526-1 | Anaphylactic reaction 6 days post vaccine 24Dec2020; I had severe chest tightness; SOB; throat soreness; hoarse voice; mouth swelling; This is a spontaneous report from a contactable physician, the patient. A 34-year-old non-pregnant female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL0140), via an unspecified route of administration in the left arm on 18Dec2020 at 15:30 (at the age of 34-years-old) as a single dose for COVID-19 immunization. Medical history included severe dust mite allergy (based on skin test). Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included cetirizine hydrochloride (MANUFACTURER UNKNOWN), hydrocodone bitartrate/paracetamol (NORCO), ibuprofen (MANUFACTURER UNKNOWN), and ondansetron (ZOFRAN); all for unspecified indications from unknown dates and unknown if ongoing. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 24Dec2020 at 10:00, 6 days post vaccination, the patient experienced anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling; all reported as life threatening. The events led to an emergency room visit and she was given epinephrine (EPI-PEN), methylprednisolone (SOLUMEDROL), and diphenhydramine hydrochloride (BENADRYL) as treatment. The patient stated that she developed the reactions 45 minutes after she took premedications for a dilatation and curettage procedure. The premedications included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron. She stated she had taken these medications several times before and this was the first time she had this reaction. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcomes of the anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling were recovered on unknown dates.; Sender's Comments: Anaphylactic reactions presented as chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling, developed 45 minutes after premedications including included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron for a dilatation and curettage procedure and 6 days post vaccination with BNT162B2, the event therefore is most likely attributed to these premedications 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPHONIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| DYSPHONIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| DYSPHONIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| DYSPNOEA | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| DYSPNOEA | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| DYSPNOEA | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| DYSPNOEA | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| DYSPNOEA | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| DYSPNOEA | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |
| DYSPNOEA | MODERNA | 50-59 years | Life Threatening | 924050-1 | anaphylaxis, dyspnea |
| DYSPNOEA | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| DYSPNOEA | MODERNA | 50-59 years | Life Threatening | 941522-1 | I was short of breath and went to emergency room on 1/5/2021. I was diagnosed with bilateral pulmonary embolisms. I was Covid negative and had no other symptoms. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | MODERNA | 60-64 years | Life Threatening | 924078-1 | "Client received vaccine at approximately 3:50pm, waited in observational area x30min. Left with husband, stated that she got a few miles down the road and starting experiencing tightness in her chest and flushing. She took 50 mg of Benadryl, 30mg of prednisone and two puffs on her inhaler. She returned to the clinic, upon assessment from nursing she looked extremely flushed and anxious, she stated that she still felt tightness and that she had a history of anaphylaxis once before and had used an epi pen in the past. She had an epi pen with her and questioned whether or not she should give it to herself. BP was 190/68, pulse was normal, respirations normal, she continued to experience tightness and ""not able to catch my breath"", encouraged to use epi pen. She administered epi pen to right thigh at approximately 4:45PM, 911 called. Within a few minutes, she stated she was feeling better, less tightness in the chest, flushing was subsiding. BP at 190/70 at 4:52. EMS on scene at 5:03pm. Vitals normal , EKG normal. Client decided not to transport with EMS." |
| DYSPNOEA | MODERNA | 60-64 years | Life Threatening | 935090-1 | SOB, Sleeplessness, |
| DYSPNOEA | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| DYSPNOEA | MODERNA | 65+ years | Death | 943889-1 | No adverse reactions observed after administration of medication. Patient starting complaining of shortness of breath around 0500 the following morning. SP02 checked in the 80s. Patient expired 01/09/2021; |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| DYSPNOEA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 904334-1 | Angioedema, hives, tachycardia, shortness of breath |
| DYSPNOEA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 936715-1 | 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. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904553-1 | Within a few minutes of taking the vaccine, my lower lip began swelling. I was moved to the emergency department of Hospital and monitored and treated for four hours. Then I was released. At around 1:30 p.m. I felt my skin singling and started having difficulty breathing. Since I was no longer at my work (Hospital) I went to the closest hospital. This reaction was much worse. My husband drove. My heart rate increased. I was released at around 6:30 pm |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909165-1 | At the time of the injection sharp pain across my back , then at about 5 mins after feelings of light headedness, progressing pain across my back, trouble feeling like I could get enough air in with breathing and dizziness and I tried to get to the floor to sit or lay down but passed out. Then the next event I recall was a sharp pain in my thigh(apparently administered Eli pen) . I regained consciousness and was gasping andI was told I had been given a shot of epi. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912785-1 | Monitored x 15 min per guidelines. Began to experience SOB and throat swelling, after which pt presented to the ED for tx, dx acute hypertensive urgency with severe hypertension. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914103-1 | 10 minutes after receiving vaccination, a significant increase in HR was noted, along with a tingling sensation through out body. Also, scratchy throat was noted. Alert by patient made to staff at vaccination site. Sweating noted and shortness of breath at that time. Epi pen given via L thigh IM. PIV started and benadryl and solumedrol given. Relief of symptoms noted very shortly after Epi administration. Taken to ER for 4 hour observation. Sent home after 4 hours and given prednisone to be taken at home, 50mg daily for 4 days. No further adverse symptoms noted. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914596-1 | Anaphalaxis reaction, stridor an unable to breathe. Happened in 30 seconds |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ---------- ----------RN |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 929526-1 | Anaphylactic reaction 6 days post vaccine 24Dec2020; I had severe chest tightness; SOB; throat soreness; hoarse voice; mouth swelling; This is a spontaneous report from a contactable physician, the patient. A 34-year-old non-pregnant female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL0140), via an unspecified route of administration in the left arm on 18Dec2020 at 15:30 (at the age of 34-years-old) as a single dose for COVID-19 immunization. Medical history included severe dust mite allergy (based on skin test). Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included cetirizine hydrochloride (MANUFACTURER UNKNOWN), hydrocodone bitartrate/paracetamol (NORCO), ibuprofen (MANUFACTURER UNKNOWN), and ondansetron (ZOFRAN); all for unspecified indications from unknown dates and unknown if ongoing. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 24Dec2020 at 10:00, 6 days post vaccination, the patient experienced anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling; all reported as life threatening. The events led to an emergency room visit and she was given epinephrine (EPI-PEN), methylprednisolone (SOLUMEDROL), and diphenhydramine hydrochloride (BENADRYL) as treatment. The patient stated that she developed the reactions 45 minutes after she took premedications for a dilatation and curettage procedure. The premedications included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron. She stated she had taken these medications several times before and this was the first time she had this reaction. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcomes of the anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling were recovered on unknown dates.; Sender's Comments: Anaphylactic reactions presented as chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling, developed 45 minutes after premedications including included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron for a dilatation and curettage procedure and 6 days post vaccination with BNT162B2, the event therefore is most likely attributed to these premedications 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. |
| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908003-1 | ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 911943-1 | Adverse reaction post Covid vaccine. Waited for 20 min post vaccine. Experienced S/S Heart palpitations, shortness of breath, tingling in extremities, diaphoretic after leaving clinic observation. Drove back to hospital, escorted by pre surgical testing hospital staff and taken by wheelchair to ED. |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913854-1 | anxiety, tachycardia, flushing, diaphoresis, HTN, SOB |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 926042-1 | 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. |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930897-1 | Shortness of breath, cough, rash on face and neck, arthralgia |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID 19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938829-1 | First Day after the injection I had a headache and nausea the entire day into the next day. The second day I still had the headache and the nausea. I work overnights. When I awoke in the afternoon, my throat was closing up. It was hard to swallow and I struggled to breath. I immediately drank liquid Benadryl and called my doctor in the morning. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 905544-1 | Pt expressed feeling tachycardic, jittery, shaky, site edema, shortness of breath and dizziness. Pt received epipen 0.3 mg IM injection x1 dose and benadryl PO, responded favorably and transported to ED for follow up care. |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 912271-1 | 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 02 Sat of 60%, and was hospitalized in the ICU at another hospital (due to bed |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | unavailability). |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916268-1 | Shortly after receiving the vaccine (within 10 minutes) the patient's tongue swelled, facial redness, gasping for air. This resident was marked for a 30 minute observation due to previous anaphylaxis type reaction. Immediately administered 0.3mg epinephrine x 1 dose. Then administered 50mg IM Diphenhydramine. This treatment course resolved the adverse reaction. Patient was monitored onsite at facility. Her husband came to pick her up and take her home. Tried to reach patient several hours after but was unable to at this time. |
| DYSPNOEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| DYSPNOEA | PFIZER\BIONTECH | 60-64 years | Death | 935815-1 | Difficulty breathing, death. |
| DYSPNOEA | PFIZER\BIONTECH | 60-64 years | Death | 942085-1 | No adverse effects from vaccination seen on 1/2/21. On 1/6/21 resident was seen by Dr and her baclofen pump was refilled with 20 ml Baclofen 4,000mcg/ml. ITB Rate increased by 6% to 455.5 mcg/day simple continuous rate over 3 days. On 1/8/21 at 0615 resident was shaking, lower extremities mottled, Sa02 70%, pulse 45. Oxygen started at 2 L/m per NC. At 0715 her primary physician was notified as well as her daughter. Oxygen increased to 4 L/min, sats at 83%. SOA noted, reported all over pain. At 0850 when they attempted to reposition the resident, she was not responsive. Licensed nurse assessed her and no heartbeat heard or pulse found. |
| DYSPNOEA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 909577-1 | Dizziness, dyspnea, neck swelling |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 911462-1 | she is better but still not good; not to be able to breath; sore right arm; This is a spontaneous report from a contactable nurse (patient herself). A 62-year-old female patient received bnt162b2 (BNT162B2, lot EK5730), intramuscular on 18Dec2020 at single dose for immunisation. Medical history included asthma (hospitalized on Jan2020 and has not had any issues since that time, referring to her asthma) diabetes, high blood pressure, swelling, sciatica, blood cholesterol abnormal, rosacea, reflux, allergies, sinus congestion, shingles and post carpal tunnel surgery. Concomitant medications included lisinopril, hydrochlorothiazide, gabapentin, rosuvastatin, metformin, glipizide, doxycycline, sucralfate, cetirizine hydrochloride (ZYRTEC), pseudoephedrine, ascorbic acid, ergocalciferol, nicotinamide, retinol, riboflavin, thiamine hydrochloride (VITAMINS) and tramadol. The patient reported that she not to be able to breath (seriousness criteria-life threatening) on 22Dec2020. She woke up this morning and could not breathe and there was no reason for her to not be able to breath. She thought she may have had a reaction to the COVID vaccine. It was the only thing she could think of that might have caused her not to be able to breathe this morning. As treatment for not to be able to breath, she used Budesonide and Levosalbutamol in her nebulizer. She had sore right arm on 18Dec2020. She informed that she had done everything she can and she was better but still not good. She planned to take the second dose of the COVID Vaccine because she thought it was more important to be protected. She suspected that the vaccine was related to the events sore right arm and could not breathe. The outcome of the event not to be able to breath was recovering; for sore right arm was recovered on unknown date in Dec2020; for she is better but still not good was unknown.; Sender's Comments: Severe allergic reaction including anaphylaxis is the known risk factor; a possible causal association between administration of BNT162B2 and the onset of not being able to breath 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. |
| DYSPNOEA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 916414-1 | approximately 30 minutes after receiving vaccination i began to develop tongue and lip swelling as well as difficulty swallowing and breathing , i then proceeded immediately to the nearest er |
| DYSPNOEA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Death | 915562-1 | pt received vaccine at covid clinic on 12/30 at approximately 3:30, pt vomited 4 minutes after receiving shot--dark brown vomit, staff reported pt had vomited night before. Per staff report pt became short of breath between 6 and 7 pm that night. Pt had DNR on file. pt passed away at approximately 10pm. Staff reported pt was 14 + days post covid |
| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Death | 921175-1 | Resident received Covid Vaccine, noted after 30 mins with labored breathing BP 161/77, HR 116, R 38, T 101.4, |
| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Death | 930466-1 | Fever, shortness of breath and chest pain that resulted in a heart attack a few hours after vaccination |
| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Death | 940954-1 | "Heart attack; This is a spontaneous report from a contactable consumer. An 82-year-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number: and Expiration Date: Unknown), via an unspecified route of administration in the left arm on 05Jan2021 at 13:00 at a single dose for COVID-19 immunization; administered in doctor's office/urgent care. The patient's medical history and concomitant medications were not reported. It was unknown if the patient received any other vaccines within four weeks prior to the COVID vaccine. Prior to the vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 05Jan2021, the patient experienced heart attack; which resulted in death and was assessed as medically significant. The patient also experienced the associated symptoms of cold sweats, chest pain, shortness of breath. Therapeutic measures were taken as a result of heart attack, which included ""life saving measures"" by the paramedics performed upon arrival with no success. The clinical outcome of the event, heart attack, was fatal. The patient died on 05Jan2021 due to heart attack; as ruled by the paramedics. It was unknown if an autopsy was performed. The batch/lot numbers for the vaccine, PFIZER-BIONTECH COVID-19 MRNA VACCINE, were not provided and will be requested during follow up.; Reported Cause(s) of Death: Heart attack" |
| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| DYSPNOEA | PFIZER\BIONTECH | 65+ years | Life Threatening | 928378-1 | Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services. |
| DYSPNOEA EXERTIONAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| EAR PAIN | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| ECHOCARDIOGRAM | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| ECHOCARDIOGRAM | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| ECHOCARDIOGRAM | MODERNA | 60-64 years | Life Threatening | 935090-1 | SOB, Sleeplessness, |
| ECHOCARDIOGRAM ABNORMAL | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| ECHOCARDIOGRAM ABNORMAL | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| ECHOCARDIOGRAM NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| ECHOCARDIOGRAM NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ECHOCARDIOGRAM NORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| EJECTION FRACTION DECREASED | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| EJECTION FRACTION DECREASED | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| EJECTION FRACTION DECREASED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| ELECTROCARDIOGRAM | MODERNA | 30-39 years | Life Threatening | 915199-1 | Itchy throat, red eyes after 30 minutes. EMS on site gave IV Benadryl, epi pen shot and took to ER for monitoring. Vitals were good so he was discharged. |
| ELECTROCARDIOGRAM | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| ELECTROCARDIOGRAM | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ELECTROCARDIOGRAM | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| ELECTROCARDIOGRAM | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |
| ELECTROCARDIOGRAM | MODERNA | 60-64 years | Life Threatening | 935090-1 | SOB, Sleeplessness, |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908003-1 | ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 60-64 years | Life Threatening | 916414-1 | approximately 30 minutes after receiving vaccination i began to develop tongue and lip swelling as well as difficulty swallowing and breathing , i then proceeded immediately to the nearest er |
| ELECTROCARDIOGRAM | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ELECTROCARDIOGRAM ABNORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| ELECTROCARDIOGRAM ABNORMAL | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| ELECTROCARDIOGRAM ABNORMAL | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| ELECTROCARDIOGRAM ABNORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ELECTROCARDIOGRAM ABNORMAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| ELECTROCARDIOGRAM ABNORMAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| ELECTROCARDIOGRAM AMBULATORY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| ELECTROCARDIOGRAM CHANGE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| ELECTROCARDIOGRAM NORMAL | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| ELECTROCARDIOGRAM NORMAL | MODERNA | 60-64 years | Life Threatening | 924078-1 | "Client received vaccine at approximately 3:50pm, waited in observational area x30min. Left with husband, stated that she got a few miles down the road and starting experiencing tightness in her chest and flushing. She took 50 mg of Benadryl, 30mg of prednisone and two puffs on her inhaler. She returned to the clinic, upon assessment from nursing she looked extremely flushed and anxious, she stated that she still felt tightness and that she had a history of anaphylaxis once before and had used an epi pen in the past. She had an epi pen with her and questioned whether or not she should give it to herself. BP was 190/68, pulse was normal, respirations normal, she continued to experience tightness and ""not able to catch my breath"", encouraged to use epi pen. She administered epi pen to right thigh at approximately 4:45PM, 911 called. Within a few minutes, she stated she was feeling better, less tightness in the chest, flushing was subsiding. BP at 190/70 at 4:52. EMS on scene at 5:03pm. Vitals normal , EKG normal. Client decided not to transport with EMS." |
| ELECTROCARDIOGRAM PR SHORTENED | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 937932-1 | 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. |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930889-1 | 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. |
| ELECTROCARDIOGRAM ST SEGMENT ELEVATION | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| ELECTROCARDIOGRAM T WAVE ABNORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| ELECTROCARDIOGRAM T WAVE INVERSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| ELECTROENCEPHALOGRAM ABNORMAL | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ENDOTRACHEAL INTUBATION | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at 7:20am. |
| ENDOTRACHEAL INTUBATION | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| ENDOTRACHEAL INTUBATION | MODERNA | 40-49 years | Life Threatening | 907022-1 | 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 |
| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 18-29 years | Death | 943397-1 | On day due for 2nd dose, Patient was found unresponsive at work in the hospital. Patient pupils were fixed and dilated. Full ACLS was initiated for 55 minutes with multiple rounds of bicarb, calcium chloride, magnesium, and epinephrine. Patient was intubated. Patient continued into V. Fib arrest and was shocked multiple times. |
| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ----------<br>----RN 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 -----<br>---------- RN<br>12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |
| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 65+ years | Life Threatening | 912574-1 | 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. |
| ENDOTRACHEAL INTUBATION | PFIZER\BIONTECH | 65+ years | Life Threatening | 912602-1 | Hospitalized 12/29, has now been tubed and put into the ICU |
| ENLARGED UVULA | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| ENLARGED UVULA | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| ENTEROVIRUS TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| EOSINOPHIL COUNT DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| EOSINOPHIL COUNT DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| EOSINOPHIL COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| EOSINOPHIL PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| EOSINOPHIL PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| EOSINOPHIL PERCENTAGE DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| EPISTAXIS | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| ERYTHEMA | MODERNA | 18-29 years | Life Threatening | 930079-1 | Swelling of throat and tongue, anaphylaxis, hives, redness, swelling |
| ERYTHEMA | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| ERYTHEMA | MODERNA | 65+ years | Death | 920326-1 | Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ERYTHEMA | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| ERYTHEMA | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| ERYTHEMA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| ERYTHEMA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| ERYTHEMA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| ERYTHEMA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916268-1 | Shortly after receiving the vaccine (within 10 minutes) the patient's tongue swelled, facial redness, gasping for air. This resident was marked for a 30 minute observation due to previous anaphylaxis type reaction. Immediately administered 0.3mg epinephrine x 1 dose. Then administered 50mg IM Diphenhydramine. This treatment course resolved the adverse reaction. Patient was monitored onsite at facility. Her husband came to pick her up and take her home. Tried to reach patient several hours after but was unable to at this time. |
| ERYTHEMA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |
| ERYTHEMA | PFIZER\BIONTECH | 65+ years | Life Threatening | 924658-1 | Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation. |
| EXPOSURE TO SARS-COV-2 | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| EXPOSURE TO SARS-COV-2 | MODERNA | 65+ years | Death | 917790-1 | At the time of vaccination, there was an outbreak of residents who had already tested positive for COVID 19 at the nursing home where patient was a resident. About a week later, patient tested positive for COVID 19. She had a number of chronic, underlying health conditions. The vaccine did not have enough time to prevent COVID 19. There is no evidence that the vaccination caused patient's death. It simply didn't have time to save her life. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| EXPOSURE TO SARS-COV-2 | PFIZER\BIONTECH | 65+ years | Death | 945241-1 | 71yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, VS taken at 10am, B/P 99/60, O2 sats, 95% (trach w/O2). At 11:30am, Patient showed no s/sx of distress, A&Ox3. At 11:50am, a nurse went to perform a COVID test and assessment (the facility is experiencing an outbreak), and found the patient unresponsive on the bathroom floor. CPR was immediately started; no shock advised per AED; 12:15pm EMS arrived and took over. At 12:38pm, EMT called time of death. |
| EYE SWELLING | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| EYE SWELLING | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| EYE SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912137-1 | 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 |
| EYE SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| EYE SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| FACIAL PARALYSIS | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |
| FACIAL PARESIS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| FACIAL PARESIS | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FALL | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |
| FALL | MODERNA | 65+ years | Death | 934050-1 | Staff reported that patient was found Friday morning (Jan 8) sitting at a table with his head tilted forward and unresponsive to verbal or physical stimuli. Staff lowered patient to floor and started CPR. EMS was called and continued CPR at scene, however they were not able to revive patient. Patient was pronounced dead at the scene. Staff written statements following the death of patient show that he had a fall about 1 hr. prior. It is unknown if this fall contributed to patient's death. An autopsy has been requested. |
| FALL | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| FATIGUE | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| FATIGUE | MODERNA | 65+ years | Death | 914621-1 | Resident in our long term care facility who received first dose of Moderna COVID-19 Vaccine on 12/22/2020, only documented side effect was mild fatigue after receiving. She passed away on 12/27/2020 of natural causes per report. Has previously been in & out of hospice care, resided in nursing home for 9+ years, elderly with dementia. Due to proximity of vaccination we felt we should report the death, even though it is not believed to be related. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FATIGUE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| FATIGUE | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| FATIGUE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| FATIGUE | PFIZER\BIONTECH | 65+ years | Death | 920545-1 | "The resident received is vaccine around 11:00 am and tolerated it without any difficulty or immediate adverse effects. He was at therapy from 12:36 pm until 1:22 pm when he stated he was too tired and could not do anymore. The therapist took him back to his room at that time and he got into bed himself but stated his legs felt heavy. At 1:50 pm the CNA answered his call light and found he had taken himself to the bathroom. She stated that when he went to get back into the bed it was ""abnormal"" how he was getting into it so she assisted him. At that time he quit breathing and she called a RN into the room immediately. He was found without a pulse, respirations, or blood pressure at 1:54 pm. He was a DNR." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FEAR | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| FEAR | PFIZER\BIONTECH | 50-59 years | Life Threatening | 941118-1 | At first I has some injection site pain and soreness nothing too bad. But around 01:30 I awoke with a really high fever. My fever was 102.8 when I first woke up. I was very nauseous and my fever felt worse. My thermometer would not read any more until my temp came down. I can only guess how high it got but at least 103 degrees. I took Advil Liquid Gells and then my fever broke. I was actually scare for my life. In March I actually caught coronavirus and developed anti bodies for Covid. I can only guess my body was fighting for it's life. |
| FEBRILE NEUTROPENIA | PFIZER\BIONTECH | Unknown | Death | 940950-1 | thrombopenia; pulmonary embolism; neutropenia fever; This is a spontaneous report from a Pfizer-sponsored program . A contactable consumer reported for a patient that received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA 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. The patient experienced thrombopenia, pulmonary embolism and neutropenia fever on an unspecified date. The clinical outcome of thrombopenia, pulmonary embolism and neutropenia fever was fatal. The patient died on an unspecified date. It was unknown if an autopsy was performed. The batch/lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up.; Reported Cause(s) of Death: thrombopenia; pulmonary embolism; neutropenia fever |
| FEEDING DISORDER | MODERNA | 65+ years | Death | 929997-1 | Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair. |
| FEELING ABNORMAL | MODERNA | 18-29 years | Life Threatening | 912930-1 | "Patient was monitored for >15 minutes after vaccination. Patient told a nurse that her knees felt weak. Patient then fainted and was laying on the floor when i arrived. Patient reported she felt like she was ""floating"" and she did not want to ""fall"". She was also nausea and wanted to vomit and did not end up vomiting anything up. Patient fainted several more times. Her BP was around 143/80 and unsure about the pulse. Patient then become unresponsive for 20-30 seconds." |
| FEELING ABNORMAL | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FEELING ABNORMAL | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| FEELING ABNORMAL | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| FEELING ABNORMAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |
| FEELING ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |
| FEELING COLD | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| FEELING HOT | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| FEELING HOT | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| FEELING HOT | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| FEELING HOT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FEELING HOT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| FEELING HOT | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| FEELING HOT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| FEELING HOT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| FEELING JITTERY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 905544-1 | Pt expressed feeling tachycardic, jittery, shaky, site edema, shortness of breath and dizziness. Pt received epipen 0.3 mg IM injection x1 dose and benadryl PO, responded favorably and transported to ED for follow up care. |
| FIBRIN D DIMER | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| FIBRIN D DIMER INCREASED | MODERNA | 50-59 years | Life Threatening | 941522-1 | I was short of breath and went to emergency room on 1/5/2021. I was diagnosed with bilateral pulmonary embolisms. I was Covid negative and had no other symptoms. |
| FIBRIN D DIMER INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FIBRIN D DIMER NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| FIBRIN D DIMER NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| FLUSHING | MODERNA | 30-39 years | Life Threatening | 938820-1 | Within 3 minutes of receiving vaccine felt flush and throat swelling, responded to Epi Pen and Benadryl p.o. EMS took him to ED where he remained several hours receiving 1 liter NS 125 mg solumedrol IV, discharge with 4 days of prednisone 40 mg daily and a prescription for an Epi Pen. As of 1.12 he is totally okay with no after effects. |
| FLUSHING | MODERNA | 40-49 years | Life Threatening | 914309-1 | Within 3 minutes of vaccination patient became fully flushed head and neck, with rapid heart rate (112), and feeling like her airways were tightening.. Nurse immediately called for response, administered Epipen, when response arrived applied oxygen and transported to ED. Solumedrol 125 mg, Bendadryl 25 mg, and Famotidine 20 mg, she responded well and was released home with Rx Prednisone 40 mg x 3 days. Only residual effect was a dry/sore throat. |
| FLUSHING | MODERNA | 60-64 years | Life Threatening | 924078-1 | "Client received vaccine at approximately 3:50pm, waited in observational area x30min. Left with husband, stated that she got a few miles down the road and starting experiencing tightness in her chest and flushing. She took 50 mg of Benadryl, 30mg of prednisone and two puffs on her inhaler. She returned to the clinic, upon assessment from nursing she looked extremely flushed and anxious, she stated that she still felt tightness and that she had a history of anaphylaxis once before and had used an epi pen in the past. She had an epi pen with her and questioned whether or not she should give it to herself. BP was 190/68, pulse was normal, respirations normal, she continued to experience tightness and ""not able to catch my breath"", encouraged to use epi pen. She administered epi pen to right thigh at approximately 4:45PM, 911 called. Within a few minutes, she stated she was feeling better, less tightness in the chest, flushing was subsiding. BP at 190/70 at 4:52. EMS on scene at 5:03pm. Vitals normal , EKG normal. Client decided not to transport with EMS." |
| FLUSHING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FLUSHING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| FLUSHING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| FLUSHING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913854-1 | anxiety, tachycardia, flushing, diaphoresis, HTN, SOB |
| FLUSHING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FLUSHING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| FLUSHING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| FLUSHING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FLUSHING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| FOAMING AT MOUTH | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |
| FULL BLOOD COUNT | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| FULL BLOOD COUNT | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| FULL BLOOD COUNT | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |
| FULL BLOOD COUNT | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| FULL BLOOD COUNT | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |

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| FULL BLOOD COUNT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 60-64 years | Life Threatening | 909577-1 | Dizziness, dyspnea, neck swelling |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| FULL BLOOD COUNT | PFIZER\BIONTECH | 65+ years | Death | 919108-1 | Fever, Malaise |
| FULL BLOOD COUNT NORMAL | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| FULL BLOOD COUNT NORMAL | PFIZER\BIONTECH | 18-29 years | Life Threatening | 904334-1 | Angioedema, hives, tachycardia, shortness of breath |
| FULL BLOOD COUNT NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| FULL BLOOD COUNT NORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 915813-1 | 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 adminsitered 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 |
| GLOMERULAR FILTRATION RATE | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |

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| GLOMERULAR FILTRATION RATE DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| GRAM STAIN POSITIVE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| GRANULOCYTE COUNT | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

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| GRANULOCYTE PERCENTAGE | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| GRIP STRENGTH DECREASED | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| GUILLAIN-BARRE SYNDROME | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |
| GUILLAIN-BARRE SYNDROME | PFIZER\BIONTECH | 30-39 years | Life Threatening | 930777-1 | Patient presented to the emergency department with sensory loss and loss of reflexes, evaluated by neurology and diagnosed with Guillain- Barre Syndrome thought to be secondary to the Pfizer Covid Vaccine |
| HAEMATEMESIS | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |
| HAEMATOCHEZIA | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |

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| HAEMATOCRIT DECREASED | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| HAEMATOCRIT DECREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| HAEMATOCRIT NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| HAEMATOCRIT NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| HAEMATOCRIT NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |

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| HAEMATOCRIT NORMAL | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| HAEMATOCRIT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| HAEMATURIA | PFIZER\BIONTECH | 65+ years | Death | 937773-1 | Patient was sent to the ED due to significant hematuria. He was afebrile. |
| HAEMOGLOBIN DECREASED | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |
| HAEMOGLOBIN INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| HAEMOGLOBIN NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| HAEMOGLOBIN NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

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| HAEMOGLOBIN NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| HAEMOGLOBIN NORMAL | MODERNA | 40-49 years | Life Threatening | 933935-1 | Sever thrombocytopenia (platelet count 2,000) 8 days following Moderna COVID vaccine. Clinically suspicious for ITP. |
| HAEMOGLOBIN NORMAL | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| HAEMOGLOBIN NORMAL | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| HAEMOGLOBIN NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| HAEMOPTYSIS | PFIZER\BIONTECH | 60-64 years | Death | 924464-1 | coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer |
| HAEMORRHAGE INTRACRANIAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| HEADACHE | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| HEADACHE | MODERNA | 18-29 years | Life Threatening | 919252-1 | 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 feeling of generalized sunburn. Later developed severe headache.. |
| HEADACHE | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HEADACHE | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| HEADACHE | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |
| HEADACHE | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| HEADACHE | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weaklness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| HEADACHE | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| HEADACHE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936618-1 | Soreness at injection site started at 1600 Body aches, headache, and low grade fever woke me up around 0100 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HEADACHE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| HEADACHE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| HEADACHE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |
| HEADACHE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HEADACHE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| HEADACHE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| HEADACHE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938829-1 | First Day after the injection I had a headache and nausea the entire day into the next day. The second day I still had the headache and the nausea. I work overnights. When I awoke in the afternoon, my throat was closing up. It was hard to swallow and I struggled to breath. I immediately drank liquid Benadryl and called my doctor in the morning. |
| HEADACHE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| HEADACHE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HEADACHE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| HEADACHE | PFIZER\BIONTECH | 65+ years | Death | 932346-1 | 1/7-21 - Received second dose of pfizer covid-19 vaccine 1/8/21 - Fever, dizziness, headache 1/10/21 0250 was found not breathing. EMS performed CPR and patient deceased |
| HEADACHE | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| HEADACHE | PFIZER\BIONTECH | 65+ years | Death | 944998-1 | On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired. |
| HEADACHE | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HEART RATE DECREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| HEART RATE INCREASED | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| HEART RATE INCREASED | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| HEART RATE INCREASED | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| HEART RATE INCREASED | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| HEART RATE INCREASED | MODERNA | 40-49 years | Life Threatening | 914309-1 | Within 3 minutes of vaccination patient became fully flushed head and neck, with rapid heart rate (112), and feeling like her airways were tightening.. Nurse immediately called for response, administered Epipen, when response arrived applied oxygen and transported to ED. Solumedrol 125 mg, Bendadryl 25 mg, and Famotidine 20 mg, she responded well and was released home with Rx Prednisone 40 mg x 3 days. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | Only residual effect was a dry/sore throat. |
| HEART RATE INCREASED | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |
| HEART RATE INCREASED | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| HEART RATE INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904553-1 | Within a few minutes of taking the vaccine, my lower lip began swelling. I was moved to the emergency department of Hospital and monitored and treated for four hours. Then I was released. At around 1:30 p.m. I felt my skin singling and started having difficulty breathing. Since I was no longer at my work (Hospital) I went to the closest hospital. This reaction was much worse. My husband drove. My heart rate increased. I was released at around 6:30 pm |
| HEART RATE INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914103-1 | 10 minutes after receiving vaccination, a significant increase in HR was noted, along with a tingling sensation through out body. Also, scratchy throat was noted. Alert by patient made to staff at vaccination site. Sweating noted and shortness of breath at that time. Epi pen given via L thigh IM. PIV started and benadryl and solumedrol given. Relief of symptoms noted very shortly after Epi administration. Taken to ER for 4 hour observation. Sent home after 4 hours and given prednisone to be taken at home, 50mg daily for 4 days. No further adverse symptoms noted. |
| HEART RATE INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HEART RATE INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| HEART RATE INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| HEART RATE INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909614-1 | Fever, muscle aches, hypertension, rapid heart heart |
| HEART RATE INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| HEART RATE INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913239-1 | Pt. began to feel weak with palpitations about 8-10 minutes after vaccination, her pulse was extremely fast, she then began to complain of lower mid-esophageal burning |
| HEART RATE INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| HEART RATE INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| HEART RATE INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| HEART SOUNDS ABNORMAL | MODERNA | 65+ years | Death | 927260-1 | 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. |
| HEMIANOPIA | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| HEMIPARESIS | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | 7:20am. |
| HEMIPARESIS | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| HEMIPLEGIA | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| HEPATITIS C ANTIBODY NEGATIVE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |
| HIP FRACTURE | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |
| HOSPICE CARE | MODERNA | 65+ years | Death | 920326-1 | Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21 |
| HOSPICE CARE | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| HOSPICE CARE | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |
| HOSPICE CARE | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| HOSPICE CARE | PFIZER\BIONTECH | 65+ years | Life Threatening | 928378-1 | Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HOT FLUSH | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| HOT FLUSH | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| HOT FLUSH | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| HUMAN CHORIONIC GONADOTROPIN NEGATIVE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| HUMAN METAPNEUMOVIRUS TEST | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| HUMAN RHINOVIRUS TEST | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| HYPERCOAGULATION | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| HYPERHIDROSIS | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPERHIDROSIS | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| HYPERHIDROSIS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914103-1 | 10 minutes after receiving vaccination, a significant increase in HR was noted, along with a tingling sensation through out body. Also, scratchy throat was noted. Alert by patient made to staff at vaccination site. Sweating noted and shortness of breath at that time. Epi pen given via L thigh IM. PIV started and benadryl and solumedrol given. Relief of symptoms noted very shortly after Epi administration. Taken to ER for 4 hour observation. Sent home after 4 hours and given prednisone to be taken at home, 50mg daily for 4 days. No further adverse symptoms noted. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907101-1 | 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 |
| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 911943-1 | Adverse reaction post Covid vaccine. Waited for 20 min post vaccine. Experienced S/S Heart palpitations, shortness of breath, tingling in extremities, diaphoretic after leaving clinic observation. Drove back to hospital, escorted by pre surgical testing hospital staff and taken by wheelchair to ED. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913854-1 | anxiety, tachycardia, flushing, diaphoresis, HTN, SOB |
| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47 years old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPERHIDROSIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |
| HYPERHIDROSIS | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| HYPERTENSION | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| HYPERTENSION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |
| HYPERTENSION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912785-1 | Monitored x 15 min per guidelines. Began to experience SOB and throat swelling, after which pt presented to the ED for tx, dx acute hypertensive urgency with severe hypertension. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPERTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| HYPERTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| HYPERTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909614-1 | Fever, muscle aches, hypertension, rapid heart heart |
| HYPERTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913854-1 | anxiety, tachycardia, flushing, diaphoresis, HTN, SOB |
| HYPERTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| HYPERTENSION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| HYPERTENSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| HYPERTENSIVE EMERGENCY | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| HYPERTENSIVE URGENCY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912785-1 | Monitored x 15 min per guidelines. Began to experience SOB and throat swelling, after which pt presented to the ED for tx, dx acute hypertensive urgency with severe hypertension. |
| HYPOAESTHESIA | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPOAESTHESIA | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| HYPOAESTHESIA | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| HYPOAESTHESIA | MODERNA | 30-39 years | Life Threatening | 924524-1 | PATIENT REPORTING ITCHING AT 30 MINUTES POST INJECTION. AT 1.5 HOURS POST INJECTION PATIENT REPORTED ITCHY THROAT AND NUMBESS 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 EPINEPHERINE, WAS RELEASED FROM HOSPITAL ROUGHLY 15-16 HOURS AFTER GOING TO ER. |
| HYPOAESTHESIA | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |
| HYPOAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| HYPOAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| HYPOAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908973-1 | 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. |
| HYPOAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPOAESTHESIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| HYPOAESTHESIA ORAL | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| HYPOAESTHESIA ORAL | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| HYPOAESTHESIA ORAL | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |
| HYPOAESTHESIA ORAL | PFIZER\BIONTECH | 18-29 years | Life Threatening | 915464-1 | 10 minutes after receiving vaccine, patient reported numbness across upper lip which progressed to her tongue. Felt tingling and dryness of tongue and swelling. No difficulty breathing or swallowing, no chest pain, no wheezing, no rash, no itching. Taken to ED and given methylprednisolone 125mg IV, diphenhydramine 50mg IV, famotidine 20mg PO. Patient improved and monitored x 4 hours with resolution of symptoms. Prescribed prednisone 50mg po x 4 days. |
| HYPOAESTHESIA ORAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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, |

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| HYPOAESTHESIA ORAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| HYPOAESTHESIA ORAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| HYPOAESTHESIA ORAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |

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| HYPOAESTHESIA ORAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| HYPOKALAEMIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| HYPOKINESIA | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| HYPOKINESIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| HYPOPHAGIA | MODERNA | 65+ years | Death | 910363-1 | Patient had mild hypotension, decreased oral intake, somnolence starting 3 days after vaccination and death 5 days after administration. He did have advanced dementia and was hospice eligible based on history of aspiration pneumonia. |

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| HYPOPNOEA | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| HYPORESPONSIVE TO STIMULI | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| HYPORESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 945578-1 | No reactions immediately after vaccine was given. Resident has dementia, has had multiple hospitalizations related to a renal stone recently. Had a tooth that was bothering her, went to see her dentist and it was extracted on 1/6/21. On 1/10 they noted feet and ankles are dark purple with white splotches appears to be mottling. Minimally responsive to voice and touch. Not eating. Compassionate visit with family. Family did not want hospice, did not feel it was needed, said, what more could they do for her than you're already doing? On 1/11 at 1950 was determined to be deceased. |
| HYPOTENSION | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |
| HYPOTENSION | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| HYPOTENSION | MODERNA | 65+ years | Death | 910363-1 | Patient had mild hypotension, decreased oral intake, somnolence starting 3 days after vaccination and death 5 days after administration. He did have advanced dementia and was hospice eligible based on history of aspiration pneumonia. |
| HYPOTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| HYPOTENSION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |
| HYPOTENSION | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| HYPOTENSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPOTENSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 924658-1 | Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation. |
| HYPOTONIA | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| HYPOTONIA | MODERNA | 65+ years | Death | 941607-1 | The patient passed away today, 1/13/2021. She was a hospice patient. She showed no adverse effects after receiving the vaccine on 1/12/2021. This morning she woke up as normal and during her morning shower she had a bowel movement, went limp and was non-responsive. The patient passed away at 7:45 am. |
| HYPOTONIA | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| HYPOTONIA | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| HYPOXIA | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| HYPOXIA | MODERNA | 50-59 years | Death | 946293-1 | 51 year old M with h/o O2 dependent COPD, Severe pulmonary fibrosis became increasingly hypoxic around 1800hours 1/7/2021. He was transported to hospital for acute on chronic hypoxia respiratory failure. On 1/12/2021 he decompensated further, and after discussing with family and palliative care, He was changed to comfort care. He expired on 1/12/2021@2325 at medical center. |
| HYPOXIA | PFIZER\BIONTECH | 6-17 years | Life Threatening | 921641-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| HYPOXIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| HYPOXIA | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |
| HYPOXIA | PFIZER\BIONTECH | 65+ years | Death | 926462-1 | Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021 |
| HYPOXIA | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| IMMATURE GRANULOCYTE COUNT INCREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| IMMATURE GRANULOCYTE COUNT INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| IMMATURE GRANULOCYTE PERCENTAGE INCREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| IMMEDIATE POST-INJECTION REACTION | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| IMMEDIATE POST-INJECTION REACTION | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| IMMEDIATE POST-INJECTION REACTION | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |
| IMMEDIATE POST-INJECTION REACTION | MODERNA | 50-59 years | Life Threatening | 938443-1 | immediate tingling of lips, followed by fullness of posterior oropharynx, hoarseness and pruritus |
| IMMEDIATE POST-INJECTION REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |

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| IMMEDIATE POST-INJECTION REACTION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| IMMEDIATE POST-INJECTION REACTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| IMMUNE THROMBOCYTOPENIA | MODERNA | 40-49 years | Life Threatening | 933935-1 | Sever thrombocytopenia (platelet count 2,000) 8 days following Moderna COVID vaccine. Clinically suspicious for ITP. |
| IMMUNE THROMBOCYTOPENIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930153-1 | ITP Plt 2 |
| IMMUNOGLOBULIN THERAPY | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| IMMUNOGLOBULIN THERAPY | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |
| IMMUNOGLOBULIN THERAPY | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| INFLUENZA A VIRUS TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| INFLUENZA B VIRUS TEST | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| INFLUENZA VIRUS TEST NEGATIVE | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| INFLUENZA VIRUS TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |

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| INJECTION SITE ERYTHEMA | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| INJECTION SITE HYPOAESTHESIA | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| INJECTION SITE OEDEMA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 905544-1 | Pt expressed feeling tachycardic, jittery, shaky, site edema, shortness of breath and dizziness. Pt received epipen 0.3 mg IM injection x1 dose and benadryl PO, responded favorably and transported to ED for follow up care. |
| INJECTION SITE PAIN | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |

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| INJECTION SITE PAIN | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| INJECTION SITE PAIN | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| INJECTION SITE PAIN | MODERNA | 65+ years | Death | 940602-1 | "Patient received vaccine on 1/8/2021. On 1/9/2021 I checked on patient via phone for symptoms or problems and he reported none but mild soreness at injection site. On 1/10/2021 family friend called me to tell me that patient had expired at about 8:00 pm. Patient reportedly complained of ""pain"" unspecific and collapsed at home. Hospital reportedly told family that it appeared to be a ""heart attack""." |
| INJECTION SITE PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| INJECTION SITE PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936618-1 | Soreness at injection site started at 1600 Body aches, headache, and low grade fever woke me up around 0100 |
| INJECTION SITE PAIN | PFIZER\BIONTECH | 50-59 years | Life Threatening | 941118-1 | At first I has some injection site pain and soreness nothing too bad. But around 01:30 I awoke with a really high fever. My fever was 102.8 when I first woke up. I was very nauseous and my fever felt worse. My thermometer would not read any more until my temp came down. I can only guess how high it got but at least 103 degrees. I took Advil Liquid Gells and then my fever broke. I was actually scare for my life. In March I actually caught coronavirus and developed anti bodies for Covid. I can only guess my body was fighting for it's life. |
| INJECTION SITE PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| INJECTION SITE PRURITUS | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |

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| INJECTION SITE PRURITUS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |
| INJECTION SITE SWELLING | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| INJECTION SITE WARMTH | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| INSOMNIA | MODERNA | 60-64 years | Life Threatening | 935090-1 | SOB, Sleeplessness, |
| INTENSIVE CARE | MODERNA | 18-29 years | Life Threatening | 913445-1 | 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. |
| INTENSIVE CARE | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| INTENSIVE CARE | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| INTENSIVE CARE | MODERNA | 60-64 years | Life Threatening | 934156-1 | 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. |
| INTENSIVE CARE | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| INTENSIVE CARE | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| INTENSIVE CARE | MODERNA | 65+ years | Life Threatening | 930611-1 | Developed hypercapnic respiratory failure, CHF exacerbation - readmitted to Hospital. In ICU with BIPAP |
| INTENSIVE CARE | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| INTENSIVE CARE | PFIZER\BIONTECH | 18-29 years | Life Threatening | 936715-1 | 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. |

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| INTENSIVE CARE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| INTENSIVE CARE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| INTENSIVE CARE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| INTENSIVE CARE | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |
| INTENSIVE CARE | PFIZER\BIONTECH | 50-59 years | Death | 944595-1 | 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 |
| INTENSIVE CARE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| INTENSIVE CARE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 912271-1 | 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 02 Sat of 60%, and was hospitalized in the ICU at another hospital (due to bed unavailability). |
| INTENSIVE CARE | PFIZER\BIONTECH | 60-64 years | Death | 932898-1 | The patient had an apparent cardiac arrest on 12/23/20 and was admitted to the ICU. He was taken off of life support on 12/30/20. He had known cardiac disease. |
| INTENSIVE CARE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| INTENSIVE CARE | PFIZER\BIONTECH | 65+ years | Life Threatening | 912574-1 | 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. |
| INTENSIVE CARE | PFIZER\BIONTECH | 65+ years | Life Threatening | 912602-1 | Hospitalized 12/29, has now been tubed and put into the ICU |
| INTENSIVE CARE | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| INTENSIVE CARE | PFIZER\BIONTECH | Unknown | Life Threatening | 911511-1 | anaphylaxis; This is a spontaneous report from a contactable physician reporting on behalf of patient. A patient of unspecified age and gender received single dose of BNT162B2 (batch/lot number and exp date not reported), via an unspecified route of administration on an unspecified date for immunisation. The patient's medical history and concomitant medications were not reported. On an unspecified date, the patient experienced anaphylaxis with a very protracted course requiring an epi dose for 4.5 days and was still in the ICU (date/s unspecified) following administration of the COVID vaccine. The physician would like to use a drop of leftover vaccine from one of the vials to do a future skin test after the patient is stable. They were unsure if they needed permission as this was standard practice in allergy to test afterwards but wanted to check in with the company. The outcome of event was unknown. Information about batch/lot number has been requested.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis 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. |
| INTERNATIONAL NORMALISED RATIO | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| INTERNATIONAL NORMALISED RATIO INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| INTERNATIONAL NORMALISED RATIO NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| INTERNATIONAL NORMALISED RATIO NORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| INTERNATIONAL NORMALISED RATIO NORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| INTESTINAL RESECTION | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| INTRACEREBRAL HAEMATOMA EVACUATION | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | surgical evacuation admitted in intensive care; |
| INTRACRANIAL ANEURYSM | MODERNA | 65+ years | Death | 924664-1 | At approximately, 1855, I was alerted by caregiver, resident was not responding. Per caregiver, she was doing her rounds and found resident in bed, unresponsive, mouth open, observed gurgling noises and tongue hanging out of mouth. This primary caregiver observed resident at baseline and ambulating after dinner at approximately, 1800 less than an hour prior to incident. This PCG called 911 for EMS and gave report of incident. Resident was taken to Medical Center Emergency Department. At ER, CT scan and X-ray was performed. Per report from ER RN, CT scan and x-ray revealed an intracranial aneurysm and fluid in the lungs. Per RN, resident was still unresponsive and was admitted to Medical Center for observation and comfort measures. This primary caregiver reported to RN, resident recently received the first dose of COVID-19 vaccine on 1/2/21. Primary caregiver received a call from Castle RN at 0700, resident expired at 0615. |
| INTRACRANIAL ANEURYSM | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| ISCHAEMIC STROKE | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| ISCHAEMIC STROKE | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| ISCHAEMIC STROKE | PFIZER\BIONTECH | 65+ years | Life Threatening | 932623-1 | Acute ischemic stroke, basilar occlusion |
| LABORATORY TEST | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| LABORATORY TEST | MODERNA | 60-64 years | Life Threatening | 934156-1 | 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. |
| LABORATORY TEST | MODERNA | 60-64 years | Life Threatening | 935090-1 | SOB, Sleeplessness, |
| LABORATORY TEST | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| LABORATORY TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909165-1 | At the time of the injection sharp pain across my back , then at about 5 mins after feelings of light headedness, progressing pain across my back, trouble feeling like I could get enough air in with breathing and dizziness and I tried to get to the floor to sit or lay down but passed out. Then the next event I recall was a sharp pain in my thigh(apparently administered Eli pen) . I regained consciousness and was gasping andI was told I had been given a shot of epi. |
| LABORATORY TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| LABORATORY TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 930777-1 | Patient presented to the emergency department with sensory loss and loss of reflexes, evaluated by neurology and diagnosed with Guillain- Barre Syndrome thought to be secondary to the Pfizer Covid Vaccine |
| LABORATORY TEST | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LABORATORY TEST | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |
| LABORATORY TEST | PFIZER\BIONTECH | 60-64 years | Life Threatening | 909577-1 | Dizziness, dyspnea, neck swelling |
| LABORATORY TEST | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| LABORATORY TEST | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| LAPAROSCOPIC SURGERY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |
| LARGE INTESTINE PERFORATION | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| LEFT VENTRICULAR END-DIASTOLIC PRESSURE INCREASED | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LETHARGY | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| LETHARGY | MODERNA | 65+ years | Death | 929997-1 | Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair. |
| LETHARGY | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| LETHARGY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| LETHARGY | PFIZER\BIONTECH | 65+ years | Death | 921481-1 | Vaccine given on 12/29/20 by Pharmacy. On 1/1/21, resident became lethargic and sluggish and developed a rash on forearms. He was a Hospice recipient and doctor and Hospice ordered no treatment, just to continue to monitor. When no improvement of codition reported, doctor and Hospice ordered comfort meds (Morphine, Ativan, Levsin). Resident expired on 1/4/2021 |
| LETHARGY | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LETHARGY | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| LEUKAEMIA | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| LIFE SUPPORT | PFIZER\BIONTECH | 50-59 years | Death | 944595-1 | 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 |
| LIMB DISCOMFORT | PFIZER\BIONTECH | 65+ years | Death | 920545-1 | "The resident received is vaccine around 11:00 am and tolerated it without any difficulty or immediate adverse effects. He was at therapy from 12:36 pm until 1:22 pm when he stated he was too tired and could not do anymore. The therapist took him back to his room at that time and he got into bed himself but stated his legs felt heavy. At 1:50 pm the CNA answered his call light and found he had taken himself to the bathroom. She stated that when he went to get back into the bed it was ""abnormal"" how he was getting into it so she assisted him. At that time he quit breathing and she called a RN into the room immediately. He was found without a pulse, respirations, or blood pressure at 1:54 pm. He was a DNR." |
| LIP SWELLING | MODERNA | 18-29 years | Life Threatening | 913445-1 | 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. |
| LIP SWELLING | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| LIP SWELLING | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| LIP SWELLING | MODERNA | 50-59 years | Life Threatening | 929418-1 | Swelling of lips & tongue, tightening of throat. Quivering of arms & legs. Tightening of chest. Dizzyness lightheaded. |
| LIP SWELLING | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LIP SWELLING | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| LIP SWELLING | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| LIP SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904553-1 | Within a few minutes of taking the vaccine, my lower lip began swelling. I was moved to the emergency department of Hospital and monitored and treated for four hours. Then I was released. At around 1:30 p.m. I felt my skin singling and started having difficulty breathing. Since I was no longer at my work (Hospital) I went to the closest hospital. This reaction was much worse. My husband drove. My heart rate increased. I was released at around 6:30 pm |
| LIP SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| LIP SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |
| LIP SWELLING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 906988-1 | PT WAS OBSRVED IN HOLDING AREA LEANING FORWARD IN HER CHAIR ABOUT 7 MINUTES AFTER RECIEVING THE VACINE. RN ASSESSED AND NOTED: AUDIBLE WHEEZE, RESP 40/MIN, LIP SWELLING AND PT COMPLAINED OF NAUSEA. PT WAS ESCORTED TO ER IN WHEELCHAIR ACCOMPANIED BY 2 RN'S (2 MINUTE WALK) ONE HOUR LATER - AS REPORTED BY DR (ER) WORKING DIAGNOSIS - ANAPHYLAXIS / STATUS ASTHMATICUS MEDS RECIEVED: SOLUMEDROL 125, DIPHENHYDRAMINE 50MG, FAMOTIDINE 20MG -- ALL IV EPINEPHERINE 0.3MG IM X1 FOLLOWED BY 0.3MG IV X 1 FOLLOWED BY 0.1MG IV X1 PT IS RECIEVING O2 - AND PROGRESSING TO BIPAP |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LIP SWELLING | PFIZER\BIONTECH | 60-64 years | Life Threatening | 916414-1 | approximately 30 minutes after receiving vaccination i began to develop tongue and lip swelling as well as difficulty swallowing and breathing , i then proceeded immediately to the nearest er |
| LIVEDO RETICULARIS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| LIVEDO RETICULARIS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| LIVEDO RETICULARIS | PFIZER\BIONTECH | 60-64 years | Death | 942085-1 | No adverse effects from vaccination seen on 1/2/21. On 1/6/21 resident was seen by Dr and her baclofen pump was refilled with 20 ml Baclofen 4,000mcg/ml. ITB Rate increased by 6% to 455.5 mcg/day simple continuous rate over 3 days. On 1/8/21 at 0615 resident was shaking, lower extremities mottled, Sa02 70%, pulse 45. Oxygen started at 2 L/m per NC. At 0715 her primary physician was notified as well as her daughter. Oxygen increased to 4 L/min, sats at 83%. SOA noted, reported all over pain. At 0850 when they attempted to reposition the resident, she was not responsive. Licensed nurse assessed her and no heartbeat heard or pulse found. |
| LIVEDO RETICULARIS | PFIZER\BIONTECH | 65+ years | Death | 945578-1 | No reactions immediately after vaccine was given. Resident has dementia, has had multiple hospitalizations related to a renal stone recently. Had a tooth that was bothering her, went to see her dentist and it was extracted on 1/6/21. On 1/10 they noted feet and ankles are dark purple with white splotches appears to be mottling. Minimally responsive to voice and touch. Not eating. Compassionate visit with family. Family did not want hospice, did not feel it was needed, said, what more could they do for her than you're already doing? On 1/11 at 1950 was determined to be deceased. |
| LIVER FUNCTION TEST | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| LIVER FUNCTION TEST | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| LIVER FUNCTION TEST NORMAL | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |

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| LOCALISED OEDEMA | MODERNA | 65+ years | Death | 920326-1 | Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21 |
| LOSS OF CONSCIOUSNESS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |
| LOSS OF CONSCIOUSNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909165-1 | At the time of the injection sharp pain across my back , then at about 5 mins after feelings of light headedness, progressing pain across my back, trouble feeling like I could get enough air in with breathing and dizziness and I tried to get to the floor to sit or lay down but passed out. Then the next event I recall was a sharp pain in my thigh(apparently administered Eli pen) . I regained consciousness and was gasping andI was told I had been given a shot of epi. |
| LOSS OF CONSCIOUSNESS | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| LOW DENSITY LIPOPROTEIN INCREASED | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| LUNG CONSOLIDATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| LUNG INFILTRATION | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LUNG INFILTRATION | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| LUNG INFILTRATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |

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| LUNG INFILTRATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| LUNG INFILTRATION | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| LUNG NEOPLASM MALIGNANT | PFIZER\BIONTECH | 60-64 years | Death | 924464-1 | coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer |
| LUNG OPACITY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| LYMPHADENOPATHY | MODERNA | 30-39 years | Life Threatening | 918839-1 | Gallbladder removed, septic, 11mm axillary lymph node. |
| LYMPHOCYTE COUNT DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| LYMPHOCYTE COUNT INCREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| LYMPHOCYTE COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| LYMPHOCYTE PERCENTAGE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| LYMPHOCYTE PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

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| LYMPHOCYTE PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MAGNETIC RESONANCE IMAGING | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |
| MAGNETIC RESONANCE IMAGING | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| MAGNETIC RESONANCE IMAGING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 930777-1 | Patient presented to the emergency department with sensory loss and loss of reflexes, evaluated by neurology and diagnosed with Guillain- Barre Syndrome thought to be secondary to the Pfizer Covid Vaccine |
| MAGNETIC RESONANCE IMAGING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| MAGNETIC RESONANCE IMAGING BRAIN | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| MAGNETIC RESONANCE IMAGING BRAIN ABNORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |
| MAGNETIC RESONANCE IMAGING BRAIN ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| MAGNETIC RESONANCE IMAGING BRAIN NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MAGNETIC RESONANCE IMAGING NECK | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| MALAISE | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| MALAISE | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| MALAISE | MODERNA | 65+ years | Death | 926600-1 | Patient did not report any signs or symptoms of adverse reaction to vaccine. Patient suffered from several comorbidities (diabetes and renal insufficiency). Patient reported not feeling well 01/06/2021 and passed away that day. |
| MALAISE | MODERNA | 65+ years | Death | 934263-1 | The resident resides in an independent living facility/apartment. The reporter at the center was informed by his daughter he was not feeling well on 1/1/2021 (specific symptoms could not be ascertained). He reportedly went to be COVID tested on 1/1/2020 and observed to be deceased in his apartment on 1/2/2020. I do not have confirmation of his COVID results, although the reporter indicates his daughter reports his test was positive. |
| MALAISE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MALAISE | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| MALAISE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| MALAISE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |
| MALAISE | PFIZER\BIONTECH | 65+ years | Death | 919108-1 | Fever, Malaise |
| MALAISE | PFIZER\BIONTECH | 65+ years | Death | 944998-1 | On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MATERNAL EXPOSURE DURING BREAST FEEDING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 931851-1 | I am currently breastfeeding my 5-month-old son. I received my first vaccine on 12/28/2020 and directly breastfed within 4 hours of receiving the vaccine. Two days after my vaccine my son was at daycare and had two large diarrhea blowouts and two large emeses followed by a 1-minute episode where he was limp with entire body cyanosis and in-and-out of consciousness. He also had a maculopapular rash on his torso. EMS was called. He was observed in the emergency department for a few hours then recovered well without intervention and did not require hospitalization. EKG was normal. He has continued to be well and back to baseline since the event. |
| MEAN CELL HAEMOGLOBIN CONCENTRATION DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| MEAN CELL HAEMOGLOBIN CONCENTRATION NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| MEAN CELL HAEMOGLOBIN CONCENTRATION NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MEAN CELL HAEMOGLOBIN CONCENTRATION NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MEAN CELL HAEMOGLOBIN NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MEAN CELL HAEMOGLOBIN NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MEAN CELL HAEMOGLOBIN NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MEAN CELL HAEMOGLOBIN NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| MEAN CELL VOLUME NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MEAN CELL VOLUME NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MEAN CELL VOLUME NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MEAN CELL VOLUME NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| MEAN PLATELET VOLUME INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MEAN PLATELET VOLUME NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MEAN PLATELET VOLUME NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MECHANICAL VENTILATION | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| MECHANICAL VENTILATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MECHANICAL VENTILATION | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |
| MEMORY IMPAIRMENT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| MENTAL IMPAIRMENT | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| METABOLIC FUNCTION TEST | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| METABOLIC FUNCTION TEST | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| METABOLIC FUNCTION TEST | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| METABOLIC FUNCTION TEST | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| METABOLIC FUNCTION TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| METABOLIC FUNCTION TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| METABOLIC FUNCTION TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| METABOLIC FUNCTION TEST | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| METABOLIC FUNCTION TEST | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| METABOLIC FUNCTION TEST | PFIZER\BIONTECH | 65+ years | Death | 945603-1 | Had no immediate issues with the vaccine. He had returned from the hospital on 12/21 and had some concerns about his weight which were shared with his physician on 1/4/21. On 1/5/21 had a visit with his cardiologist for a pacemaker check. On 1/8/21 staff were called to his room, he was on the floor, bluish skin color. No vital signs found, no heart rhythm heard at 2200. |
| METABOLIC FUNCTION TEST ABNORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| METABOLIC FUNCTION TEST NORMAL | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| METABOLIC FUNCTION TEST NORMAL | PFIZER\BIONTECH | 18-29 years | Life Threatening | 904334-1 | Angioedema, hives, tachycardia, shortness of breath |
| METABOLIC FUNCTION TEST NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| METABOLIC FUNCTION TEST NORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 915813-1 | 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 adminsitered 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 |
| METABOLIC FUNCTION TEST NORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MIGRAINE | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| MOBILITY DECREASED | MODERNA | 65+ years | Death | 929997-1 | Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair. |
| MOBILITY DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| MOBILITY DECREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 HCl, 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MONOCYTE COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MONOCYTE COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MONOCYTE COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| MONOCYTE PERCENTAGE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MONOCYTE PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MONOCYTE PERCENTAGE DECREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| MONOPARESIS | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| MOUTH HAEMORRHAGE | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| MOUTH SWELLING | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MOUTH SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 929526-1 | Anaphylactic reaction 6 days post vaccine 24Dec2020; I had severe chest tightness; SOB; throat soreness; hoarse voice; mouth swelling; This is a spontaneous report from a contactable physician, the patient. A 34-year-old non-pregnant female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL0140), via an unspecified route of administration in the left arm on 18Dec2020 at 15:30 (at the age of 34-years-old) as a single dose for COVID-19 immunization. Medical history included severe dust mite allergy (based on skin test). Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included cetirizine hydrochloride (MANUFACTURER UNKNOWN), hydrocodone bitartrate/paracetamol (NORCO), ibuprofen (MANUFACTURER UNKNOWN), and ondansetron (ZOFRAN); all for unspecified indications from unknown dates and unknown if ongoing. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 24Dec2020 at 10:00, 6 days post vaccination, the patient experienced anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling; all reported as life threatening. The events led to an emergency room visit and she was given epinephrine (EPI-PEN), methylprednisolone (SOLUMEDROL), and diphenhydramine hydrochloride (BENADRYL) as treatment. The patient stated that she developed the reactions 45 minutes after she took premedications for a dilatation and curettage procedure. The premedications included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron. She stated she had taken these medications several times before and this was the first time she had this reaction. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcomes of the anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling were recovered on unknown dates.; Sender's Comments: Anaphylactic reactions presented as chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling, developed 45 minutes after premedications including included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron for a dilatation and curettage procedure and 6 days post vaccination with BNT162B2, the event therefore is most likely attributed to these premedications 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. |
| MOUTH SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |

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| MUSCLE FATIGUE | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |
| MUSCLE RIGIDITY | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| MUSCLE SPASMS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |

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| MUSCLE TWITCHING | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| MUSCULAR WEAKNESS | MODERNA | 18-29 years | Life Threatening | 912930-1 | "Patient was monitored for >15 minutes after vaccination. Patient told a nurse that her knees felt weak. Patient then fainted and was laying on the floor when i arrived. Patient reported she felt like she was ""floating"" and she did not want to ""fall"". She was also nausea and wanted to vomit and did not end up vomiting anything up. Patient fainted several more times. Her BP was around 143/80 and unsure about the pulse. Patient then become unresponsive for 20-30 seconds." |
| MUSCULAR WEAKNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| MUSCULAR WEAKNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MUSCULOSKELETAL STIFFNESS | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| MYALGIA | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |
| MYALGIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| MYALGIA | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| MYALGIA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 937932-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MYALGIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| MYALGIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909614-1 | Fever, muscle aches, hypertension, rapid heart heart |
| MYALGIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| MYCOPLASMA TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| MYOCARDIAL INFARCTION | MODERNA | 65+ years | Death | 930487-1 | Medical docter state patient has a acute cardiac attack |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MYOCARDIAL INFARCTION | MODERNA | 65+ years | Death | 940602-1 | "Patient received vaccine on 1/8/2021. On 1/9/2021 I checked on patient via phone for symptoms or problems and he reported none but mild soreness at injection site. On 1/10/2021 family friend called me to tell me that patient had expired at about 8:00 pm. Patient reportedly complained of ""pain"" unspecific and collapsed at home. Hospital reportedly told family that it appeared to be a ""heart attack""." |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930889-1 | 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. |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 60-64 years | Death | 914917-1 | Death by massive heart attack. Pfizer-BioNTech COVID-19 Vaccine EUA |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 65+ years | Death | 930466-1 | Fever, shortness of breath and chest pain that resulted in a heart attack a few hours after vaccination |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 65+ years | Death | 937444-1 | Resident was found deceased at approximately 6pm in her apartment |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 65+ years | Death | 940954-1 | "Heart attack; This is a spontaneous report from a contactable consumer. An 82-year-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number: and Expiration Date: Unknown), via an unspecified route of administration in the left arm on 05Jan2021 at 13:00 at a single dose for COVID-19 immunization; administered in doctor's office/urgent care. The patient's medical history and concomitant medications were not reported. It was unknown if the patient received any other vaccines within four weeks prior to the COVID vaccine. Prior to the vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient had not been tested for COVID-19. On 05Jan2021, the patient experienced heart attack; which resulted in death and was assessed as medically significant. The patient also experienced the associated symptoms of cold sweats, chest pain, shortness of breath. Therapeutic measures were taken as a result of heart attack, which included ""life saving measures"" by the paramedics performed upon arrival with no success. The clinical outcome of the event, heart attack, was fatal. The patient died on 05Jan2021 due to heart attack; as ruled by the paramedics. It was unknown if an autopsy was performed. The batch/lot numbers for the vaccine, PFIZER-BIONTECH COVID-19 MRNA VACCINE, were not provided and will be requested during follow up.; Reported Cause(s) of Death: Heart attack" |
| MYOCARDIAL INFARCTION | PFIZER\BIONTECH | 65+ years | Life Threatening | 928378-1 | Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services. |
| MYOCARDIAL NECROSIS MARKER | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| MYOCARDIAL NECROSIS MARKER INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| MYOCARDITIS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 937932-1 | 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. |
| N-TERMINAL PROHORMONE BRAIN NATRIURETIC PEPTIDE INCREASED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| N-TERMINAL PROHORMONE BRAIN NATRIURETIC PEPTIDE NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| NAIL BED DISORDER | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| NAUSEA | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| NAUSEA | MODERNA | 18-29 years | Life Threatening | 912930-1 | "Patient was monitored for >15 minutes after vaccination. Patient told a nurse that her knees felt weak. Patient then fainted and was laying on the floor when i arrived. Patient reported she felt like she was ""floating"" and she did not want to ""fall"". She was also nausea and wanted to vomit and did not end up vomiting anything up. Patient fainted several more times. Her BP was around 143/80 and unsure about the pulse. Patient then become unresponsive for 20-30 seconds." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| NAUSEA | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| NAUSEA | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |
| NAUSEA | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| NAUSEA | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| NAUSEA | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| NAUSEA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| NAUSEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907101-1 | 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 |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| NAUSEA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938829-1 | First Day after the injection I had a headache and nausea the entire day into the next day. The second day I still had the headache and the nausea. I work overnights. When I awoke in the afternoon, my throat was closing up. It was hard to swallow and I struggled to breath. I immediately drank liquid Benadryl and called my doctor in the morning. |
| NAUSEA | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| NAUSEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 906988-1 | PT WAS OBSRVED IN HOLDING AREA LEANING FORWARD IN HER CHAIR ABOUT 7 MINUTES AFTER RECIEVING THE VACINE. RN ASSESSED AND NOTED: AUDIBLE WHEEZE, RESP 40/MIN, LIP SWELLING AND PT COMPLAINED OF NAUSEA. PT WAS ESCORTED TO ER IN WHEELCHAIR ACCOMPANIED BY 2 RN'S (2 MINUTE WALK) ONE HOUR LATER - AS REPORTED BY DR (ER) WORKING DIAGNOSIS - ANAPHYLAXIS / STATUS ASTHMATICUS MEDS RECIEVED: SOLUMEDROL 125, DIPHENHYDRAMINE 50MG, FAMOTIDINE 20MG -- ALL IV EPINEPHERINE 0.3MG IM X1 FOLLOWED BY 0.3MG IV X 1 FOLLOWED BY 0.1MG IV X1 PT IS RECIEVING O2 - AND PROGRESSING TO BIPAP |
| NAUSEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| NAUSEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| NAUSEA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 941118-1 | At first I has some injection site pain and soreness nothing too bad. But around 01:30 I awoke with a really high fever. My fever was 102.8 when I first woke up. I was very nauseous and my fever felt worse. My thermometer would not read any more until my temp came down. I can only guess how high it got but at least 103 degrees. I took Advil Liquid Gells and then my fever broke. I was actually scare for my life. In March I actually caught coronavirus and developed anti bodies for Covid. I can only guess my body was fighting for it's life. |
| NAUSEA | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| NAUSEA | PFIZER\BIONTECH | 65+ years | Death | 944998-1 | On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired. |
| NAUSEA | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |
| NECK PAIN | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| NEURALGIA | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |
| NEUROLOGICAL EXAMINATION | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| NEUTROPHIL COUNT INCREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| NEUTROPHIL COUNT INCREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| NEUTROPHIL COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| NEUTROPHIL PERCENTAGE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| NEUTROPHIL PERCENTAGE INCREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| NEUTROPHIL PERCENTAGE INCREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| NIH STROKE SCALE ABNORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 932145-1 | 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. |
| OBSTRUCTIVE AIRWAYS DISORDER | MODERNA | 30-39 years | Life Threatening | 924524-1 | PATIENT REPORTING ITCHING AT 30 MINUTES POST INJECTION. AT 1.5 HOURS POST INJECTION PATIENT REPORTED ITCHY THROAT AND NUMBESS 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 EPINEPHERINE, WAS RELEASED FROM HOSPITAL ROUGHLY 15-16 HOURS AFTER GOING TO ER. |
| OBSTRUCTIVE AIRWAYS DISORDER | MODERNA | 40-49 years | Life Threatening | 914309-1 | Within 3 minutes of vaccination patient became fully flushed head and neck, with rapid heart rate (112), and feeling like her airways were tightening.. Nurse immediately called for response, administered Epipen, when response arrived applied oxygen and transported to ED. Solumedrol 125 mg, Bendadryl 25 mg, and Famotidine 20 mg, she responded well and was released home with Rx Prednisone 40 mg x 3 days. Only residual effect was a dry/sore throat. |
| OBSTRUCTIVE AIRWAYS DISORDER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| OCULAR DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| OCULAR HYPERAEMIA | MODERNA | 30-39 years | Life Threatening | 915199-1 | Itchy throat, red eyes after 30 minutes. EMS on site gave IV Benadryl, epi pen shot and took to ER for monitoring. Vitals were good so he was discharged. |
| OEDEMA | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| OESOPHAGEAL PAIN | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913239-1 | Pt. began to feel weak with palpitations about 8-10 minutes after vaccination, her pulse was extremely fast, she then began to complain of lower mid-esophageal burning |
| OPISTHOTONUS | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| ORAL PRURITUS | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| ORAL PRURITUS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |
| OROPHARYNGEAL DISCOMFORT | MODERNA | 50-59 years | Life Threatening | 938443-1 | immediate tingling of lips, followed by fullness of posterior oropharynx, hoarseness and pruritus |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| OROPHARYNGEAL DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903324-1 | 40 min after injection my throat and tongue started to feel weird and tight, pharmacy at my work hospital gave me 25 mg Benadryl and 650mg Tylenol. At about 1 hr 45 min after injection my throat got to the point of so swollen and itchy I couldn?t swallow. I went to nearest emergency room hospital they administered decadron orally, Pepcid P.O., and Toradol via IM. |
| OROPHARYNGEAL DISCOMFORT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |
| OROPHARYNGEAL PAIN | MODERNA | 40-49 years | Life Threatening | 914309-1 | Within 3 minutes of vaccination patient became fully flushed head and neck, with rapid heart rate (112), and feeling like her airways were tightening.. Nurse immediately called for response, administered Epipen, when response arrived applied oxygen and transported to ED. Solumedrol 125 mg, Bendadryl 25 mg, and Famotidine 20 mg, she responded well and was released home with Rx Prednisone 40 mg x 3 days. Only residual effect was a dry/sore throat. |
| OROPHARYNGEAL PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 929526-1 | Anaphylactic reaction 6 days post vaccine 24Dec2020; I had severe chest tightness; SOB; throat soreness; hoarse voice; mouth swelling; This is a spontaneous report from a contactable physician, the patient. A 34-year-old non-pregnant female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL0140), via an unspecified route of administration in the left arm on 18Dec2020 at 15:30 (at the age of 34-years-old) as a single dose for COVID-19 immunization. Medical history included severe dust mite allergy (based on skin test). Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included cetirizine hydrochloride (MANUFACTURER UNKNOWN), hydrocodone bitartrate/paracetamol (NORCO), ibuprofen (MANUFACTURER UNKNOWN), and ondansetron (ZOFRAN); all for unspecified indications from unknown dates and unknown if ongoing. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 24Dec2020 at 10:00, 6 days post vaccination, the patient experienced anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling; all reported as life threatening. The events led to an emergency room visit and she was given epinephrine (EPI-PEN), methylprednisolone (SOLUMEDROL), and diphenhydramine hydrochloride (BENADRYL) as treatment. The patient stated that she developed the reactions 45 minutes after she took premedications for a dilatation and curettage procedure. The premedications included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron. She stated she had taken these medications several times before and this was the first time she had this reaction. Since the vaccination, the patient had not been tested for COVID-19. The clinical outcomes of the anaphylactic reaction, severe chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling were recovered on unknown dates.; Sender's Comments: Anaphylactic reactions presented as chest tightness, shortness of breath, throat soreness, hoarse voice, and mouth swelling, developed 45 minutes after premedications including included ibuprofen, hydrocodone bitartrate/paracetamol, ondansetron for a dilatation and curettage procedure and 6 days post vaccination with BNT162B2, the event therefore is most likely attributed to these premedications 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| OROPHARYNGEAL PAIN | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| OROPHARYNGEAL PAIN | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| OXYGEN SATURATION DECREASED | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| OXYGEN SATURATION DECREASED | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| OXYGEN SATURATION DECREASED | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |
| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |
| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 65+ years | Death | 929359-1 | 3:07 pm lung sounds diminished oxygen sats 68%, oxygen applied Oxygen sats remained low for next 36 hours ( patient on Hospice care ) expired 6:22 am 1-8-21 |
| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 65+ years | Death | 939845-1 | Three hours after receiving COVID 19 vaccination, Patient oxygen level decreased to a critical level and went into cardiac arrest. Staff performed full code but was unable to bring back patient from cardiac arrest. |
| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 924658-1 | Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| OXYGEN SATURATION DECREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| PAIN | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| PAIN | MODERNA | 60-64 years | Life Threatening | 934156-1 | 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. |
| PAIN | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |
| PAIN | MODERNA | 65+ years | Death | 940602-1 | "Patient received vaccine on 1/8/2021. On 1/9/2021 I checked on patient via phone for symptoms or problems and he reported none but mild soreness at injection site. On 1/10/2021 family friend called me to tell me that patient had expired at about 8:00 pm. Patient reportedly complained of ""pain"" unspecific and collapsed at home. Hospital reportedly told family that it appeared to be a ""heart attack""." |
| PAIN | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| PAIN | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936618-1 | Soreness at injection site started at 1600 Body aches, headache, and low grade fever woke me up around 0100 |
| PAIN | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PAIN | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| PAIN | PFIZER\BIONTECH | 50-59 years | Death | 942106-1 | 54 y/o M with PMH of HTN, HLD, Alcoholic Cirrhosis, Aortic Valve Stenosis, and angina BIBA as a Medical Alert for cardiac arrest noted PTA. Per EMS, the patient called because he was having constant, diffuse abdominal pain x 1 day that radiated to his chest. On scene, the patient had a witnessed arrest with EMS starting CPR. He was given 3 rounds of epi without ROSC. Pt had no associated shockable rhythm. Of note, pt's wife, had noted pt had received covid vaccine the prior day. |
| PAIN | PFIZER\BIONTECH | 60-64 years | Death | 942085-1 | No adverse effects from vaccination seen on 1/2/21. On 1/6/21 resident was seen by Dr and her baclofen pump was refilled with 20 ml Baclofen 4,000mcg/ml. ITB Rate increased by 6% to 455.5 mcg/day simple continuous rate over 3 days. On 1/8/21 at 0615 resident was shaking, lower extremities mottled, Sa02 70%, pulse 45. Oxygen started at 2 L/m per NC. At 0715 her primary physician was notified as well as her daughter. Oxygen increased to 4 L/min, sats at 83%. SOA noted, reported all over pain. At 0850 when they attempted to reposition the resident, she was not responsive. Licensed nurse assessed her and no heartbeat heard or pulse found. |
| PAIN | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| PAIN IN EXTREMITY | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PAIN IN EXTREMITY | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| PAIN IN EXTREMITY | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| PAIN IN EXTREMITY | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| PAIN IN EXTREMITY | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |
| PAIN IN EXTREMITY | MODERNA | 65+ years | Death | 933846-1 | "1-2-2021 10:30 PM Complained Right arm/back hurt - took Tylenol 1-3-2021 Complained Right arm hurt, dizzy 1-4-2021 Felt better - did laundry, daughter found her deceased at 3:30 pm. Dr. at hospital said it was ""cardiac event"" according to death certificate." |
| PAIN IN EXTREMITY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909165-1 | At the time of the injection sharp pain across my back , then at about 5 mins after feelings of light headedness, progressing pain across my back, trouble feeling like I could get enough air in with breathing and dizziness and I tried to get to the floor to sit or lay down but passed out. Then the next event I recall was a sharp pain in my thigh(apparently administered Eli pen) . I regained consciousness and was gasping andI was told I had been given a shot of epi. |
| PAIN IN EXTREMITY | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PAIN IN EXTREMITY | PFIZER\BIONTECH | 60-64 years | Life Threatening | 911462-1 | she is better but still not good; not to be able to breath; sore right arm; This is a spontaneous report from a contactable nurse (patient herself). A 62-year-old female patient received bnt162b2 (BNT162B2, lot EK5730), intramuscular on 18Dec2020 at single dose for immunisation. Medical history included asthma (hospitalized on Jan2020 and has not had any issues since that time, referring to her asthma) diabetes, high blood pressure, swelling, sciatica, blood cholesterol abnormal, rosacea, reflux, allergies, sinus congestion, shingles and post carpal tunnel surgery. Concomitant medications included lisinopril, hydrochlorothiazide, gabapentin, rosuvastatin, metformin, glipizide, doxycycline, sucralfate, cetirizine hydrochloride (ZYRTEC), pseudoephedrine, ascorbic acid, ergocalciferol, nicotinamide, retinol, riboflavin, thiamine hydrochloride (VITAMINS) and tramadol. The patient reported that she not to be able to breath (seriousness criteria-life threatening) on 22Dec2020. She woke up this morning and could not breathe and there was no reason for her to not be able to breath. She thought she may have had a reaction to the COVID vaccine. It was the only thing she could think of that might have caused her not to be able to breathe this morning. As treatment for not to be able to breath, she used Budesonide and Levosalbutamol in her nebulizer. She had sore right arm on 18Dec2020. She informed that she had done everything she can and she was better but still not good. She planned to take the second dose of the COVID Vaccine because she thought it was more important to be protected. She suspected that the vaccine was related to the events sore right arm and could not breathe. The outcome of the event not to be able to breath was recovering; for sore right arm was recovered on unknown date in Dec2020; for she is better but still not good was unknown.; Sender's Comments: Severe allergic reaction including anaphylaxis is the known risk factor; a possible causal association between administration of BNT162B2 and the onset of not being able to breath 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. |
| PAIN IN EXTREMITY | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| PALLOR | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |
| PALLOR | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PALLOR | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| PALLOR | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PALPITATIONS | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| PALPITATIONS | MODERNA | 18-29 years | Life Threatening | 919252-1 | 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 feeling of generalized sunburn. Later developed severe headache.. |
| PALPITATIONS | MODERNA | 30-39 years | Life Threatening | 922264-1 | Immediate warm rush to my head and body. Heart was beating out of my chest and difficultly breathing. Heart rate spiked to 150 (normal around 55). Hand, legs, and mouth started to go numb. Eventually settled down after about 1 hr. Have not felt normal since which has been 3 days. |
| PALPITATIONS | MODERNA | 40-49 years | Life Threatening | 938425-1 | 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. |
| PALPITATIONS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 936715-1 | 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. |
| PALPITATIONS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| PALPITATIONS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ----RN 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 ----- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | home a couple hours later. |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907101-1 | 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 |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908973-1 | 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. |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 911943-1 | Adverse reaction post Covid vaccine. Waited for 20 min post vaccine. Experienced S/S Heart palpitations, shortness of breath, tingling in extremities, diaphoretic after leaving clinic observation. Drove back to hospital, escorted by pre surgical testing hospital staff and taken by wheelchair to ED. |
| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913239-1 | Pt. began to feel weak with palpitations about 8-10 minutes after vaccination, her pulse was extremely fast, she then began to complain of lower mid-esophageal burning |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PALPITATIONS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| PANCYTOPENIA | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| PARAESTHESIA | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| PARAESTHESIA | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| PARAESTHESIA | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| PARAESTHESIA | MODERNA | 30-39 years | Life Threatening | 926703-1 | 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. |
| PARAESTHESIA | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PARAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| PARAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| PARAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904553-1 | Within a few minutes of taking the vaccine, my lower lip began swelling. I was moved to the emergency department of Hospital and monitored and treated for four hours. Then I was released. At around 1:30 p.m. I felt my skin singling and started having difficulty breathing. Since I was no longer at my work (Hospital) I went to the closest hospital. This reaction was much worse. My husband drove. My heart rate increased. I was released at around 6:30 pm |
| PARAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |
| PARAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914103-1 | 10 minutes after receiving vaccination, a significant increase in HR was noted, along with a tingling sensation through out body. Also, scratchy throat was noted. Alert by patient made to staff at vaccination site. Sweating noted and shortness of breath at that time. Epi pen given via L thigh IM. PIV started and benadryl and solumedrol given. Relief of symptoms noted very shortly after Epi administration. Taken to ER for 4 hour observation. Sent home after 4 hours and given prednisone to be taken at home, 50mg daily for 4 days. No further adverse symptoms noted. |
| PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908973-1 | 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. |
| PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909146-1 | listed before |
| PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 911943-1 | Adverse reaction post Covid vaccine. Waited for 20 min post vaccine. Experienced S/S Heart palpitations, shortness of breath, tingling in extremities, diaphoretic after leaving clinic observation. Drove back to hospital, escorted by pre surgical testing hospital staff and taken by wheelchair to ED. |
| PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| PARAESTHESIA ORAL | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PARAESTHESIA ORAL | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| PARAESTHESIA ORAL | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| PARAESTHESIA ORAL | MODERNA | 40-49 years | Life Threatening | 922279-1 | Patient presented to receive COVID-19 vaccine, received vaccine at approximately 10 am. Patient waited 15 minutes for observation and left observation area without complaining of any sx. Patient returned a few minutes after reporting tongue tingling which eventually got to her lips. . No difficulty breathing or any other sx. No history of allergies. NP/RN administered PO Benadryl 25 mg. As of report of this iReport no additional symptoms or intervention needed. Last vitals: 131/83 75spo2. BP higher than usual per patient, sp02 normal. |
| PARAESTHESIA ORAL | MODERNA | 40-49 years | Life Threatening | 932614-1 | Throat closing Pruritic throat and tongue Tingling lips and tongue Throat clearing Hoarse voice |
| PARAESTHESIA ORAL | MODERNA | 50-59 years | Life Threatening | 938443-1 | immediate tingling of lips, followed by fullness of posterior oropharynx, hoarseness and pruritus |
| PARAESTHESIA ORAL | PFIZER\BIONTECH | 18-29 years | Life Threatening | 915464-1 | 10 minutes after receiving vaccine, patient reported numbness across upper lip which progressed to her tongue. Felt tingling and dryness of tongue and swelling. No difficulty breathing or swallowing, no chest pain, no wheezing, no rash, no itching. Taken to ED and given methylprednisolone 125mg IV, diphenhydramine 50mg IV, famotidine 20mg PO. Patient improved and monitored x 4 hours with resolution of symptoms. Prescribed prednisone 50mg po x 4 days. |
| PARAESTHESIA ORAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ---------- ----------RN |
| PARAESTHESIA ORAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936026-1 | Trouble swallowing, tingling around the mouth within 5 minutes of vaccine administration. IV started with 25mg Benadryl within 5 minutes of symptom onset. Transfer to ER at 1430. Symptoms unresolved, hr - 120, bp 140/100, O2 sats 100, resp: 21 Additional 25mg Benadryl, 125mg solumedrol, 1ml Ativan given IV at 1435. Symptoms began to resolve, patient discharged at 1600 to home with instructions to return if needed. Patient returned to ER Sunday January 10 at 1300 complaining of throat tightness. Patient was seen by doctor, no acute distress and airway issues seen. Patient elected to stay for 50mg benadryl and 40mg prednisone PO. Patient was discharged to home with script for 40mg prednisone q day for 3 days. Patient feels any remaining allergic symptoms have resolved. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PARAESTHESIA ORAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| PARAESTHESIA ORAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| PARAESTHESIA ORAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| PARAESTHESIA ORAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PARAESTHESIA ORAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 915813-1 | 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 adminsitered 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 |
| PCO2 DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| PERCUTANEOUS CORONARY INTERVENTION | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| PERICARDITIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |
| PERIPHERAL COLDNESS | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| PERIPHERAL SWELLING | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| PERIPHERAL SWELLING | PFIZER\BIONTECH | 18-29 years | Life Threatening | 902946-1 | Swelling of hands follwed by angioedema |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PERIPHERAL SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| PETECHIAE | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| PHARYNGEAL HYPOAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| PHARYNGEAL OEDEMA | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| PHARYNGEAL PARAESTHESIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909278-1 | Rapid onset of hoarseness, throat tingling and tightness |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PHARYNGEAL PARAESTHESIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| PHARYNGEAL PARAESTHESIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| PHARYNGEAL SWELLING | MODERNA | 18-29 years | Life Threatening | 908685-1 | throat swelling, SVT |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PHARYNGEAL SWELLING | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| PHARYNGEAL SWELLING | MODERNA | 18-29 years | Life Threatening | 930079-1 | Swelling of throat and tongue, anaphylaxis, hives, redness, swelling |
| PHARYNGEAL SWELLING | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| PHARYNGEAL SWELLING | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| PHARYNGEAL SWELLING | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |
| PHARYNGEAL SWELLING | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PHARYNGEAL SWELLING | MODERNA | 30-39 years | Life Threatening | 938820-1 | Within 3 minutes of receiving vaccine felt flush and throat swelling, responded to Epi Pen and Benadryl p.o. EMS took him to ED where he remained several hours receiving 1 liter NS 125 mg solumedrol IV, discharge with 4 days of prednisone 40 mg daily and a prescription for an Epi Pen. As of 1.12 he is totally okay with no after effects. |
| PHARYNGEAL SWELLING | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| PHARYNGEAL SWELLING | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903324-1 | 40 min after injection my throat and tongue started to feel weird and tight, pharmacy at my work hospital gave me 25 mg Benadryl and 650mg Tylenol. At about 1 hr 45 min after injection my throat got to the point of so swollen and itchy I couldn?t swallow. I went to nearest emergency room hospital they administered decadron orally, Pepcid P.O., and Toradol via IM. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912785-1 | Monitored x 15 min per guidelines. Began to experience SOB and throat swelling, after which pt presented to the ED for tx, dx acute hypertensive urgency with severe hypertension. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 911943-1 | Adverse reaction post Covid vaccine. Waited for 20 min post vaccine. Experienced S/S Heart palpitations, shortness of breath, tingling in extremities, diaphoretic after leaving clinic observation. Drove back to hospital, escorted by pre surgical testing hospital staff and taken by wheelchair to ED. |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913061-1 | 10 MINUTES FOLLOWING VACCINE - SOB, COUGH, TIGHTNESS IN CHEST, THRAOT SWELLING, DIFFICULTY SWALLOWING, LIGHT HEADEDNESS, AND ELEVATED HEART RATE. ORAL AND IM BENADRYL ADMINISTERED, 2 DOSE OF EPINEPHRINE, 2 NEB TREATMENTS, O2 PLACED. 911 CALLED AND TRANSPORTED TO EMERGENCY FOR FURTHER TREATMENT AND MONITORING. AT HOSPITAL IV STEROID ADMINISTERED. SYMPTOMS SUBSIDED WITH SECOND DOSE OF EPINEPHRINE, HOWEVER RETURNED 3 HOURS LATER AND ANOTHER DOSE OF BENADRYL ADMINISTERED. ELEVATED HEART RATE CONTINUED AND IV FLUIDS ADMINISTERED TO ATTEMPT IN BRINGING DOWN HEART RATE. IV FLUIDS WERE NOT EFFECTIVE. HEART RATE (118-120) REMAINED ELEVATED INTO THE OVERNIGHT HOURS AND SUBSIDED AROUND 1:30A ON 12/29/2020. CONTINUED HEADACHE, NAUSEA ONSET, FATIGUE, DIFFICULTY SWALLOWING AND COUGH ON 12/29/2020. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| PHARYNGEAL SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| PLATELET COUNT DECREASED | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| PLATELET COUNT DECREASED | MODERNA | 40-49 years | Life Threatening | 933935-1 | Sever thrombocytopenia (platelet count 2,000) 8 days following Moderna COVID vaccine. Clinically suspicious for ITP. |
| PLATELET COUNT DECREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930153-1 | ITP Plt 2 |
| PLATELET COUNT DECREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| PLATELET COUNT DECREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PLATELET COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| PLATELET COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| PLATELET COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| PLATELET COUNT NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| PLATELET COUNT NORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PLATELET TRANSFUSION | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| PNEUMONIA | PFIZER\BIONTECH | 65+ years | Death | 946097-1 | died 3 days after receiving the vaccine/Death cause: Pneumonia per doctor; This is a spontaneous report from a contactable consumer. An 85-year-old non-pregnant female patient (reporter's mother) received the first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 07Jan2021 at single dose for covid-19 immunization. Medical history included dementia from an unknown date. The patient's concomitant medications were not reported. The patient died 3 days after receiving the vaccine on 10Jan2021 11:00, death cause was pneumonia per doctor. The event was reported as serious as resulted in death. It was unknown if the patient received treatment for the event. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient was not diagnosed with COVID-19 prior to vaccination, and it was unknow if the patient has been tested for COVID-19 since the vaccination. The patient died on 10Jan2021. It was not reported if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: Pneumonia |
| PNEUMONIA | PFIZER\BIONTECH | Unknown | Death | 934966-1 | COVID-19; COVID-19; Pneumonia; respiratory failure; This is a spontaneous report from a contactable consumer. An 80-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Jan2021 for COVID-19 immunization. Medical history included Alzheimer's and others. No known allergies. Concomitant medications included unspecified medications. The reporter's mother in law was tested for COVID-19 at a nursing facility on 25Dec2020 and she was negative. On 02Jan2021, she received the first dose of Pfizer vaccine. On 04Jan2020, she developed a high fever, needed oxygen and was positive for COVID-19. Date of death was 04Jan2021. The cause of her death was listed as pneumonia, respiratory failure and COVID-19. No autopsy performed. No treatment received. No one knew if the vaccination contributed to her death. It was hard to know if her death was due to the administration of the vaccine or it exacerbated the COVID19 symptoms which led to her death. Since this was unknown, it could have been a possibility. The reporter wanted to give us this information because we might want to consider having high risk population, patients with underlying conditions, older population tested for COVID-19 prior to the vaccination, as this is not currently a recommendation or a requirement. All is very new and they are all learning so the reporter wanted to share this information with us. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. There are medications the patient received within 2 weeks of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has been tested for COVID-19. The outcome of the events was fatal. Information about Lot/Batch has been requested.; Sender's Comments: The association between the fatal event lack of effect (pneumonia, respiratory failure and COVID-19) with BNT162b2 can not be fully 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.; Reported Cause(s) of Death: Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PO2 DECREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| POLYMERASE CHAIN REACTION | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| POOR QUALITY SLEEP | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| POSTURE ABNORMAL | MODERNA | 65+ years | Death | 934050-1 | Staff reported that patient was found Friday morning (Jan 8) sitting at a table with his head tilted forward and unresponsive to verbal or physical stimuli. Staff lowered patient to floor and started CPR. EMS was called and continued CPR at scene, however they were not able to revive patient. Patient was pronounced dead at the scene. Staff written statements following the death of patient show that he had a fall about 1 hr. prior. It is unknown if this fall contributed to patient's death. An autopsy has been requested. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| POSTURING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| PREGNANCY TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| PRESYNCOPE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909635-1 | 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. |
| PRESYNCOPE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| PRESYNCOPE | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| PROCALCITONIN INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PROCALCITONIN INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| PROCALCITONIN NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| PRODUCTIVE COUGH | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| PROTEIN TOTAL NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| PROTEIN TOTAL NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| PROTEIN TOTAL NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| PROTHROMBIN TIME | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PROTHROMBIN TIME NORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 908869-1 | 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. |
| PROTHROMBIN TIME PROLONGED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| PRURITUS | MODERNA | 18-29 years | Life Threatening | 913445-1 | 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. |
| PRURITUS | MODERNA | 30-39 years | Life Threatening | 924524-1 | PATIENT REPORTING ITCHING AT 30 MINUTES POST INJECTION. AT 1.5 HOURS POST INJECTION PATIENT REPORTED ITCHY THROAT AND NUMBESS 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 EPINEPHERINE, WAS RELEASED FROM HOSPITAL ROUGHLY 15-16 HOURS AFTER GOING TO ER. |
| PRURITUS | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| PRURITUS | MODERNA | 50-59 years | Life Threatening | 938443-1 | immediate tingling of lips, followed by fullness of posterior oropharynx, hoarseness and pruritus |
| PRURITUS | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PRURITUS | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| PRURITUS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| PRURITUS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| PRURITUS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PRURITUS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| PRURITUS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |
| PRURITUS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| PRURITUS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 912826-1 | Itching, cough. Given benadryl 50mg and epinephrine 0.3 in vaccine clinic, and taken to ED for further tx. |
| PRURITUS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919629-1 | 20 minutes after receiving the vaccination the resident started to not feel well. She said she felt very far away and just kept repeating I don't feel well. She was diaphoretic and her chest was very red and she kept scratching and rubbing it at it. I asked if she wanted IM Benadryl or epipen and she at first denied. She also said she felt like she needed to focus on her breathing. At this time we decided it was best to administer Epipen x 1 dose. Immediately after she felt better. She was observed for another 30 minutes and then went home. at 7:17pm I called and spoke with her. She said her arm was sore and that her oxygen levels were about 88-89% which is low for her but she said she felt fine and is currently working right now. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PRURITUS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| PULMONARY CONGESTION | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| PULMONARY EMBOLISM | MODERNA | 50-59 years | Life Threatening | 941522-1 | I was short of breath and went to emergency room on 1/5/2021. I was diagnosed with bilateral pulmonary embolisms. I was Covid negative and had no other symptoms. |
| PULMONARY EMBOLISM | PFIZER\BIONTECH | Unknown | Death | 940950-1 | thrombopenia; pulmonary embolism; neutropenia fever; This is a spontaneous report from a Pfizer-sponsored program . A contactable consumer reported for a patient that received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA 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. The patient experienced thrombopenia, pulmonary embolism and neutropenia fever on an unspecified date. The clinical outcome of thrombopenia, pulmonary embolism and neutropenia fever was fatal. The patient died on an unspecified date. It was unknown if an autopsy was performed. The batch/lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up.; Reported Cause(s) of Death: thrombopenia; pulmonary embolism; neutropenia fever |
| PULMONARY IMAGING PROCEDURE ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PULMONARY OEDEMA | MODERNA | 65+ years | Death | 924664-1 | At approximately, 1855, I was alerted by caregiver, resident was not responding. Per caregiver, she was doing her rounds and found resident in bed, unresponsive, mouth open, observed gurgling noises and tongue hanging out of mouth. This primary caregiver observed resident at baseline and ambulating after dinner at approximately, 1800 less than an hour prior to incident. This PCG called 911 for EMS and gave report of incident. Resident was taken to Medical Center Emergency Department. At ER, CT scan and X-ray was performed. Per report from ER RN, CT scan and x-ray revealed an intracranial aneurysm and fluid in the lungs. Per RN, resident was still unresponsive and was admitted to Medical Center for observation and comfort measures. This primary caregiver reported to RN, resident recently received the first dose of COVID-19 vaccine on 1/2/21. Primary caregiver received a call from Castle RN at 0700, resident expired at 0615. |
| PULSE ABNORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| PULSE ABSENT | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |
| PULSE ABSENT | MODERNA | 65+ years | Death | 919537-1 | Resident exhibited no adverse events during 30 minute monitoring following vaccine administration. Resident found without pulse at 1900. |
| PULSE ABSENT | MODERNA | 65+ years | Death | 927260-1 | 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. |
| PULSE ABSENT | MODERNA | 65+ years | Death | 940866-1 | "Patient was found ""acting abnormal"" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest." |
| PULSE ABSENT | MODERNA | 65+ years | Death | 944732-1 | Resident found unresponsive and without pulse at 05:45am. |
| PULSE ABSENT | PFIZER\BIONTECH | 50-59 years | Death | 942106-1 | 54 y/o M with PMH of HTN, HLD, Alcoholic Cirrhosis, Aortic Valve Stenosis, and angina BIBA as a Medical Alert for cardiac arrest noted PTA. Per EMS, the patient called because he was having constant, diffuse abdominal pain x 1 day that radiated to his chest. On scene, the patient had a witnessed arrest with EMS starting CPR. He was given 3 rounds of epi without ROSC. Pt had no associated shockable rhythm. Of note, pt's wife, had noted pt had received covid vaccine the prior day. |
| PULSE ABSENT | PFIZER\BIONTECH | 60-64 years | Death | 942085-1 | No adverse effects from vaccination seen on 1/2/21. On 1/6/21 resident was seen by Dr and her baclofen pump was refilled with 20 ml Baclofen 4,000mcg/ml. ITB Rate increased by 6% to 455.5 mcg/day simple continuous rate over 3 days. On 1/8/21 at 0615 resident was shaking, lower extremities mottled, Sa02 70%, pulse 45. Oxygen started at 2 L/m per NC. At 0715 her primary physician was notified as well as her daughter. Oxygen increased to 4 L/min, sats at 83%. SOA noted, reported all over pain. At 0850 when they attempted to reposition the resident, she was not responsive. Licensed nurse assessed her and no heartbeat heard or pulse found. |
| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 918388-1 | Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |
| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 920545-1 | "The resident received is vaccine around 11:00 am and tolerated it without any difficulty or immediate adverse effects. He was at therapy from 12:36 pm until 1:22 pm when he stated he was too tired and could not do anymore. The therapist took him back to his room at that time and he got into bed himself but stated his legs felt heavy. At 1:50 pm the CNA answered his call light and found he had taken himself to the bathroom. She stated that when he went to get back into the bed it was ""abnormal"" how he was getting into it so she assisted him. At that time he quit breathing and she called a RN into the room immediately. He was found without a pulse, respirations, or blood pressure at 1:54 pm. He was a DNR." |
| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 926269-1 | "Pt last seen at 1200 by nurse for ID band check. No visible signs of distress noted. Pt states ""I just want to be left alone"". 1230 nurse was called to pt room. Pt was noted unresponsive, no pulse and respiration noted. CPR started immediately, at 1239 first shock given. 1245 EMT took over, at 1319 EMT called time of death" |
| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 934373-1 | Patient went to bed around 11pm on Saturday PM and sometime between then and 1:30am on Sunday morning got up and went into the living room without waking up her husband (which is normal). At 1:30am, the husband got up to use the restroom and she was out of bed then, but the husband did not know if she was having any problems at this time. When he got up at 7:45am, she was in the recliner and did not move or anything, which is normal for her. At 8:45am, the husband went back into the living room and tried to wake his wife and that is when he noticed there was no pulse and he called 9-1-1 at this time. EMS got on scene and did CPR for 30 mins and she was pronounced dead at 9:21am. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 940955-1 | "Cardiac Arrest; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; This is a spontaneous report from a contactable other healthcare professional (HCP). A 66-year-old female patient (pregnant at the time of vaccination: no) received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL1284) via intramuscular at left arm on 11Jan2021 12:15 PM at single dose for COVID-19 immunization. Medical history included diastolic CHF, spinal stenosis, morbid obesity, epilepsy, pulmonary hypertension and COVID-19 (Prior to vaccination, the patient was diagnosed with COVID-19). The patient received medication within 2 weeks of vaccination included amiodarone, melatonin, venlafaxine hydrochloride (EFFEXOR), ibuprofen, aripiprazole (ABILIFY), lisinopril, cranberry capsules, diltiazem, paracetamol (TYLENOL), famotidine, furosemide (LASIX [FUROSEMIDE]), ipratropium bromide, salbutamol sulfate (IPRATROPIUM/ALBUTEROL), buspirone, senna alexandrina leaf (SENNA [SENNA ALEXANDRINA LEAF]), polyethylene glycol 3350 and morphine. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient used took Penicillin, propranolol, quetiapine, topiramate, Lamictal and had allergy to them. Patient used took the first dose of BNT162B2 (lot number: EJ1685) via intramuscular at right arm on 21Dec2020 12:00 PM at single dose for COVID-19 immunization. Since the vaccination, the patient been tested for COVID-19 (Sars-cov-2 PCR) via nasal swab on 06Jan2021, covid test result was negative. Patient was found pulseless and breathless 20 minutes following the vaccine administration (11Jan2021 12:30 AM). MD found no signs of anaphylaxis. Patient died on 11Jan2021 12:30 AM because of cardiac arrest. No treatment received for the events. Outcome of pulseless and breathless was unknown. the autopsy was performed, and autopsy remarks was unknown. Autopsy-determined cause of death was unknown. It was reported as non-serious, not results in death, Life threatening, caused/prolonged hospitalization, disabling/Incapacitating nor congenital anomaly/birth defect.; Sender's Comments: Based on the available information this patient had multiple underlying medical conditions including morbid obesity, diastolic CHF, epilepsy, pulmonary hypertension and COVID-19 diagnosed prior to vaccination. All these conditions more likely contributed to patients cardiac arrest resulting in death. However, based on a close temporal association (""Patient was found pulseless and breathless 20 minutes following the second dose of BNT162B2 vaccine administration, contributory role of BNT162B2 vaccine to the onset of reported events cannot 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.; Reported Cause(s) of Death: Cardiac arrest; Autopsy-determined Cause(s) of Death: autopsy remarks was unknown. Autopsy-determined cause of death was unknown" |
| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |
| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Death | 945603-1 | Had no immediate issues with the vaccine. He had returned from the hospital on 12/21 and had some concerns about his weight which were shared with his physician on 1/4/21. On 1/5/21 had a visit with his cardiologist for a pacemaker check. On 1/8/21 staff were called to his room, he was on the floor, bluish skin color. No vital signs found, no heart rhythm heard at 2200. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PULSE ABSENT | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| PUPIL FIXED | PFIZER\BIONTECH | 18-29 years | Death | 943397-1 | On day due for 2nd dose, Patient was found unresponsive at work in the hospital. Patient pupils were fixed and dilated. Full ACLS was initiated for 55 minutes with multiple rounds of bicarb, calcium chloride, magnesium, and epinephrine. Patient was intubated. Patient continued into V. Fib arrest and was shocked multiple times. |
| PUPIL FIXED | PFIZER\BIONTECH | 65+ years | Death | 924456-1 | Patient did not display any obvious signs or symptoms; the vaccination was administered at approximately 10:00 AM and the patient continued throughout her day without any complaints or signs of adverse reaction. Patient was helped to bed by the nursing assistant estimated at around 9:00 PM. The facility received notification from the lab around 11:00 PM that the patient's COVID-19 specimen collection from Sunday, 1/3/21, detected COVID-19. When the nursing staff went to the room to check on the resident and prepare her to move to a COVID-19 care area the patient was found unresponsive, no movement, no chest rises, noted regurgitated small amount of food to mouth left side, lying on left side. Pupils non reactive. |
| PYREXIA | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| PYREXIA | MODERNA | 18-29 years | Life Threatening | 919252-1 | 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 feeling of generalized sunburn. Later developed severe headache.. |
| PYREXIA | MODERNA | 40-49 years | Life Threatening | 941476-1 | 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. |
| PYREXIA | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PYREXIA | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| PYREXIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| PYREXIA | MODERNA | 65+ years | Death | 922977-1 | Fever, RespDepression & COVID positive REMDESIVIR (EUA) 200 mg x1 then 100 mg daily |
| PYREXIA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 937932-1 | 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. |
| PYREXIA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PYREXIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| PYREXIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| PYREXIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936618-1 | Soreness at injection site started at 1600 Body aches, headache, and low grade fever woke me up around 0100 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PYREXIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| PYREXIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| PYREXIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909614-1 | Fever, muscle aches, hypertension, rapid heart heart |
| PYREXIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 909720-1 | 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. |
| PYREXIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 912271-1 | 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 02 Sat of 60%, and was hospitalized in the ICU at another hospital (due to bed unavailability). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PYREXIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| PYREXIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 941118-1 | At first I has some injection site pain and soreness nothing too bad. But around 01:30 I awoke with a really high fever. My fever was 102.8 when I first woke up. I was very nauseous and my fever felt worse. My thermometer would not read any more until my temp came down. I can only guess how high it got but at least 103 degrees. I took Advil Liquid Gells and then my fever broke. I was actually scare for my life. In March I actually caught coronavirus and developed anti bodies for Covid. I can only guess my body was fighting for it's life. |
| PYREXIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 920628-1 | 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. |
| PYREXIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PYREXIA | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Death | 914690-1 | Within 24 hours of receiving the vaccine, fever and respiratory distress, and anxiety developed requiring oxygen, morphine and ativan. My Mom passed away on the evening of 12/26/2020. |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Death | 919108-1 | Fever, Malaise |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Death | 930466-1 | Fever, shortness of breath and chest pain that resulted in a heart attack a few hours after vaccination |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Death | 932346-1 | 1/7-21 - Received second dose of pfizer covid-19 vaccine 1/8/21 - Fever, dizziness, headache 1/10/21 0250 was found not breathing. EMS performed CPR and patient deceased |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Death | 944273-1 | death 2 days after vaccine; 101 fever on day of booster shot; This is a spontaneous report from a contactable consumer. A 65-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 09Jan2021 (at the age of 65-years-old) as a single dose for COVID-19 immunization. Medical history included high blood pressure, high cholesterol, enlarged prostate, and lifelong digestive issues/irritable bowel syndrome (IBS). Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient had no allergies to medications, food, or other products. The patient's concomitant medications were not reported. The patient did not receive any other vaccines within four weeks prior to the vaccination. The patient experienced 101 fever on day of booster shot on 09Jan2021 and death 2 days after vaccine on 10Jan2021. The event, death 2 days after vaccine, was reported as fatal. The patient underwent lab tests and procedures, which included body temperature: 101 on 09Jan2021. The patient did not receive treatment for the events. The clinical outcome of 101 fever on day of booster shot was unknown and of death 2 days after vaccine was fatal. The patient died on 10Jan2021. The cause of death was unknown. It was unknown if an autopsy was done. It was also reported that since the vaccination, the patient had not been tested for COVID-19. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: death 2 days after vaccine |
| PYREXIA | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| PYREXIA | PFIZER\BIONTECH | Unknown | Death | 934966-1 | COVID-19; COVID-19; Pneumonia; respiratory failure; This is a spontaneous report from a contactable consumer. An 80-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Jan2021 for COVID-19 immunization. Medical history included Alzheimer's and others. No known allergies. Concomitant medications included unspecified medications. The reporter's mother in law was tested for COVID-19 at a nursing facility on 25Dec2020 and she was negative. On 02Jan2021, she received the first dose of Pfizer vaccine. On 04Jan2020, she developed a high fever, needed oxygen and was positive for COVID-19. Date of death was 04Jan2021. The cause of her death was listed as pneumonia, respiratory failure and COVID-19. No autopsy performed. No treatment received. No one knew if the vaccination contributed to her death. It was hard to know if her death was due to the administration of the vaccine or it exacerbated the COVID19 symptoms which led to her death. Since this was unknown, it could have been a possibility. The reporter wanted to give us this information because we might want to consider having high risk population, patients with underlying conditions, older population tested for COVID-19 prior to the vaccination, as this is not currently a recommendation or a requirement. All is very new and they are all learning so the reporter wanted to share this information with us. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. There are medications the patient received within 2 weeks of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has been tested for COVID-19. The outcome of the events was fatal. Information about Lot/Batch has been requested.; Sender's Comments: The association between the fatal event lack of effect (pneumonia, respiratory failure and COVID-19) with BNT162b2 can not be fully 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.; Reported Cause(s) of Death: Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19 |
| QUARANTINE | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| RADIAL PULSE ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| RASH | MODERNA | 18-29 years | Life Threatening | 919252-1 | 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 feeling of generalized sunburn. Later developed severe headache.. |
| RASH | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RASH | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| RASH | MODERNA | 40-49 years | Life Threatening | 916746-1 | Anaphylaxis. Immediately experienced shortness of breath, rapid heart rate, and rash. I am a Nurse Practitioner in the emergency department. Had went down to the temporary vaccine station to receive my vaccine, immediately returned to the ER and began to experience symptoms of anaphylaxis. Was immediately placed in a treatment room and received treatment by the ER physician, which included oxygen, intravenous Benadryl, Solumedrol, and Normal Saline. Was observed for several hours and then eventually sent home with prescription for Prednisone and Pepcid. I do have a allergy to shellfish, was never asked about my allergies and nothing on the paperwork I was given prior to the injection noted a concern for shellfish allergies. |
| RASH | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| RASH | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| RASH | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| RASH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| RASH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RASH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ----RN 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 ----- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |
| RASH | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| RASH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| RASH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |
| RASH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930897-1 | Shortness of breath, cough, rash on face and neck, arthralgia |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RASH | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| RASH | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| RASH | PFIZER\BIONTECH | 65+ years | Death | 921481-1 | Vaccine given on 12/29/20 by Pharmacy. On 1/1/21, resident became lethargic and sluggish and developed a rash on forearms. He was a Hospice recipient and doctor and Hospice ordered no treatment, just to continue to monitor. When no improvement of codition reported, doctor and Hospice ordered comfort meds (Morphine, Ativan, Levsin). Resident expired on 1/4/2021 |
| RASH | PFIZER\BIONTECH | 65+ years | Death | 946225-1 | At approximately 10:30pm on 1/14/2021, resident was noted to have a rash on her face, hands, arms, and chest. VS:100.2, 113, 20,108/59, 84% room air. applied nasal cannula at 4-L, telephoned Physician orders 6mg Decadron one time order, a second set of Vitals , reads 99.3, 110, 20, 106/60, 90% on 4-L N/C. On coming shift advised. At approximately 2:00am on 1/15/2021, resident congested and coughing. BP 151/70, pulse 124, temp 98.1 forehead, resp 20 and pulse oc 79% on 3L. At approximately 2:30am PRN cough syrup and breathing tx. Resident's condition began to worsen with breathing tx. This LPN updated at 0248 doctor on resident's condition. Doctor gave permission for resident to go to hospital. At 4:19am the Er called to say resident passed away. |
| RASH ERYTHEMATOUS | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| RASH ERYTHEMATOUS | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RASH ERYTHEMATOUS | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| RASH ERYTHEMATOUS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| RASH ERYTHEMATOUS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ---------- ----------RN |
| RASH ERYTHEMATOUS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RASH MACULAR | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| RASH MACULAR | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| RASH PAPULAR | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| RASH PRURITIC | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RASH PRURITIC | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| RED BLOOD CELL COUNT DECREASED | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| RED BLOOD CELL COUNT NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| RED BLOOD CELL COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| RED BLOOD CELL COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| RED BLOOD CELL COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RED BLOOD CELL NUCLEATED MORPHOLOGY | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| RED BLOOD CELL NUCLEATED MORPHOLOGY | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| RED BLOOD CELL SEDIMENTATION RATE INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| RED BLOOD CELL SEDIMENTATION RATE NORMAL | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
|---|---|---|---|---|---|
| RED CELL DISTRIBUTION WIDTH INCREASED | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| RED CELL DISTRIBUTION WIDTH NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| RED CELL DISTRIBUTION WIDTH NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| RED CELL DISTRIBUTION WIDTH NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| REGURGITATION | PFIZER\BIONTECH | 65+ years | Death | 924456-1 | Patient did not display any obvious signs or symptoms; the vaccination was administered at approximately 10:00 AM and the patient continued throughout her day without any complaints or signs of adverse reaction. Patient was helped to bed by the nursing assistant estimated at around 9:00 PM. The facility received notification from the lab around 11:00 PM that the patient's COVID-19 specimen collection from Sunday, 1/3/21, detected COVID-19. When the nursing staff went to the room to check on the resident and prepare her to move to a COVID-19 care area the patient was found unresponsive, no movement, no chest rises, noted regurgitated small amount of food to mouth left side, lying on left side. Pupils non reactive. |
| RESPIRATION ABNORMAL | MODERNA | 65+ years | Death | 927260-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESPIRATORY ARREST | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 918388-1 | Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 920545-1 | "The resident received is vaccine around 11:00 am and tolerated it without any difficulty or immediate adverse effects. He was at therapy from 12:36 pm until 1:22 pm when he stated he was too tired and could not do anymore. The therapist took him back to his room at that time and he got into bed himself but stated his legs felt heavy. At 1:50 pm the CNA answered his call light and found he had taken himself to the bathroom. She stated that when he went to get back into the bed it was ""abnormal"" how he was getting into it so she assisted him. At that time he quit breathing and she called a RN into the room immediately. He was found without a pulse, respirations, or blood pressure at 1:54 pm. He was a DNR." |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 924456-1 | Patient did not display any obvious signs or symptoms; the vaccination was administered at approximately 10:00 AM and the patient continued throughout her day without any complaints or signs of adverse reaction. Patient was helped to bed by the nursing assistant estimated at around 9:00 PM. The facility received notification from the lab around 11:00 PM that the patient's COVID-19 specimen collection from Sunday, 1/3/21, detected COVID-19. When the nursing staff went to the room to check on the resident and prepare her to move to a COVID-19 care area the patient was found unresponsive, no movement, no chest rises, noted regurgitated small amount of food to mouth left side, lying on left side. Pupils non reactive. |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 926269-1 | "Pt last seen at 1200 by nurse for ID band check. No visible signs of distress noted. Pt states ""I just want to be left alone"". 1230 nurse was called to pt room. Pt was noted unresponsive, no pulse and respiration noted. CPR started immediately, at 1239 first shock given. 1245 EMT took over, at 1319 EMT called time of death" |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 932346-1 | 1/7-21 - Received second dose of pfizer covid-19 vaccine 1/8/21 - Fever, dizziness, headache 1/10/21 0250 was found not breathing. EMS performed CPR and patient deceased |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 940955-1 | "Cardiac Arrest; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; This is a spontaneous report from a contactable other healthcare professional (HCP). A 66-year-old female patient (pregnant at the time of vaccination: no) received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL1284) via intramuscular at left arm on 11Jan2021 12:15 PM at single dose for COVID-19 immunization. Medical history included diastolic CHF, spinal stenosis, morbid obesity, epilepsy, pulmonary hypertension and COVID-19 (Prior to vaccination, the patient was diagnosed with COVID-19). The patient received medication within 2 weeks of vaccination included amiodarone, melatonin, venlafaxine hydrochloride (EFFEXOR), ibuprofen, aripiprazole (ABILIFY), lisinopril, cranberry capsules, diltiazem, paracetamol (TYLENOL), famotidine, furosemide (LASIX [FUROSEMIDE]), ipratropium bromide, salbutamol sulfate (IPRATROPIUM/ALBUTEROL), buspirone, senna alexandrina leaf (SENNA [SENNA ALEXANDRINA LEAF]), polyethylene glycol 3350 and morphine. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient used took Penicillin, propranolol, quetiapine, topiramate, Lamictal and had allergy to them. Patient used took the first dose of BNT162B2 (lot number: EJ1685) via intramuscular at right arm on 21Dec2020 12:00 PM at single dose for COVID-19 immunization. Since the vaccination, the patient been tested for COVID-19 (Sars-cov-2 PCR) via nasal swab on 06Jan2021, covid test result was negative. Patient was found pulseless and breathless 20 minutes following the vaccine administration (11Jan2021 12:30 AM). MD found no signs of anaphylaxis. Patient died on 11Jan2021 12:30 AM because of cardiac arrest. No treatment received for the events. Outcome of pulseless and breathless was unknown. the autopsy was performed, and autopsy remarks was unknown. Autopsy-determined cause of death was unknown. It was reported as non-serious, not results in death, Life threatening, caused/prolonged hospitalization, disabling/Incapacitating nor congenital anomaly/birth defect.; Sender's Comments: Based on the available information this patient had multiple underlying medical conditions including morbid obesity, diastolic CHF, epilepsy, pulmonary hypertension and COVID-19 diagnosed prior to vaccination. All these conditions more likely contributed to patients cardiac arrest resulting in death. However, based on a close temporal association (""Patient was found pulseless and breathless 20 minutes following the second dose of BNT162B2 vaccine administration, contributory role of BNT162B2 vaccine to the onset of reported events cannot 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.; Reported Cause(s) of Death: Cardiac arrest; Autopsy-determined Cause(s) of Death: autopsy remarks was unknown. Autopsy-determined cause of death was unknown" |
| RESPIRATORY ARREST | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |
| RESPIRATORY DEPRESSION | MODERNA | 65+ years | Death | 922977-1 | Fever, RespDepression & COVID positive REMDESIVIR (EUA) 200 mg x1 then 100 mg daily |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESPIRATORY DISTRESS | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| RESPIRATORY DISTRESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| RESPIRATORY DISTRESS | PFIZER\BIONTECH | 65+ years | Death | 914690-1 | Within 24 hours of receiving the vaccine, fever and respiratory distress, and anxiety developed requiring oxygen, morphine and ativan. My Mom passed away on the evening of 12/26/2020. |
| RESPIRATORY FAILURE | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at 7:20am. |
| RESPIRATORY FAILURE | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| RESPIRATORY FAILURE | MODERNA | 65+ years | Life Threatening | 930611-1 | Developed hypercapnic respiratory failure, CHF exacerbation - readmitted to Hospital. In ICU with BIPAP |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESPIRATORY FAILURE | PFIZER\BIONTECH | Unknown | Death | 934966-1 | COVID-19; COVID-19; Pneumonia; respiratory failure; This is a spontaneous report from a contactable consumer. An 80-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Jan2021 for COVID-19 immunization. Medical history included Alzheimer's and others. No known allergies. Concomitant medications included unspecified medications. The reporter's mother in law was tested for COVID-19 at a nursing facility on 25Dec2020 and she was negative. On 02Jan2021, she received the first dose of Pfizer vaccine. On 04Jan2020, she developed a high fever, needed oxygen and was positive for COVID-19. Date of death was 04Jan2021. The cause of her death was listed as pneumonia, respiratory failure and COVID-19. No autopsy performed. No treatment received. No one knew if the vaccination contributed to her death. It was hard to know if her death was due to the administration of the vaccine or it exacerbated the COVID19 symptoms which led to her death. Since this was unknown, it could have been a possibility. The reporter wanted to give us this information because we might want to consider having high risk population, patients with underlying conditions, older population tested for COVID-19 prior to the vaccination, as this is not currently a recommendation or a requirement. All is very new and they are all learning so the reporter wanted to share this information with us. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. There are medications the patient received within 2 weeks of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has been tested for COVID-19. The outcome of the events was fatal. Information about Lot/Batch has been requested.; Sender's Comments: The association between the fatal event lack of effect (pneumonia, respiratory failure and COVID-19) with BNT162b2 can not be fully 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.; Reported Cause(s) of Death: Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19 |
| RESPIRATORY RATE DECREASED | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESPIRATORY RATE INCREASED | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| RESPIRATORY RATE INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| RESPIRATORY SYNCYTIAL VIRUS TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| RESPIRATORY TRACT CONGESTION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| RESPIRATORY TRACT CONGESTION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESPIRATORY TRACT CONGESTION | PFIZER\BIONTECH | 65+ years | Death | 918418-1 | Resident became SOB, congested and hypoxic requiring oxygen, respiratory treatments and suctioning. Stabilized after treatment and for the next 72 hours with oxygen saturations in the 90s. On 1/3/2021 was found without pulse and respirations. Resident was a DNR on Hospice. |
| RESPIRATORY TRACT CONGESTION | PFIZER\BIONTECH | 65+ years | Death | 946225-1 | At approximately 10:30pm on 1/14/2021, resident was noted to have a rash on her face, hands, arms, and chest. VS:100.2, 113, 20,108/59, 84% room air. applied nasal cannula at 4-L, telephoned Physician orders 6mg Decadron one time order, a second set of Vitals , reads 99.3, 110, 20, 106/60, 90% on 4-L N/C. On coming shift advised. At approximately 2:00am on 1/15/2021, resident congested and coughing. BP 151/70, pulse 124, temp 98.1 forehead, resp 20 and pulse oc 79% on 3L. At approximately 2:30am PRN cough syrup and breathing tx. Resident's condition began to worsen with breathing tx. This LPN updated at 0248 doctor on resident's condition. Doctor gave permission for resident to go to hospital. At 4:19am the Er called to say resident passed away. |
| RESPIRATORY TRACT CONGESTION | PFIZER\BIONTECH | 65+ years | Life Threatening | 928378-1 | Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services. |
| RESPIRATORY VIRAL PANEL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| RESPIRATORY VIRAL PANEL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESTLESSNESS | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| RESTLESSNESS | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |
| RESUSCITATION | MODERNA | 50-59 years | Death | 918518-1 | syncopal episode - arrested - CPR - death |
| RESUSCITATION | MODERNA | 50-59 years | Death | 928933-1 | Patient had been diagnosed with COVID-19 on Dec. 11th, 2020. Symptoms were thought to have started on 12/5/2020. Received Moderna vaccine on 12/23. Unexpected death on 1/8/2021. Resuscitation attempts unsuccessful |
| RESUSCITATION | MODERNA | 65+ years | Death | 927260-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESUSCITATION | MODERNA | 65+ years | Death | 934050-1 | Staff reported that patient was found Friday morning (Jan 8) sitting at a table with his head tilted forward and unresponsive to verbal or physical stimuli. Staff lowered patient to floor and started CPR. EMS was called and continued CPR at scene, however they were not able to revive patient. Patient was pronounced dead at the scene. Staff written statements following the death of patient show that he had a fall about 1 hr. prior. It is unknown if this fall contributed to patient's death. An autopsy has been requested. |
| RESUSCITATION | MODERNA | 65+ years | Death | 940866-1 | "Patient was found ""acting abnormal"" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest." |
| RESUSCITATION | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| RESUSCITATION | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |
| RESUSCITATION | PFIZER\BIONTECH | 50-59 years | Death | 942106-1 | 54 y/o M with PMH of HTN, HLD, Alcoholic Cirrhosis, Aortic Valve Stenosis, and angina BIBA as a Medical Alert for cardiac arrest noted PTA. Per EMS, the patient called because he was having constant, diffuse abdominal pain x 1 day that radiated to his chest. On scene, the patient had a witnessed arrest with EMS starting CPR. He was given 3 rounds of epi without ROSC. Pt had no associated shockable rhythm. Of note, pt's wife, had noted pt had received covid vaccine the prior day. |
| RESUSCITATION | PFIZER\BIONTECH | 65+ years | Death | 918388-1 | Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue |
| RESUSCITATION | PFIZER\BIONTECH | 65+ years | Death | 926269-1 | "Pt last seen at 1200 by nurse for ID band check. No visible signs of distress noted. Pt states ""I just want to be left alone"". 1230 nurse was called to pt room. Pt was noted unresponsive, no pulse and respiration noted. CPR started immediately, at 1239 first shock given. 1245 EMT took over, at 1319 EMT called time of death" |
| RESUSCITATION | PFIZER\BIONTECH | 65+ years | Death | 932346-1 | 1/7-21 - Received second dose of pfizer covid-19 vaccine 1/8/21 - Fever, dizziness, headache 1/10/21 0250 was found not breathing. EMS performed CPR and patient deceased |
| RESUSCITATION | PFIZER\BIONTECH | 65+ years | Death | 934373-1 | Patient went to bed around 11pm on Saturday PM and sometime between then and 1:30am on Sunday morning got up and went into the living room without waking up her husband (which is normal). At 1:30am, the husband got up to use the restroom and she was out of bed then, but the husband did not know if she was having any problems at this time. When he got up at 7:45am, she was in the recliner and did not move or anything, which is normal for her. At 8:45am, the husband went back into the living room and tried to wake his wife and that is when he noticed there was no pulse and he called 9-1-1 at this time. EMS got on scene and did CPR for 30 mins and she was pronounced dead at 9:21am. |
| RESUSCITATION | PFIZER\BIONTECH | 65+ years | Death | 945241-1 | 71yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, VS taken at 10am, B/P 99/60, O2 sats, 95% (trach w/O2). At 11:30am, Patient showed no s/sx of distress, A&Ox3. At 11:50am, a nurse went to perform a COVID test and assessment (the facility is experiencing an outbreak), and found the patient unresponsive on the bathroom floor. CPR was immediately started; no shock advised per AED; 12:15pm EMS arrived and took over. At 12:38pm, EMT called time of death. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| RESUSCITATION | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |
| RETCHING | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| RETCHING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| RETCHING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |
| RHINORRHOEA | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| SALIVA ALTERED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 ANTIBODY TEST | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| SARS-COV-2 ANTIBODY TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| SARS-COV-2 ANTIBODY TEST NEGATIVE | MODERNA | 50-59 years | Life Threatening | 938443-1 | immediate tingling of lips, followed by fullness of posterior oropharynx, hoarseness and pruritus |
| SARS-COV-2 TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| SARS-COV-2 TEST | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| SARS-COV-2 TEST NEGATIVE | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| SARS-COV-2 TEST NEGATIVE | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST NEGATIVE | MODERNA | 50-59 years | Life Threatening | 941522-1 | I was short of breath and went to emergency room on 1/5/2021. I was diagnosed with bilateral pulmonary embolisms. I was Covid negative and had no other symptoms. |
| SARS-COV-2 TEST NEGATIVE | MODERNA | 65+ years | Death | 927260-1 | 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. |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 915813-1 | 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 adminsitered 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 |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 914690-1 | Within 24 hours of receiving the vaccine, fever and respiratory distress, and anxiety developed requiring oxygen, morphine and ativan. My Mom passed away on the evening of 12/26/2020. |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 935767-1 | My mother was given Pfizer vaccine on Thursday and she died 3 days later yesterday on Sunday!!! |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 940955-1 | "Cardiac Arrest; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; Patient was found pulseless and breathless 20 minutes following the vaccine administration.; This is a spontaneous report from a contactable other healthcare professional (HCP). A 66-year-old female patient (pregnant at the time of vaccination: no) received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL1284) via intramuscular at left arm on 11Jan2021 12:15 PM at single dose for COVID-19 immunization. Medical history included diastolic CHF, spinal stenosis, morbid obesity, epilepsy, pulmonary hypertension and COVID-19 (Prior to vaccination, the patient was diagnosed with COVID-19). The patient received medication within 2 weeks of vaccination included amiodarone, melatonin, venlafaxine hydrochloride (EFFEXOR), ibuprofen, aripiprazole (ABILIFY), lisinopril, cranberry capsules, diltiazem, paracetamol (TYLENOL), famotidine, furosemide (LASIX [FUROSEMIDE]), ipratropium bromide, salbutamol sulfate (IPRATROPIUM/ALBUTEROL), buspirone, senna alexandrina leaf (SENNA [SENNA ALEXANDRINA LEAF]), polyethylene glycol 3350 and morphine. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient used took Penicillin, propranolol, quetiapine, topiramate, Lamictal and had allergy to them. Patient used took the first dose of BNT162B2 (lot number: EJ1685) via intramuscular at right arm on 21Dec2020 12:00 PM at single dose for COVID-19 immunization. Since the vaccination, the patient been tested for COVID-19 (Sars-cov-2 PCR) via nasal swab on 06Jan2021, covid test result was negative. Patient was found pulseless and breathless 20 minutes following the vaccine administration (11Jan2021 12:30 AM). MD found no signs of anaphylaxis. Patient died on 11Jan2021 12:30 AM because of cardiac arrest. No treatment received for the events. Outcome of pulseless and breathless was unknown. the autopsy was performed, and autopsy remarks was unknown. Autopsy-determined cause of death was unknown. It was reported as non-serious, not results in death, Life threatening, caused/prolonged hospitalization, disabling/Incapacitating nor congenital anomaly/birth defect.; Sender's Comments: Based on the available information this patient had multiple underlying medical conditions including morbid obesity, diastolic CHF, epilepsy, pulmonary hypertension and COVID-19 diagnosed prior to vaccination. All these conditions more likely contributed to patients cardiac arrest resulting in death. However, based on a close temporal association (""Patient was found pulseless and breathless 20 minutes following the second dose of BNT162B2 vaccine administration, contributory role of BNT162B2 vaccine to the onset of reported events cannot 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.; Reported Cause(s) of Death: Cardiac arrest; Autopsy-determined Cause(s) of Death: autopsy remarks was unknown. Autopsy-determined cause of death was unknown" |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 942072-1 | Death occurred 3 days after vaccine receipt; attributed to complications of her chronic advanced dementia with aspiration at age 87. No evidence of acute vaccine reaction. |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| SARS-COV-2 TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST POSITIVE | MODERNA | 30-39 years | Death | 939050-1 | Patient vaccinated on 12/28. Approximately one day later, develops cough and on azithromycin x 1 week. On 1/3, patient develops left-sided weakness and aphasia. Taken to the hospital, tested COVID+, required intubation -- acute hypoxic respiratory failure secondary to COVID - on H&P. Patient died on 1/4/21 at 7:20am. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 917117-1 | After vaccination, patient tested positive for COVID-19. Patient was very ill and had numerous chronic health issues prior to vaccination. Facility had a number of patients who had already tested positive for COVID-19. Vaccination continued in an effort to prevent this patient from contracting the virus or to mitigate his risk. This was unsuccessful and patient died. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 917790-1 | At the time of vaccination, there was an outbreak of residents who had already tested positive for COVID 19 at the nursing home where patient was a resident. About a week later, patient tested positive for COVID 19. She had a number of chronic, underlying health conditions. The vaccine did not have enough time to prevent COVID 19. There is no evidence that the vaccination caused patient's death. It simply didn't have time to save her life. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 917793-1 | Prior to the administration of the COVID 19 vaccine, the nursing home had an outbreak of COVID-19. Patient was vaccinated and about a week later she tested positive for COVID-19. She had underlying thyroid and diabetes disease. She died as a result of COVID-19 and her underlying health conditions and not as a result of the vaccine. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 922977-1 | Fever, RespDepression & COVID positive REMDESIVIR (EUA) 200 mg x1 then 100 mg daily |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 934263-1 | The resident resides in an independent living facility/apartment. The reporter at the center was informed by his daughter he was not feeling well on 1/1/2021 (specific symptoms could not be ascertained). He reportedly went to be COVID tested on 1/1/2020 and observed to be deceased in his apartment on 1/2/2020. I do not have confirmation of his COVID results, although the reporter indicates his daughter reports his test was positive. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 937127-1 | The facility had positive cases of COVID when we were able to begin vaccinating residents. Within about a week of vaccination, patient was tested positive for COVID. He was 91 years old and his immune system did not have the time to allow the vaccine to begin working before exposure. His age was a major contributing factor to his death. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 937152-1 | The facility had positive cases for COVID 19 when the vaccine was received and administered to patient. With her advanced age and chronic conditions, she did not have time to build immunity between the time of vaccination and her testing positive. |
| SARS-COV-2 TEST POSITIVE | MODERNA | 65+ years | Death | 937186-1 | The facility had a number of positive COVID 19 cases prior to patients vaccination. Due to her advanced age, chronic condition, and exposure, patient did not have the time to build immunity after exposure before becoming positive. |
| SARS-COV-2 TEST POSITIVE | PFIZER\BIONTECH | 6-17 years | Life Threatening | 921641-1 | 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. |
| SARS-COV-2 TEST POSITIVE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST POSITIVE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 920224-1 | 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 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 be completely excluded.,Linked Report(s) : US-PFIZER INC-2020519020 same reporter/drug , different patient/AE. |
| SARS-COV-2 TEST POSITIVE | PFIZER\BIONTECH | 65+ years | Death | 920832-1 | Vaccine 12/30/2020 Screening PCR done 12/31/2020 Symptoms 1/1/2021 COVID test result came back positive 1/2/2021 Deceased 1/4/2021 |
| SARS-COV-2 TEST POSITIVE | PFIZER\BIONTECH | 65+ years | Death | 924456-1 | Patient did not display any obvious signs or symptoms; the vaccination was administered at approximately 10:00 AM and the patient continued throughout her day without any complaints or signs of adverse reaction. Patient was helped to bed by the nursing assistant estimated at around 9:00 PM. The facility received notification from the lab around 11:00 PM that the patient's COVID-19 specimen collection from Sunday, 1/3/21, detected COVID-19. When the nursing staff went to the room to check on the resident and prepare her to move to a COVID-19 care area the patient was found unresponsive, no movement, no chest rises, noted regurgitated small amount of food to mouth left side, lying on left side. Pupils non reactive. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SARS-COV-2 TEST POSITIVE | PFIZER\BIONTECH | Unknown | Death | 934966-1 | COVID-19; COVID-19; Pneumonia; respiratory failure; This is a spontaneous report from a contactable consumer. An 80-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Jan2021 for COVID-19 immunization. Medical history included Alzheimer's and others. No known allergies. Concomitant medications included unspecified medications. The reporter's mother in law was tested for COVID-19 at a nursing facility on 25Dec2020 and she was negative. On 02Jan2021, she received the first dose of Pfizer vaccine. On 04Jan2020, she developed a high fever, needed oxygen and was positive for COVID-19. Date of death was 04Jan2021. The cause of her death was listed as pneumonia, respiratory failure and COVID-19. No autopsy performed. No treatment received. No one knew if the vaccination contributed to her death. It was hard to know if her death was due to the administration of the vaccine or it exacerbated the COVID19 symptoms which led to her death. Since this was unknown, it could have been a possibility. The reporter wanted to give us this information because we might want to consider having high risk population, patients with underlying conditions, older population tested for COVID-19 prior to the vaccination, as this is not currently a recommendation or a requirement. All is very new and they are all learning so the reporter wanted to share this information with us. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. There are medications the patient received within 2 weeks of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has been tested for COVID-19. The outcome of the events was fatal. Information about Lot/Batch has been requested.; Sender's Comments: The association between the fatal event lack of effect (pneumonia, respiratory failure and COVID-19) with BNT162b2 can not be fully 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.; Reported Cause(s) of Death: Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19; Pneumonia, respiratory failure and COVID-19 |
| SCAN WITH CONTRAST | MODERNA | 40-49 years | Life Threatening | 931558-1 | 7 day after site itching, hot swelling. Unsure if related 9 day after suffered CVA and have hyper coagulation |
| SCAN WITH CONTRAST NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| SEIZURE | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SEIZURE LIKE PHENOMENA | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| SEIZURE LIKE PHENOMENA | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| SENSATION OF FOREIGN BODY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| SENSATION OF FOREIGN BODY | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |
| SENSITIVE SKIN | PFIZER\BIONTECH | 65+ years | Life Threatening | 924658-1 | Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SENSORY DISTURBANCE | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| SENSORY LOSS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 930777-1 | Patient presented to the emergency department with sensory loss and loss of reflexes, evaluated by neurology and diagnosed with Guillain- Barre Syndrome thought to be secondary to the Pfizer Covid Vaccine |
| SEPSIS | MODERNA | 30-39 years | Life Threatening | 918839-1 | Gallbladder removed, septic, 11mm axillary lymph node. |
| SEPSIS | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| SEPSIS | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| SERUM FERRITIN INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| SHIFT TO THE LEFT | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SINUS BRADYCARDIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| SKIN DISCOLOURATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| SKIN DISCOLOURATION | PFIZER\BIONTECH | 65+ years | Death | 945578-1 | No reactions immediately after vaccine was given. Resident has dementia, has had multiple hospitalizations related to a renal stone recently. Had a tooth that was bothering her, went to see her dentist and it was extracted on 1/6/21. On 1/10 they noted feet and ankles are dark purple with white splotches appears to be mottling. Minimally responsive to voice and touch. Not eating. Compassionate visit with family. Family did not want hospice, did not feel it was needed, said, what more could they do for her than you're already doing? On 1/11 at 1950 was determined to be deceased. |
| SKIN DISCOLOURATION | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| SKIN DISCOMFORT | MODERNA | 18-29 years | Life Threatening | 919252-1 | 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 feeling of generalized sunburn. Later developed severe headache.. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SKIN LESION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| SKIN WARM | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| SKIN WARM | MODERNA | 65+ years | Death | 920326-1 | Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21 |
| SKIN WARM | PFIZER\BIONTECH | 65+ years | Life Threatening | 924658-1 | Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation. |
| SKIN WARM | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| SLEEP DISORDER | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936618-1 | Soreness at injection site started at 1600 Body aches, headache, and low grade fever woke me up around 0100 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SLEEP DISORDER | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939194-1 | within 1 hr post-vaccine on 1/7 I had a mild headache that resolved with Tylenol. At about 12 hours post-vaccine I developed nausea, fever (100.4) and chills and secondary to this had poor sleep. The next day I took scheduled alternating Tylenol & ibuprofen during the day and then overnight 1 episode of chills that woke me up. no events Saturday or Sunday. Then Monday 1/11 in the early morning I started to develop a rash on my b/l elbow and right foot 3rd toe. I applied mometasone topical cream to these locations. while at work the rash extended down both forearms then by 5pm it was on both hips and extending along both legs. I applied Benadryl cream to the most irritated sites and took PO Benadryl 50mg at bedtime and again at 1am when the itching woke me up. I repeated Benadryl 25mg at 8am. The rash seems to be getting better on the arms but then by noon I had a new breakout on my neck and face. I took Benadryl 50mg at 1pm. The rash continued to have a rapid progression over the next hour and resulted in angioedema with my throat swelling, lips puffed and numb and eye swelling. I was injected with an epi pen and sent to the ED where I received PO prednisone, famotidine, and Benadryl. The face/neck rash then greatly improved and I was sent home on prednisone 40mg daily for 3 days. |
| SLEEP DISORDER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| SLEEP DISORDER | PFIZER\BIONTECH | 50-59 years | Life Threatening | 941118-1 | At first I has some injection site pain and soreness nothing too bad. But around 01:30 I awoke with a really high fever. My fever was 102.8 when I first woke up. I was very nauseous and my fever felt worse. My thermometer would not read any more until my temp came down. I can only guess how high it got but at least 103 degrees. I took Advil Liquid Gells and then my fever broke. I was actually scare for my life. In March I actually caught coronavirus and developed anti bodies for Covid. I can only guess my body was fighting for it's life. |
| SLUGGISHNESS | PFIZER\BIONTECH | 65+ years | Death | 921481-1 | Vaccine given on 12/29/20 by Pharmacy. On 1/1/21, resident became lethargic and sluggish and developed a rash on forearms. He was a Hospice recipient and doctor and Hospice ordered no treatment, just to continue to monitor. When no improvement of codition reported, doctor and Hospice ordered comfort meds (Morphine, Ativan, Levsin). Resident expired on 1/4/2021 |
| SOMNOLENCE | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SOMNOLENCE | MODERNA | 65+ years | Death | 910363-1 | Patient had mild hypotension, decreased oral intake, somnolence starting 3 days after vaccination and death 5 days after administration. He did have advanced dementia and was hospice eligible based on history of aspiration pneumonia. |
| SOMNOLENCE | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |
| SPEECH DISORDER | MODERNA | 65+ years | Death | 929997-1 | Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair. |
| SPEECH DISORDER | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| SPEECH DISORDER | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| SPEECH DISORDER | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| SPEECH DISORDER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907101-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
|---|---|---|---|---|---|
| SPEECH DISORDER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |
| SPEECH DISORDER | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| SPUTUM CULTURE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| STAPHYLOCOCCUS TEST NEGATIVE | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| STATUS ASTHMATICUS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 906988-1 | PT WAS OBSRVED IN HOLDING AREA LEANING FORWARD IN HER CHAIR ABOUT 7 MINUTES AFTER RECIEVING THE VACINE. RN ASSESSED AND NOTED: AUDIBLE WHEEZE, RESP 40/MIN, LIP SWELLING AND PT COMPLAINED OF NAUSEA. PT WAS ESCORTED TO ER IN WHEELCHAIR ACCOMPANIED BY 2 RN'S (2 MINUTE WALK) ONE HOUR LATER - AS REPORTED BY DR (ER) WORKING DIAGNOSIS - ANAPHYLAXIS / STATUS ASTHMATICUS MEDS RECIEVED: SOLUMEDROL 125, DIPHENHYDRAMINE 50MG, FAMOTIDINE 20MG -- ALL IV EPINEPHERINE 0.3MG IM X1 FOLLOWED BY 0.3MG IV X 1 FOLLOWED BY 0.1MG IV X1 PT IS RECIEVING O2 - AND PROGRESSING TO BIPAP |
| STENT PLACEMENT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930889-1 | 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.

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| STENT PLACEMENT | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| STRESS CARDIOMYOPATHY | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| STRIDOR | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914596-1 | Anaphalaxis reaction, stridor an unable to breathe. Happened in 30 seconds |
| STRIDOR | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |

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| STRIDOR | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| SUDDEN CARDIAC DEATH | PFIZER\BIONTECH | 40-49 years | Death | 939270-1 | Sudden cardiac death |
| SUDDEN DEATH | MODERNA | 65+ years | Death | 926797-1 | had a vaccination on 12/31/2020 late morning passed away early morning 01/01/2020. This is a 93 year old with significant heart issues. EF of 20% among other comorbidities. He died suddenly approximately 0430, it is unlikely it was related to receiving the vaccine. |
| SUDDEN DEATH | PFIZER\BIONTECH | 65+ years | Death | 934507-1 | Resident died suddenly and expectantly on 01/05/2021 |
| SUPRAVENTRICULAR TACHYCARDIA | MODERNA | 18-29 years | Life Threatening | 908685-1 | throat swelling, SVT |
| SURGERY | MODERNA | 18-29 years | Life Threatening | 916710-1 | 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) |
| SWELLING | MODERNA | 18-29 years | Life Threatening | 930079-1 | Swelling of throat and tongue, anaphylaxis, hives, redness, swelling |
| SWELLING | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| SWELLING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |
| SWELLING | PFIZER\BIONTECH | 60-64 years | Life Threatening | 909577-1 | Dizziness, dyspnea, neck swelling |
| SWELLING FACE | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |

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| SWELLING FACE | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| SWELLING FACE | MODERNA | 50-59 years | Life Threatening | 932367-1 | Facial (cheek) numbness and swelling with slight face droop Swelling continued on 1/7/2021 On 1/8/2021, lip swelling and numbness and tongue numbness By 1/9/2021 4pm, swelling and numbness resolved but chills and muscle aches began |
| SWELLING FACE | MODERNA | 65+ years | Life Threatening | 928461-1 | 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 |
| SWELLING FACE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 912137-1 | 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 |
| SWELLING FACE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 920784-1 | 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 |
| SWELLING FACE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 921989-1 | Anaphylactic reaction ( swelling and redness of face and torso, shortness of breath, constriction of airway and dizziness) |
| SWELLING FACE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |

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| SWELLING OF EYELID | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| SWELLING OF EYELID | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| SWOLLEN TONGUE | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| SWOLLEN TONGUE | MODERNA | 18-29 years | Life Threatening | 930079-1 | Swelling of throat and tongue, anaphylaxis, hives, redness, swelling |
| SWOLLEN TONGUE | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| SWOLLEN TONGUE | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |
| SWOLLEN TONGUE | MODERNA | 50-59 years | Life Threatening | 929418-1 | Swelling of lips & tongue, tightening of throat. Quivering of arms & legs. Tightening of chest. Dizzyness lightheaded. |
| SWOLLEN TONGUE | MODERNA | 65+ years | Life Threatening | 909061-1 | Reported sensation of tongue swelling during post-vaccination observation at 10 minutes. Epinephrine was refused and she was taken to ED for observation where she was given oral dose of Benadryl and Pepcid. Discharged with instructions to return PRN and follow up with PCP. Elevated BP noted. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SWOLLEN TONGUE | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 18-29 years | Life Threatening | 915464-1 | 10 minutes after receiving vaccine, patient reported numbness across upper lip which progressed to her tongue. Felt tingling and dryness of tongue and swelling. No difficulty breathing or swallowing, no chest pain, no wheezing, no rash, no itching. Taken to ED and given methylprednisolone 125mg IV, diphenhydramine 50mg IV, famotidine 20mg PO. Patient improved and monitored x 4 hours with resolution of symptoms. Prescribed prednisone 50mg po x 4 days. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SWOLLEN TONGUE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 926042-1 | 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. |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916268-1 | Shortly after receiving the vaccine (within 10 minutes) the patient's tongue swelled, facial redness, gasping for air. This resident was marked for a 30 minute observation due to previous anaphylaxis type reaction. Immediately administered 0.3mg epinephrine x 1 dose. Then administered 50mg IM Diphenhydramine. This treatment course resolved the adverse reaction. Patient was monitored onsite at facility. Her husband came to pick her up and take her home. Tried to reach patient |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| | | | | | several hours after but was unable to at this time. |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 915813-1 | 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 adminsitered 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 |
| SWOLLEN TONGUE | PFIZER\BIONTECH | 60-64 years | Life Threatening | 916414-1 | approximately 30 minutes after receiving vaccination i began to develop tongue and lip swelling as well as difficulty swallowing and breathing , i then proceeded immediately to the nearest er |
| SYNCOPE | MODERNA | 18-29 years | Life Threatening | 912930-1 | "Patient was monitored for >15 minutes after vaccination. Patient told a nurse that her knees felt weak. Patient then fainted and was laying on the floor when i arrived. Patient reported she felt like she was ""floating"" and she did not want to ""fall"". She was also nausea and wanted to vomit and did not end up vomiting anything up. Patient fainted several more times. Her BP was around 143/80 and unsure about the pulse. Patient then become unresponsive for 20-30 seconds." |
| SYNCOPE | MODERNA | 50-59 years | Death | 918518-1 | syncopal episode - arrested - CPR - death |
| SYNCOPE | MODERNA | 65+ years | Death | 940602-1 | "Patient received vaccine on 1/8/2021. On 1/9/2021 I checked on patient via phone for symptoms or problems and he reported none but mild soreness at injection site. On 1/10/2021 family friend called me to tell me that patient had expired at about 8:00 pm. Patient reportedly complained of ""pain"" unspecific and collapsed at home. Hospital reportedly told family that it appeared to be a ""heart attack""." |
| SYNCOPE | MODERNA | 65+ years | Death | 943362-1 | Pt collapsed at home approx 5:30 pm and died |
| SYNCOPE | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| SYNCOPE | PFIZER\BIONTECH | 18-29 years | Life Threatening | 941576-1 | Employee was awaken at 5:30 am on 1/13/2021 by chills and a feverish feeling. She then became nauseous and faint. She passed out and was noted by her mother who is a RN to have a seizure. She remained out for several minutes and then aroused. She has remained groggy the rest of today but has improved. She has a history of non-epileptic seizures since she was 14 and has been on medications for this. Employee stated she has not has any seizure activity in over a year. She did not see medical attention due to recovering quickly from this. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| SYNCOPE | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| SYNCOPE | PFIZER\BIONTECH | 50-59 years | Death | 921768-1 | Vaccine received at about 0900 on 01/04/2021 at her place of work, Medical Center, where she was employed as a housekeeper. About one hour after receiving the vaccine she experienced a hot flash, nausea, and feeling like she was going to pass out after she had bent down. Later at about 1500 hours she appeared tired and lethargic, then a short time later, at about 1600 hours, upon arrival to a friends home she complained of feeling hot and having difficulty breathing. She then collapsed, then when medics arrived, she was still breathing slowly then went into cardiac arrest and was unable to be revived. |
| SYNCOPE | PFIZER\BIONTECH | 65+ years | Death | 941215-1 | Actual event and cause of death were unknown; This is a spontaneous report from a non-contactable consumer. A 90-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 06Jan2021 at single dose for COVID Prevention. The relevant medical history included aortic valve replacement from Nov2019. Concomitant medications were not reported. The consumer stated that she was taking the reporting responsibilities to report that a friend of hers, informed that the patient passed away on Friday, and had received the COVID vaccine on Wednesday. The consumer stated that it was unknown to her at this time, if the friend had called to complete a report herself, regarding the incident. Their conversation was very brief. The patient was 90 years old, and it was her friend's mother that was the patient. Actual event and cause of death were unknown. The patient had her vaccine on Wednesday 06Jan2021, and then the patient collapsed in front of the reporter at Friday night on 08Jan2021 and passed away that same day. The autopsy was unknown. The outcome of the event was fatal. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Actual event and cause of death were unknown |
| TACHYCARDIA | MODERNA | 40-49 years | Life Threatening | 914821-1 | Rash, Itching and swelling of left arm. Progressed to tachycardia in the 150's, hypertension 200/114. Tingling of lips, dizziness |
| TACHYCARDIA | MODERNA | 50-59 years | Life Threatening | 920787-1 | 2 minutes after vaccine was administered, noticed swelling back of tongue, progressed to posterior 2/3 of tongue, tachycardia, elevated BP. Progressive angioedema involving larynx, cough, shortness of breath. No wheezing. Physical exam did do show any obvious swelling. O2 sat decreased to 80, 1st epinephrine IM administered, 50mg benadryl IV and Famotidine administered. some improvement in symptoms. In 30mins, reoccurrence of angioedema and second epinephrine vaccine administered. Monitored for 2 hours without reoccurrence of symptoms and discharged from ER. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| TACHYCARDIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakIness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| TACHYCARDIA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 904334-1 | Angioedema, hives, tachycardia, shortness of breath |
| TACHYCARDIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| TACHYCARDIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |
| TACHYCARDIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| TACHYCARDIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| TACHYCARDIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| TACHYCARDIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936011-1 | Anaphylaxis within 5 minutes of dose given. Tachycardia 130-140s, hot body temperature, trouble swallowing, lightheaded/dizzy, ekg changes, feeling like I was going to pass out even when in bed. IV fluids, benedryl, soul-medrol, famotadine and IM epi given. |
| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908003-1 | ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA |
| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 913854-1 | anxiety, tachycardia, flushing, diaphoresis, HTN, SOB |
| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| TACHYCARDIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 905544-1 | Pt expressed feeling tachycardic, jittery, shaky, site edema, shortness of breath and dizziness. Pt received epipen 0.3 mg IM injection x1 dose and benadryl PO, responded favorably and transported to ED for follow up care. |
| TACHYCARDIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| TACHYCARDIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| TACHYCARDIA | PFIZER\BIONTECH | 65+ years | Life Threatening | 928378-1 | Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| TACHYPHRENIA | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |

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| TACHYPNOEA | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| TACHYPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| TACHYPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| TACHYPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |

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| TACHYPNOEA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| TASTE DISORDER | MODERNA | 30-39 years | Life Threatening | 928240-1 | Less than 5 minutes after vaccine, nose drained, weird taste in mouth, tingle in nose and on tongue. Throat and tongue swelled, couldn?t speak. Dizzy and slurring speech. Was taken to ambulance outside, BP was 191/101. Given beta blockade. Confused and dizzy for next 2 hours in ER. Evaluated for stroke and given a 12-lead ECG. Given benedryl and prednisone. Felt better after 3 1/2 hours. Continued steroids for 5 days and had to take benedryl every 4 hours for 3 days or swelling/itching/bad taste in mouth would return. Sore arm on day 3. |
| THIRST | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| THROAT CLEARING | MODERNA | 40-49 years | Life Threatening | 932614-1 | Throat closing Pruritic throat and tongue Tingling lips and tongue Throat clearing Hoarse voice |
| THROAT CLEARING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |

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| THROAT CLEARING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 939190-1 | Started to feel lightheaded, weak, faint like I was going to pass out, heart rate increased, confusion, trouble speaking, brought to the ED, throat started to swell and started having thick spit and clearing my throat excessively. Diagnosed as anaphylaxis. |
| THROAT CLEARING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 916790-1 | Flushing, sweating, increased heart rate proceeded to feel difficulty swallowing and clearing my throat. I was taken to the ER. The symptoms progressed to feeling dizziness, difficulty speaking, and chest pressure with increased SBP/DBP. General nausea and feeling very unwell. |
| THROAT IRRITATION | MODERNA | 30-39 years | Life Threatening | 915199-1 | Itchy throat, red eyes after 30 minutes. EMS on site gave IV Benadryl, epi pen shot and took to ER for monitoring. Vitals were good so he was discharged. |
| THROAT IRRITATION | MODERNA | 30-39 years | Life Threatening | 924524-1 | PATIENT REPORTING ITCHING AT 30 MINUTES POST INJECTION. AT 1.5 HOURS POST INJECTION PATIENT REPORTED ITCHY THROAT AND NUMBESS 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 EPINEPHERINE, WAS RELEASED FROM HOSPITAL ROUGHLY 15-16 HOURS AFTER GOING TO ER. |
| THROAT IRRITATION | MODERNA | 40-49 years | Life Threatening | 932614-1 | Throat closing Pruritic throat and tongue Tingling lips and tongue Throat clearing Hoarse voice |
| THROAT IRRITATION | PFIZER\BIONTECH | 18-29 years | Life Threatening | 935180-1 | Scratchy throat, dizziness and eventually feeling like her throat is closing in |
| THROAT IRRITATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903324-1 | 40 min after injection my throat and tongue started to feel weird and tight, pharmacy at my work hospital gave me 25 mg Benadryl and 650mg Tylenol. At about 1 hr 45 min after injection my throat got to the point of so swollen and itchy I couldn?t swallow. I went to nearest emergency room hospital they administered decadron orally, Pepcid P.O., and Toradol via IM. |
| THROAT IRRITATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909147-1 | Approximately 2 minutes after injection, felt flushed and tingly. This subsided, but developed a cough. Felt fine enough to leave the vaccination area after being monitored for 15 minutes. Cough continued, and developed a scratchy throat that eventually led to swelling of the throat at approximately 30-35 mins post administration. Sought care in the ED, where I was tachycardic and hypertensive. Received IV Benadryl, steroids, and IV fluids. Discharged home, but symptoms returned around 2pm. Sought care in a different ED, where I remained hypertensive and tachycardic. Received additional IV fluids, IV Benadryl and steroids. Eventually was treated with IM epinephrine after my heart rate was decreased to about 100bpm with IV metoprolol. |
| THROAT IRRITATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 914103-1 | 10 minutes after receiving vaccination, a significant increase in HR was noted, along with a tingling sensation through out body. Also, scratchy throat was noted. Alert by patient made to staff at vaccination site. Sweating noted and shortness of breath at that time. Epi pen given via L thigh IM. PIV started and benadryl and solumedrol given. Relief of symptoms noted very shortly after Epi administration. Taken to ER for 4 hour observation. Sent home after 4 hours and given prednisone to be taken at home, 50mg daily for 4 days. No further adverse symptoms noted. |
| THROAT IRRITATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |

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| THROAT IRRITATION | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| THROAT IRRITATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| THROAT IRRITATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |
| THROAT IRRITATION | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |

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| THROAT IRRITATION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 913238-1 | Pt. developed tachycardia, hypertension and felt weak with decreased verbal responsiveness, alert but lethargic. She complained of dry throat, took a sip of water then began persistent coughing and wretching also C/O itching of her throat. She denied difficulty breathing, there were no cutaneous signs of edema, tongue enlargement, etc. |
| THROAT IRRITATION | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| THROAT TIGHTNESS | MODERNA | 30-39 years | Life Threatening | 916859-1 | The vaccine was received at 1:12 PM, and I felt fairly fine, aside from injection site pain and some tingling in my left arm until I had sudden significant elevation of heart rate, with shortness of breath, and throat swelling/tightening at approximately 1:26PM. I cold compress was applied to my forehead and I was put in a reclining position & then received Epinephrine at 1:28PM. EMS (present onsite) arrived for transport at 1:31PM. 4L of oxygen was applied after O2 sat of 89% noted by EMS. Blood pressure was elevated to >200/100 initially by EMS. Symptoms improved quickly following epinephrine, with some residual feelings of very mild throat fullness, and I developed chills which improved over time. I was transported to emergency department where I was evaluated (symptoms mostly resolved at that time, but ED physician noted a little swelling remaining in my uvula), then IV Benadryl and Decadron were given. Later acetaminophen was also given for headache that developed during my ED stay. My vitals were monitored throughout and observation occurred until I was discharged at approximately 5:00PM, as symptoms had not recurred. |
| THROAT TIGHTNESS | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| THROAT TIGHTNESS | MODERNA | 40-49 years | Life Threatening | 932614-1 | Throat closing Pruritic throat and tongue Tingling lips and tongue Throat clearing Hoarse voice |
| THROAT TIGHTNESS | MODERNA | 50-59 years | Life Threatening | 914392-1 | 12/30 9:30 am developed angioedema. Swelling of face, lips, tight throat. Also had bright red rash over body trunk and arms. Both palms were red, hot and painful. |
| THROAT TIGHTNESS | MODERNA | 50-59 years | Life Threatening | 929418-1 | Swelling of lips & tongue, tightening of throat. Quivering of arms & legs. Tightening of chest. Dizzyness lightheaded. |
| THROAT TIGHTNESS | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

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| THROAT TIGHTNESS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 916742-1 | Within 15 minutes of receiving the vaccine I began to get very itchy and blotchy with a hoarse voice. The paramedic downstairs walked me up to the emergency room. I was treated with medications to help calm the itching and burning feeling. By 940 I went anaphylactic and had several doses of epinephrine to help calm this. I continued to have rashes and the feeling of my throat closing. I was transferred by ambulance to medical center in the ICU. I am still here and have had two toner anaphylactic episodes since. I have been on a epi drip, steroids, famotidine, Ativan and Benadryl. I also had a picc like placed. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 18-29 years | Life Threatening | 935180-1 | Scratchy throat, dizziness and eventually feeling like her throat is closing in |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903324-1 | 40 min after injection my throat and tongue started to feel weird and tight, pharmacy at my work hospital gave me 25 mg Benadryl and 650mg Tylenol. At about 1 hr 45 min after injection my throat got to the point of so swollen and itchy I couldn?t swallow. I went to nearest emergency room hospital they administered decadron orally, Pepcid P.O., and Toradol via IM. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 909278-1 | Rapid onset of hoarseness, throat tingling and tightness |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 936026-1 | Trouble swallowing, tingling around the mouth within 5 minutes of vaccine administration. IV started with 25mg Benadryl within 5 minutes of symptom onset. Transfer to ER at 1430. Symptoms unresolved, hr - 120, bp 140/100, O2 sats 100, resp: 21 Additional 25mg Benadryl, 125mg solumedrol, 1ml Ativan given IV at 1435. Symptoms began to resolve, patient discharged at 1600 to home with instructions to return if needed. Patient returned to ER Sunday January 10 at 1300 complaining of throat tightness. Patient was seen by doctor, no acute distress and airway issues seen. Patient elected to stay for 50mg benadryl and 40mg prednisone PO. Patient was discharged to home with script for 40mg prednisone q day for 3 days. Patient feels any remaining allergic symptoms have resolved. |

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| THROAT TIGHTNESS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 903132-1 | 40 year female received Pfizer-BioNTech COVID-19 Vaccine today Patient reported prior h/o severe allergic reaction to influenza vaccine with eggs preservative. She has received flu vaccine w/o egg w/o problem. Due to her prior history of severe allergic reaction/ anaphylaxis to another vaccine, in this case flu vaccine with eggs, we should proceed with caution. She was told we could defer vaccination until more information becomes available. She opted to proceed with receiving Pfizer-BioNTech COVID-19 Vaccine and be observed for 30 minute observation period. Patient developed throat tightening approximately 20 minutes after vaccination. She received EpiPen within 1 minute of symptoms and was sent to ER immediately in wheelchair by nursing staff. Patient was evaluated in ED and was hemodynamically stable. She was given IV benadryl and was stable throughout observation |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908003-1 | ANAPHLACTIC REACTION, SOB, CHEST PRESSURE, TIGHTNESS IN THROAT, TACHYCARDIA |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 910035-1 | right after the vaccine she felt light headed felt better in observation after about 7 minutes employee c/o heart racing,Chest pressure, feeling light headed, throat scratchy and tight. allergy to MRI contrast dye only - Gadolinium. Has had lots of vaccines in the past without problems. Taken to ED via W/C was talking all the way not SOB admitted to ED. 12-28 States she was admitted to the hospital overnight for anaphalaxis on a second trip to ED. She will not be able to get her second dose of the vaccine. this should be entered into the VAERS reporting system. She is till using the benedryl. |

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| THROAT TIGHTNESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938829-1 | First Day after the injection I had a headache and nausea the entire day into the next day. The second day I still had the headache and the nausea. I work overnights. When I awoke in the afternoon, my throat was closing up. It was hard to swallow and I struggled to breath. I immediately drank liquid Benadryl and called my doctor in the morning. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 939914-1 | 2230 feeling of unease, body aches, site arm tingling, general mild aches 0220 awoke from sleep choking, having difficulty breathing, felt very SOB, worse with exertion or trying to speak, great difficulty swallowing and speaking even in brief words. Took 50mg of Benadryl PO and went to the ED, about a 15 minute car ride. Had tingling and numbness of the tongue and back of throat by arrival but still able to breath with focus. Exertion of just walking into the ED greatly increased the SOB. Was triaged, Benadryl starting to help, was able to speak a little better, 3-4 words without too much SOB caused. Was walked to a room, SOB milder with that exertion. Seen by Dr. Given IV Sol-u-Medrol and 50mg Benadryl. Was observed on cardiac monitor/Q15VS for a few hours and discharged home around 5:30. Given Rx of Prednisone 20mg -3tabs x2 days, 2tabs x5 days all once a days and told to take 50mg of Benadryl Q4H for the next 24 hours at least and to return prn. I did need to stay on Benadryl, as the Sol-u-Medrol wore off some of the swelling in thr throat did return but not severe, Benadryl did help, along with taking my Asthmnex I already had. I also continued my normal HS antihistamines. I had SOB on exertion, progressively better from the 6th-10th with it mostly resolved to yesterday. Body aches have continued but also progressively better. Yeasterday1/12/21 the Rx of prednisone was completed and I did have some mild swelling /tingling in the throat/face/mouth return in the evening, took Benadryl 50mg again and inhaler used. I have an appointment today to seek further care at my primary doctor's office. Asthmnax used again this morning as well, only mild tightness in the throat currently with mild body aches this whole time. |

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| THROAT TIGHTNESS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| THROAT TIGHTNESS | PFIZER\BIONTECH | 60-64 years | Life Threatening | 904504-1 | Throat closure (angioedema/anaphylaxis) requiring ambulance transport to Hospital emergency room and stay IV infusion of Benedryl, solumedrol, and Pepcid with excellent results. Observed twelve hours, then discharged. |
| THROMBOCYTOPENIA | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| THROMBOCYTOPENIA | MODERNA | 40-49 years | Life Threatening | 933935-1 | Sever thrombocytopenia (platelet count 2,000) 8 days following Moderna COVID vaccine. Clinically suspicious for ITP. |
| THROMBOCYTOPENIA | PFIZER\BIONTECH | Unknown | Death | 940950-1 | thrombopenia; pulmonary embolism; neutropenia fever; This is a spontaneous report from a Pfizer-sponsored program . A contactable consumer reported for a patient that received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA 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. The patient experienced thrombopenia, pulmonary embolism and neutropenia fever on an unspecified date. The clinical outcome of thrombopenia, pulmonary embolism and neutropenia fever was fatal. The patient died on an unspecified date. It was unknown if an autopsy was performed. The batch/lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up.; Reported Cause(s) of Death: thrombopenia; pulmonary embolism; neutropenia fever |
| THROMBOSIS | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |

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| THROMBOTIC STROKE | MODERNA | 50-59 years | Life Threatening | 919546-1 | 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) |
| TONGUE DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903324-1 | 40 min after injection my throat and tongue started to feel weird and tight, pharmacy at my work hospital gave me 25 mg Benadryl and 650mg Tylenol. At about 1 hr 45 min after injection my throat got to the point of so swollen and itchy I couldn?t swallow. I went to nearest emergency room hospital they administered decadron orally, Pepcid P.O., and Toradol via IM. |
| TONGUE DISCOMFORT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903592-1 | 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/lightheartedness, cough, voice changes. |
| TONGUE DRY | PFIZER\BIONTECH | 18-29 years | Life Threatening | 915464-1 | 10 minutes after receiving vaccine, patient reported numbness across upper lip which progressed to her tongue. Felt tingling and dryness of tongue and swelling. No difficulty breathing or swallowing, no chest pain, no wheezing, no rash, no itching. Taken to ED and given methylprednisolone 125mg IV, diphenhydramine 50mg IV, famotidine 20mg PO. Patient improved and monitored x 4 hours with resolution of symptoms. Prescribed prednisone 50mg po x 4 days. |
| TONGUE PRURITUS | MODERNA | 40-49 years | Life Threatening | 907075-1 | Patient experienced bronchospasm with coughing and tongue itching approximately 10 minutes after the injection. |
| TONGUE PRURITUS | MODERNA | 40-49 years | Life Threatening | 932614-1 | Throat closing Pruritic throat and tongue Tingling lips and tongue Throat clearing Hoarse voice |
| TONGUE PRURITUS | MODERNA | 65+ years | Life Threatening | 924657-1 | 5 minutes after injection, my feet and palms itched and I was lightheaded but I tried to shake it off and it faded over the next 10 minutes. I did report it and stayed longer and was ok. Then i went straight home and layed down because i did not sleep well night before (was on call ) i awoke 1 hour post injection dry heaving, very nauseated, mild headache, achy, itchy over different parts of my body and weak. Sat up and my face was getting itchier, lips started to swell, tongue started to swell and itch, throat felt like someone was strangling me, had trouble swallowing and trouble breathing. took 2 benadryls immediately and went out into cold air, thought about calling 911 but got better in 10-15 minutes. never have had a reaction like this in my life. have had hives though in the past. If I would have had an epi pen I would have used it (never have had an epi pen) I was frightened but the benadryl worked and I slept due to the benadryl for 5 hours, when I woke up the benadryl wore off and it started again. took more benadryl, and it improved. before bedtime, the benadryl wore off and I had a hard time swallowing my night time meds like my throat was swollen. Took 2 more benadryls, today I am weak and nauseated and ate very little and feel like my face is still red and itchy. I told my sister and she said she is allergic to PEG which i later noted was in the vaccine. i am very disappointed that I had this reaction- I have desparately wanted this vaccine as a medical worker with a lot of covid patients- I onlu hopr this one shot will protect me enough because it is clear to me that i cannot take this vaccine again. |

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| TONGUE PRURITUS | PFIZER\BIONTECH | 30-39 years | Life Threatening | 938868-1 | -0715 vaccine administered. -0735 started to feel dizzy/off and right side of tongue felt like it was mildly swelling and itchy. -0735 asked to have blood pressure taken as know when I am having anaphylaxis my blood pressure escalates. -0740 took blood pressure and it was 141/86 in right arm. Normal is 110s/60s-70s. No anxiety feelings. -0740 throat started to have increased mucous production. Had the tickle and tightness in throat. Asked and received 25mg Benadryl with cup of water. -0742 started clearing throat frequently and slight cough. Knew it was anaphylaxis and told the team I need to go to the ER. Asked for additional 25mg Benadryl. Also took 20mg Famotidine and 2 puffs Albuterol inhaler--this is my prescribed anaphylaxis routine. Had Epipens on standby. -0743 put on O2 saturation monitor and watched O2 drop into 90-92 range. Asked for epipen on standby as I know when I need to start it. Didn't want to take that when I knew I was about to get it in the ER and knowing self hadn't progressed that far. Felt chest tightness and shortness of breath. Voice started becoming hoarse. -0800 EMS arrived (delay as team didn't know if they were supposed to call 911 or a Code--they chose EMS even though in hospital). Then staff at COVID vaccine clinic kept emphasizing need to go in ambulance while EMS and self fought to go through hospital (much quicker route). Finally cleared to go through hospital to ER. To get some air via breathing in had to sit up leaning forward. Voice completely hoarse by this time. -About 0817 arrived to ER bay. At this time, frequently coughing and cough started to sound stridorous. Difficulty getting breaths in. Had chest pain near heart. Greeted by MD, 2 RNS, and technician. -0819 received IM epinephrine. Attached to 5 lead EKG monitoring and O2 monitoring. Blood pressure done again. Higher than previous. -About 0821 had working IV (previous two attempts failed as veins were constricting). Given IV Solumderol. Started bolus of 1L Normal Saline. -Not sure how long after by cough subsided, increased mucous production subsided, as well as hoarseness decreased. -Held for observation for 2hours (would be longer if not resolved). - Discharged around 1015. At this time, hoarseness almost all gone. Minimal throat clearing. Cough resolved. -Prescribed epipen inhalers (mine expired) and Prednisone. Prednisone is PRN for mild breathing difficulties if it starts again tomorrow 1/13/21. -At 1400 took 50mg Benadryl and 20mg Famotidine as previously prescribed for anaphylaxis maintenance. Will continue this as previously prescribed every 6hours until symptoms stay resolved. -Made follow up appointment with Primary Care Physician per protocol |
| TONGUE PRURITUS | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| TOXICOLOGIC TEST | MODERNA | 65+ years | Death | 934539-1 | Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021 |

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| TRANSCUTANEOUS PACING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| TREMOR | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

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| TREMOR | MODERNA | 50-59 years | Life Threatening | 926787-1 | 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. |
| TREMOR | MODERNA | 50-59 years | Life Threatening | 929418-1 | Swelling of lips & tongue, tightening of throat. Quivering of arms & legs. Tightening of chest. Dizzyness lightheaded. |
| TREMOR | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ----------RN 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 ----------RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |

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| TREMOR | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |
| TREMOR | PFIZER\BIONTECH | 40-49 years | Life Threatening | 932420-1 | I am not sure if related on not. This event was 13 days after my COVID-19 1/2 immunization. Otherwise, I am a very healthy physician, normal BMI, I have also been tested 5-6 times negative for COVID. I do get exposed in my job, but wear proper PPE. Viral infection in FEB that was like COVID-19 sx, I did AB test as soon as it was available, and negative. ---The Event: Monday morning (1/4/21), after getting out of shower, I was talking to my husband (who is MD)and started having BROCA's aphasia sx (could not get words out coherently), then fell into bed and started right wrist and right foot posturing. This lasted 10 min. I have non-memory of it, but my MD husband witnessed it. After 10 minutes, I was back to normal, except shaky and some word finding difficulties. After 30 min, totally back to normal. |
| TREMOR | PFIZER\BIONTECH | 50-59 years | Life Threatening | 905544-1 | Pt expressed feeling tachycardic, jittery, shaky, site edema, shortness of breath and dizziness. Pt received epipen 0.3 mg IM injection x1 dose and benadryl PO, responded favorably and transported to ED for follow up care. |
| TREMOR | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| TREMOR | PFIZER\BIONTECH | 60-64 years | Death | 942085-1 | No adverse effects from vaccination seen on 1/2/21. On 1/6/21 resident was seen by Dr and her baclofen pump was refilled with 20 ml Baclofen 4,000mcg/ml. ITB Rate increased by 6% to 455.5 mcg/day simple continuous rate over 3 days. On 1/8/21 at 0615 resident was shaking, lower extremities mottled, Sa02 70%, pulse 45. Oxygen started at 2 L/m per NC. At 0715 her primary physician was notified as well as her daughter. Oxygen increased to 4 L/min, sats at 83%. SOA noted, reported all over pain. At 0850 when they attempted to reposition the resident, she was not responsive. Licensed nurse assessed her and no heartbeat heard or pulse found. |
| TROPONIN | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| TROPONIN | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| TROPONIN I NORMAL | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |
| TROPONIN INCREASED | MODERNA | 18-29 years | Life Threatening | 917835-1 | 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 |
| TROPONIN INCREASED | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| TROPONIN INCREASED | MODERNA | 65+ years | Life Threatening | 924201-1 | 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 |
| TROPONIN INCREASED | PFIZER\BIONTECH | 18-29 years | Life Threatening | 937932-1 | 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. |
| TROPONIN INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 909130-1 | Acute NSTEMI with symptom onset 4 days after vaccination |

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| TROPONIN INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 914798-1 | 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. |
| TROPONIN NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| TROPONIN NORMAL | PFIZER\BIONTECH | 40-49 years | Life Threatening | 914730-1 | 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. |
| TROPONIN T INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 919087-1 | 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). |
| TROPONIN T INCREASED | PFIZER\BIONTECH | 60-64 years | Life Threatening | 931417-1 | "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." |
| TROPONIN T NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| ULTRASOUND JOINT | PFIZER\BIONTECH | 50-59 years | Life Threatening | 934676-1 | Chills Hip pain |
| UNRESPONSIVE TO STIMULI | MODERNA | 18-29 years | Death | 936805-1 | Patient received the vaccine on 12/22/20 without complication. It was reported today that the patient was found unresponsive and subsequently expired at home on 1/11/21. |

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| UNRESPONSIVE TO STIMULI | MODERNA | 18-29 years | Life Threatening | 912930-1 | "Patient was monitored for >15 minutes after vaccination. Patient told a nurse that her knees felt weak. Patient then fainted and was laying on the floor when i arrived. Patient reported she felt like she was ""floating"" and she did not want to ""fall"". She was also nausea and wanted to vomit and did not end up vomiting anything up. Patient fainted several more times. Her BP was around 143/80 and unsure about the pulse. Patient then become unresponsive for 20-30 seconds." |
| UNRESPONSIVE TO STIMULI | MODERNA | 60-64 years | Death | 918065-1 | 1/1/2020: Residents was found unresponsive. Pronounced deceased at 6:02pm |
| UNRESPONSIVE TO STIMULI | MODERNA | 60-64 years | Life Threatening | 934156-1 | 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. |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 909095-1 | on 12/24/2020 the resident was sleepy and stayed in bed most of the shift. He stated he was doing okay but requested pain medication for his legs at 250PM. At 255AM on 12/25/2020 the resident was observed in bed lying still, pale, eyes half open and foam coming from mouth and unresponsive. He was not breathing and with no pulse |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 921572-1 | Resident had body aches, a low O2 sat and had chills starting on 12/30/20. He had stated that they had slightly improved. On 1/1/21 he sustained a fall with a diagnosis of a displaced hip fracture. On 1/2/21 during the NOC shift his O2 sat dropped again. He later went unresponsive and passed away. |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 924664-1 | At approximately, 1855, I was alerted by caregiver, resident was not responding. Per caregiver, she was doing her rounds and found resident in bed, unresponsive, mouth open, observed gurgling noises and tongue hanging out of mouth. This primary caregiver observed resident at baseline and ambulating after dinner at approximately, 1800 less than an hour prior to incident. This PCG called 911 for EMS and gave report of incident. Resident was taken to Medical Center Emergency Department. At ER, CT scan and X-ray was performed. Per report from ER RN, CT scan and x-ray revealed an intracranial aneurysm and fluid in the lungs. Per RN, resident was still unresponsive and was admitted to Medical Center for observation and comfort measures. This primary caregiver reported to RN, resident recently received the first dose of COVID-19 vaccine on 1/2/21. Primary caregiver received a call from Castle RN at 0700, resident expired at 0615. |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 927260-1 | 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. |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 934050-1 | Staff reported that patient was found Friday morning (Jan 8) sitting at a table with his head tilted forward and unresponsive to verbal or physical stimuli. Staff lowered patient to floor and started CPR. EMS was called and continued CPR at scene, however they were not able to revive patient. Patient was pronounced dead at the scene. Staff written statements following the death of patient show that he had a fall about 1 hr. prior. It is unknown if this fall contributed to patient's death. An autopsy has been requested. |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 934539-1 | Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021 |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 935350-1 | Patient was found unresponsive at home with SpO2 20% 1/2/2021 |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 936043-1 | RESIDENT 1ST DOSE OF MODERNA VACCINE ADMINISTERED ON 01/04/2021 AT 8:30PM, RESIDENT FOUND UNRESPONSIVE ON 01/05/2021. |
| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 941607-1 | The patient passed away today, 1/13/2021. She was a hospice patient. She showed no adverse effects after receiving the vaccine on 1/12/2021. This morning she woke up as normal and during her morning shower she had a bowel movement, went limp and was non-responsive. The patient passed away at 7:45 am. |

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| UNRESPONSIVE TO STIMULI | MODERNA | 65+ years | Death | 944732-1 | Resident found unresponsive and without pulse at 05:45am. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 18-29 years | Death | 943397-1 | On day due for 2nd dose, Patient was found unresponsive at work in the hospital. Patient pupils were fixed and dilated. Full ACLS was initiated for 55 minutes with multiple rounds of bicarb, calcium chloride, magnesium, and epinephrine. Patient was intubated. Patient continued into V. Fib arrest and was shocked multiple times. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 50-59 years | Death | 944595-1 | 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 |

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| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 60-64 years | Death | 942085-1 | No adverse effects from vaccination seen on 1/2/21. On 1/6/21 resident was seen by Dr and her baclofen pump was refilled with 20 ml Baclofen 4,000mcg/ml. ITB Rate increased by 6% to 455.5 mcg/day simple continuous rate over 3 days. On 1/8/21 at 0615 resident was shaking, lower extremities mottled, Sa02 70%, pulse 45. Oxygen started at 2 L/m per NC. At 0715 her primary physician was notified as well as her daughter. Oxygen increased to 4 L/min, sats at 83%. SOA noted, reported all over pain. At 0850 when they attempted to reposition the resident, she was not responsive. Licensed nurse assessed her and no heartbeat heard or pulse found. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 915682-1 | Resident received vaccine per pharmacy at the facility at 5 pm. Approximately 6:45 resident found unresponsive and EMS contacted. Upon EMS arrival at facility, resident went into cardiac arrest, code initiated by EMS and transported to hospital. Resident expired at hospital at approximately 8 pm |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 918388-1 | Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 924456-1 | Patient did not display any obvious signs or symptoms; the vaccination was administered at approximately 10:00 AM and the patient continued throughout her day without any complaints or signs of adverse reaction. Patient was helped to bed by the nursing assistant estimated at around 9:00 PM. The facility received notification from the lab around 11:00 PM that the patient's COVID-19 specimen collection from Sunday, 1/3/21, detected COVID-19. When the nursing staff went to the room to check on the resident and prepare her to move to a COVID-19 care area the patient was found unresponsive, no movement, no chest rises, noted regurgitated small amount of food to mouth left side, lying on left side. Pupils non reactive. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 926269-1 | "Pt last seen at 1200 by nurse for ID band check. No visible signs of distress noted. Pt states ""I just want to be left alone"". 1230 nurse was called to pt room. Pt was noted unresponsive, no pulse and respiration noted. CPR started immediately, at 1239 first shock given. 1245 EMT took over, at 1319 EMT called time of death" |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 936738-1 | loss of consciousness Narrative: Patient received COVID-19 vaccine dose #1 on 1/6/21 w/o complications. Per 1/6/21- 1/9/21 nursing notes, patient did not experience any injection site reactions, denied pain or tenderness at injection site, no dizziness, no n/v, remained afebrile. Around 1/9/21 @1810, patient became acutely nonresponsive after being helped to the edge of bed. Per nurses, he was previously awake/alert, talking and asymptomatic. Patient is DNR/DNI but facility rapid response emergency team called d/t patient's sudden change of condition. Emergency team helped patient into lying position. Per 1/9/21 ICU emergency team note, patient appeared comfortable w/ no palpable radial pulse and had minimal shallow agonal breathing. Pulse ox 94%, HR in 60s per machine. BP unmeasurably low by BP cuffx3. Resident passed at 18:20 pm. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 942040-1 | little bit of a reaction light headed after 5 minutes. vitals were low, so observed for 30 minutes after being light headed. Patient was found unresponsive and pronounced dead later that day. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 945241-1 | 71yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, VS taken at 10am, B/P 99/60, O2 sats, 95% (trach w/O2). At 11:30am, Patient showed no s/sx of distress, A&Ox3. At 11:50am, a nurse went to perform a COVID test and assessment (the facility is experiencing an outbreak), and found the patient unresponsive on the bathroom floor. CPR was immediately started; no shock advised per AED; 12:15pm EMS arrived and took over. At 12:38pm, EMT called time of death. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Death | 945253-1 | "83yo female resident who died after receiving Pfizer BioNTech vaccine. On 1/14/2021, the patient reportedly got up in the middle of the night with c/o feeling ""blah"", restlessness, and nausea. VS normal, no other s/sx. At 4:15am, the patient was asked to go back to bed, assisted by a nurse and GNA. At 6am, GNA was going to do morning VS and found the patient unresponsive, no pulse, no respirations. GNA notified the nurse. At 6:03am, CPR started and EMS called. At 6:15am, EMS arrived and took over. At or around 6:30am, EMT called time of death" |

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| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Life Threatening | 924658-1 | Severe Hypotension, Redness, Warmth and sensitivity all over skin surfaces, lack of responsiveness, low oxygen saturation. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Life Threatening | 928378-1 | Congestion Shortness of breath Tachycardia Transferred out 911. Per hospital, patient had a myocardial infarction, is unresponsive, and on hospice services. |
| UNRESPONSIVE TO STIMULI | PFIZER\BIONTECH | 65+ years | Life Threatening | 934745-1 | Resident had seizure like activity followed by a vagel response with large bowel movement. Resident then began to show signs of blood clot to left lower extremity. No pedal pulse, area on leg warm to touch. Left lower leg now cold to touch, stiff, purple and white in color. No other signs of modeling, body warm to touch, no fever noted. Respirations and pulse increased with low oxygen levels. Resident not responding to stimuli. |
| URINARY TRACT INFECTION | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| URINE ANALYSIS | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923015-1 | Rapid heart rate, shakiness, headache, rash, scratchy throat, raspy voice, dizziness, extreme weakness |
| URINE ANALYSIS | PFIZER\BIONTECH | 65+ years | Death | 919108-1 | Fever, Malaise |
| URINE ANALYSIS ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 945247-1 | Has underlying dementia and often with difficulty eating. 1 week after immunization she developed a stroke with left sided weakness and difficulty swallowing. Comfort measures instituted. Not sure if this is related to the vaccine, but thought I should report |
| URINE ANALYSIS NORMAL | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| URINE LEUKOCYTE ESTERASE POSITIVE | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| UROSEPSIS | PFIZER\BIONTECH | 60-64 years | Life Threatening | 929689-1 | 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. |
| URTICARIA | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| URTICARIA | MODERNA | 18-29 years | Life Threatening | 913445-1 | 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. |
| URTICARIA | MODERNA | 18-29 years | Life Threatening | 930079-1 | Swelling of throat and tongue, anaphylaxis, hives, redness, swelling |
| URTICARIA | MODERNA | 30-39 years | Life Threatening | 927223-1 | Nausea, hives, anaphylactic shock, throat swelling, hypotension, headache, dizziness, weakness . The symptoms returned at 1:25pm the best day as well. I? ve now had two anaphylactic reactions |

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| URTICARIA | MODERNA | 30-39 years | Life Threatening | 935478-1 | right after vaccine was given i got a head to toe hot flush. i thought it was just anxiety. within 2 minutes i had expolsive diarrhea, felt dizzy. looked in the mirror and saw my neck and chest covered in red rash and hives. felt hot flush again. dr came in noticed hives all over both my arms as well. felt sob and if someone was holding my neck with their hand. given benadryl and epi taken to local er. |
| URTICARIA | MODERNA | 40-49 years | Life Threatening | 933142-1 | Pain at site of injection, eyes, throat, face swelling. Unclear thinking, hoarse speech, headache, hives, swelling. Intervention taken immediately. Ongoing 11 days: SOB, headaches, nose bleeds, coughing, blood sugars triple, hair falling out, major swelling, dizziness. |
| URTICARIA | PFIZER\BIONTECH | 18-29 years | Life Threatening | 904334-1 | Angioedema, hives, tachycardia, shortness of breath |
| URTICARIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| URTICARIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| URTICARIA | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| URTICARIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 928209-1 | Swollen lips/tongue, shortness of breath, cough, hives, nausea, headache Epi shot, Benadryl, Pepcid, prednisone |
| URTICARIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 930508-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| URTICARIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 936666-1 | Anaphylactic reaction; Flushed; Diaphoretic; redness and rash; hives on chest; Tachycardia; shortness of breath; Chest tightness; Dizziness; Headache; This is a spontaneous report from a contactable nurse, the patient. A 47-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: EL1283), via an unspecified route of administration on 08Jan2021 at 08:49 (at the age of 47-years-old) as a single dose for COVID-19 immunization. There were no known medical history or concomitant medications. The patient previously received the first dose of BNT162B2 on 18Dec2020 (Lot Number: EK5730) for COVID-19 immunization and experienced nausea, headache, and fatigue. On 08Jan2021, about 5-10 minutes after the second dose, the patient experienced anaphylactic reaction, flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness, reported as life-threatening. She reported that these events occurred within less than 10 minutes of receiving the vaccine. She went to the emergency room and was treated with methylprednisolone (SOLUMEDROL), diphenhydramine hydrochloride (BENADRYL), famotidine (PEPCID), and epinephrine (MANUFACTURER UNKNOWN). She was sent home and prescribed methylprednisolone and epinephrine (EPI-PEN). Later on 08Jan2021, she experienced dizziness and headache, which were consistent. She stated she would most likely take ibuprofen (MOTRIN) as treatment (not specified if taken). The clinical outcomes of the flushed, diaphoretic, redness and rash, hives on chest, tachycardia, shortness of breath, and chest tightness were recovered on 08Jan2021; while the outcomes of the dizziness and headache were not recovered and that of the anaphylaxis was reported as recovering.; 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. |
| URTICARIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |
| URTICARIA | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| USE OF ACCESSORY RESPIRATORY MUSCLES | PFIZER\BIONTECH | 30-39 years | Life Threatening | 935939-1 | Metallic taste in the back of throat between 15-20 minutes post vaccination, noticeable swallowing and throat irritation at 20-25 minutes post vaccination, tongue and lip numbness and throat tightness at 25-30 minutes, dry hacking cough at 30 minutes. Treated in the ED approximately 1 hour post vaccination, at time of arrival in respiratory distress with subcostal retractions, coughing, speaking 1-2 word sentences, with tachycardia and tachypnea. Treated with IM epinephrine, IV solumedrol and IV Benadryl and IV Benadryl with marked improvement in symptoms. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| VACCINATION COMPLICATION | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| VENTRICULAR ARRHYTHMIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weaklness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| VENTRICULAR HYPOKINESIA | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| VENTRICULAR TACHYCARDIA | MODERNA | 60-64 years | Life Threatening | 941834-1 | about 14 hours after vaccination I experienced what appeared to be a severe case of Cytokine storm. I had a moderate case of COVID in May 2020 and had positive IgG AB in August. The symptoms started with heavy shaking chills, lasting 1 1/2 hours , fever and most concerning sustained tachycardia with heart rate of 180' to 200' over hours, which then destabilized into runs of Vtach and complex ventricular dysrythmia, low BP, profound weakIness, head aches and joint and muscle pains ( similar to the experienced COVID symptoms ) |
| VENTRICULAR TACHYCARDIA | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904498-1 | Ventricular tachycardia. Defibrillator paced me out of rhythm. I have had my ICD for 3 years. This is the first abnormal rhythm I have had where it delivered a therapy to abort it. |
| VISION BLURRED | MODERNA | 18-29 years | Life Threatening | 939216-1 | Blurred vision, difficulty breathing (pale skin/blue lips), profuse sweating, muscle fatigue, headache. This lasted about 15 minutes. Until severity went down. Followed by 20 minutes of profuse sweating and headache. I thought I was going to die |
| VISION BLURRED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ---------- ----RN 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 ----- ---------- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ---------- ----------RN |
| VISUAL FIELD DEFECT | PFIZER\BIONTECH | 30-39 years | Life Threatening | 932366-1 | 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. |
| VISUAL IMPAIRMENT | MODERNA | 30-39 years | Life Threatening | 912511-1 | Received vaccine at 1:30 pm yesterday, noted onset of symptoms at 8:45 pm. Numbness and tingling to mouth and bilateral upper and lower extremities, mild vision change, feeling of some swelling to bilateral eyelids. Also swelling to lips. She also did take zinc gluconate 50 mg last night and this morning. Has never taken zinc 50 mg, but has taken zinc as component of multivitamin/pre-natal vitamins. Patient was prescribed Pepcid 20 mg BID, Medrol 4 mg dose pack 21 pill taper until complete. Also given Benadryl 25 mg - 50 mg every 4 - 6 hours for allergy symptoms. And provided with an Epi-Pen for home. |
| VISUAL IMPAIRMENT | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904260-1 | 12 minutes after injection, I felt flushed and dizzy. They hooked me up to a vital sign monitor which showed my heart increasing to 133 bpm, SaO2 98%. A manual blood pressure check was 168/110. My heart felt like it was pounding, I was hot and sweating. After 10 minutes or so, I felt increasingly dizzy and my vision started fading. VS still showed tachycardia and hypertension. It became difficult to swallow and my tongue was feeling fat. A Rapid Response Team was alerted, they started and IV, and took me to the Emergency Department. I became very cold and shaky. My hands and feet became a little mottled. They gave me 50 mg IV benedryl, 20 mg IV pepcid, a dose of solumedrol, and IM epinephrine 0.3mg, and 1 Liter of fluid. My symptoms resolved and I was discharged home a couple hours later. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| VITAL FUNCTIONS ABNORMAL | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| VITAL FUNCTIONS ABNORMAL | PFIZER\BIONTECH | 65+ years | Death | 942040-1 | little bit of a reaction light headed after 5 minutes. vitals were low, so observed for 30 minutes after being light headed. Patient was found unresponsive and pronounced dead later that day. |
| VOMITING | MODERNA | 18-29 years | Life Threatening | 909481-1 | O had the vaccine at 9 am this morning waited 15 mins after vaccine before leaving while driving I had a pounding heart rate and hot I rolled down the window felt better. 1 hour later while at home.e started with nausea diarrhea rapid heart rate headed to medical office while in care tongue swelled I called 911 pulled over when the ambulance got to me my throat swelled and I had hives on chest they took me emergency while there I had sever pounding heart and vomiting treated with meds sent home with medication and benadryl |
| VOMITING | MODERNA | 30-39 years | Life Threatening | 929391-1 | 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. |
| VOMITING | PFIZER\BIONTECH | 18-29 years | Life Threatening | 917712-1 | Anaphylaxis. The COVID shot was given, no reaction then. After 7 minutes, congestion, severe cough, vomiting phlegm, feeling like throat closing started happening. Code was called, Benadryl was immediately given intramuscular in the left arm, blood pressure, pulse ox was taken, and then was taken to the Emergency Department. In the ED, I was given prednisone, one EPI, anti-nausea medication all through I.V. and many more medications given to me via I.V. that I don't sincerely remember. I was under observation for 4 hours. I was discharged after all symptoms dissipated and was given Prednisone 20 MG (3 tabs a day) to take to help my lungs. Management followed up almost immediately, everyone from the moment I had the anaphylactic reaction was quick and prepared. |
| VOMITING | PFIZER\BIONTECH | 18-29 years | Life Threatening | 936715-1 | 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. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| VOMITING | PFIZER\BIONTECH | 50-59 years | Death | 934968-1 | he passed away; not responsive; mind just seemed like it was racing; body was hyper dried; Restless; not feeling well; ate a bit but not much; kind of pale; Agitated; Vomiting; trouble in breathing; This is a spontaneous report from a contactable consumer (brother of the patient). A 54-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 04Jan2021 (at the age of 54-years-old) as a single dose for COVID-19 immunization. Medical history included diabetes and high blood pressure. Concomitant medications included metformin (MANUFACTURER UNKNOWN) taken for diabetes, glimepiride (MANUFACTURER UNKNOWN) taken for diabetes, lisinopril (MANUFACTURER UNKNOWN), and amlodipine (MANUFACTURER UNKNOWN). The patient experienced not feeling well, ate a bit but not much, kind of pale, vomiting, trouble in breathing, and agitated on 04Jan2021; body was hyper dried and restless on 05Jan2021; mind just seemed like it was racing on 06Jan2021; and not responsive and he passed away on 06Jan2021 at 10:15 (reported as: around 10:15 AM). The clinical course was reported as follows: The patient received the vaccine on 04Jan2021, after which he started not feeling well. He went right home and went to bed. He woke up and ate a bit but not much and then was kind of pale. The patient then started to vomit, which continued throughout the night. He was having trouble in breathing. Emergency services were called, and they took his vitals and said that everything was okay, but he was very agitated; reported as not like this prior to the vaccine. The patient was taken to urgent care where they gave him an unspecified steroid shot and unspecified medication for vomiting. The patient was told he was probably having a reaction to the vaccine, but he was just dried up. The patient continued to vomit throughout the day and then he was very agitated again and would fall asleep for may be 15-20 minutes. When the patient woke up, he was very restless (reported as: his body was just amped up and could not calm down). The patient calmed down just a little bit in the evening. When the patient was awoken at 6:00 AM in the morning, he was still agitated. The patient stated that he couldn't breathe, and his mind was racing. The patient's other brother went to him and he was not responsive, and he passed away on 06Jan2021 around 10:15 AM. It was reported that none of the symptoms occurred until the patient received the vaccine. Therapeutic measures were taken as a result of vomiting as aforementioned. The clinical outcome of all of the events was unknown; not responsive was not recovered, the patient died on 06Jan2021. The cause of death was unknown (reported as: not known by reporter). An autopsy was not performed. The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: not responsive and he passed away |
| VOMITING | PFIZER\BIONTECH | 65+ years | Death | 915562-1 | pt received vaccine at covid clinic on 12/30 at approximately 3:30, pt vomited 4 minutes after receiving shot--dark brown vomit, staff reported pt had vomited night before. Per staff report pt became short of breath between 6 and 7 pm that night. Pt had DNR on file. pt passed away at approximately 10pm. Staff reported pt was 14 + days post covid |
| VOMITING | PFIZER\BIONTECH | 65+ years | Death | 928062-1 | 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. |
| VOMITING | PFIZER\BIONTECH | 65+ years | Death | 938974-1 | Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| VOMITING | PFIZER\BIONTECH | 65+ years | Death | 942290-1 | Resident received 1st dose on 1/4/2021. On 1/6/2021 resident having SOB, increased weakness with O2 sats at 91% RA. On 8th resident sustained a fall, O2 sats 88-92, dizzy, weakness. Rapid COVID test performed with negative results. Evening of 8th resident was lethargic and diaphoretic with fever of 99.9. Resident transferred to ER, on 5lt of oxygen. Resident returned from the ER on 1/9/2021 with new diagnosis of Leukemia and orders for hospice. Continued with fever, crackles and N/V and loss of appetite from the 9th and 10th of January. Resident expired at 820am on 1/11/2021. |
| VOMITING | PFIZER\BIONTECH | 65+ years | Death | 943266-1 | 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 - anuerism lead to death approximately 14 hours after initial symptoms. |
| VOMITING | PFIZER\BIONTECH | 65+ years | Death | 944998-1 | On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired. |
| WEIGHT BEARING DIFFICULTY | PFIZER\BIONTECH | 30-39 years | Life Threatening | 904029-1 | 15 minutes after getting the vaccine began itching that quickly developed into rash/hives to face, neck, chest, abdomen. At 20 minutes post vaccine developed severe leg weakness with lightheadedness, chest tightness, and SOB. 22 minutes out collapsed to the floor unable to bear weight due to leg weakness and had severe cramping and tingling in legs, still unable to move them. Was rushed to the ER from employee health and arrived approximately 30 minutes post vaccine administration at that time there was significant mottling to arms and hands with polar nail beds. Vital signs were stable, no strider. Given Solumedrol, Benadryl, and Pepcid STAT. Rash/hives and SOB improved, but legs weakness/tingling, cramping did not and noted purple feet with cyanotic nail beds and mottling to hands/ arms that would come and go. Rash/hives reappeared much worse 2 horse post meds to face, neck, and upper chest. Was given another series of Solumedrol and Benadryl and admitted to the hospital. I am now 19 hours post vaccine with improved but persistent leg weakness, now able to bear my own weight independently and walk a few steps, but still having legs cramps and intermittent tingling to feet. Color has improved with resolved mottling/cyanosis. I continue to have hives reappear with scheduled Benadryl, Solumedrol, and Pepcid. |
| WEIGHT DECREASED | MODERNA | 65+ years | Death | 941561-1 | Staff walked into resident's room around 10:00am and noted resident's left side of his face was flaccid. Nurse was called and upon assessment resident noted to have an unequal hand grasp with left worse. He was able to talk but was mumbled and hard to understand. Physician, hospice, and family were notified. Resident had a stroke at 10:06 am on 1/8/2020. He lost all ability to use his left side. Resident passed away on 1/11/2020. |
| WHEELCHAIR USER | PFIZER\BIONTECH | 40-49 years | Life Threatening | 903132-1 | 40 year female received Pfizer-BioNTech COVID-19 Vaccine today Patient reported prior h/o severe allergic reaction to influenza vaccine with eggs preservative. She has received flu vaccine w/o egg w/o problem. Due to her prior history of severe allergic reaction/ anaphylaxis to another vaccine, in this case flu vaccine with eggs, we should proceed with caution. She was told we could defer vaccination until more information becomes available. She opted to proceed with receiving Pfizer-BioNTech COVID-19 Vaccine and be observed for 30 minute observation period. Patient developed throat tightening approximately 20 minutes after vaccination. She received EpiPen within 1 minute of symptoms and was sent to ER immediately in wheelchair by nursing staff. Patient was evaluated in ED and was hemodynamically stable. She was given IV benadryl and was stable throughout observation |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| WHEEZING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 915928-1 | 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. ---------- ----RN 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 ----- ---------- RN 12/29/2020 1715 called to check on patient. left voicemail for her to call OH. ???????..? 12/29/2020 1838 left voicemail for patient to call OH. ??????????????????????. 12/30/20 2030 spoke with her. Tuesday 12/29 3pm-4pm dizziness, confusion, sob. Wheezing. Ambulance called. Hospital admitted. Intubated for less than 24 hours. Breathing treatments, epi drip. Now just on steroids and walking around and feeling better. Still admitted at hospital. Hoping discharged tomorrow. ----------RN |
| WHEEZING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 916890-1 | HIVES, SOB, THROAT CLOSING UP, WHEEZING |
| WHEEZING | PFIZER\BIONTECH | 30-39 years | Life Threatening | 934749-1 | 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. |
| WHEEZING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 907042-1 | Received vaccine around 10:40 am, by 10:50 started to feel dizzy, eyes felt full, dry, tingly, swollen, voice became raspy and throat itched. Received 25 mg Benadryl PO at around 10:55. Face, arms, chest and abdomen developed a fine red itchy rash, tongue swollen and itchy, lips tingling, wheezing, blood pressure elevated, pulse thready given 25 mg PO Benadryl, taken to the Emergency Room, symptoms persisted, stomach hurt became nauseated, received IV solumedrol, Pepcid, IV fluids, nebulized albuterol. Sent home once stable after 3 hours, with instruction to take Benadryl every 4-6 hours fir the next 2 days, albuterol as needed, and prednisone for the next 5 days. |
| WHEEZING | PFIZER\BIONTECH | 40-49 years | Life Threatening | 908157-1 | Initially started with nausea around min 5, shortly after then itching on arms. Around min 15 ?lump? sensation in throat. Around min 20 swelling of tongue, worsening feeling in throat, wheezing, itching around mouth. Sent to ER, received IM Epi, IV: Steroids, Benadryl, Zofran, Pepcid, Albuterol inhaler. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| WHEEZING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 903400-1 | "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." |
| WHEEZING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 906988-1 | PT WAS OBSRVED IN HOLDING AREA LEANING FORWARD IN HER CHAIR ABOUT 7 MINUTES AFTER RECIEVING THE VACINE. RN ASSESSED AND NOTED: AUDIBLE WHEEZE, RESP 40/MIN, LIP SWELLING AND PT COMPLAINED OF NAUSEA. PT WAS ESCORTED TO ER IN WHEELCHAIR ACCOMPANIED BY 2 RN'S (2 MINUTE WALK) ONE HOUR LATER - AS REPORTED BY DR (ER) WORKING DIAGNOSIS - ANAPHYLAXIS / STATUS ASTHMATICUS MEDS RECIEVED: SOLUMEDROL 125, DIPHENHYDRAMINE 50MG, FAMOTIDINE 20MG -- ALL IV EPINEPHERINE 0.3MG IM X1 FOLLOWED BY 0.3MG IV X 1 FOLLOWED BY 0.1MG IV X1 PT IS RECIEVING O2 - AND PROGRESSING TO BIPAP |
| WHEEZING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 920994-1 | PATIENT VACCINATED AROUND 9AM. SHE REPORTS SHE FELT WARM/FLUSHING, FAINT AND STOMACH SPASMS WITHIN ABOUT 4-5 MINS. SHE FELT BETTER AND GOT UP TO WALK ABOUT 30 MINS LATER. SYMPTOMS WORSENED AFTER WALKING ~9:45AM: FAINT AGAIN, SEVERE RETCHING, BP196/140 TO 199/164, TROUBLE SWALLOWING, SOB, WHEEZING. AT 9:58AM, EPI PEN 0.3MG ADMINISTERED AND EMS ACTIVATED. SYMPTOMS REPORTED IMPROVED FOLLOWING EPI. EMS ARRIVED 10:05AM. PATIENT REPORTED RECEIVING 2 BAGS OF PEPCID, STEROIDS, AND ZOFRAN AT HOSPITAL. WAS RELEASED BETWEEN 11:30AM-12PM ON 1/4/21, BP 140/90 AND ACUTE SYMPTOMS RESOLVED. FOLLOW UP WITH PATIENT 1/5/21: NO PRIOR HX OF HTN, BP 120/60, NO SOB/ BREATHING DIFFICULTY. C/O SEVERE HEADACHE, LOW TEMP, FATIGUE, MUSCLE ACHES, SORE THROAT. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
|---|---|---|---|---|---|
| WHEEZING | PFIZER\BIONTECH | 50-59 years | Life Threatening | 936612-1 | anaphylaxis; throat tightening; throat tightening/tingling; throat tightening/tingling/soreness; dry wheezy cough a little dizziness; dizziness; tachycardia; Itching; chills; numb R foot; Low grade temp; h/a today; This is a spontaneous report from a contactable Nurse (patient). A 51-years-old female patient (no pregnant) started to receive bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number el3248), via an unspecified route of administration on 06Jan2021 11:00 at the first single dose at left arm for covid-19 immunisation. Medical history included supraventricular tachycardia, adrenal insufficiency, hypothyroidism, attention deficit hyperactivity disorder, hypermobility syndrome, developmental hip. Concomitant medication included hydrocortisone, trazodone, levothyroxine sodium (LEVOTHROID), bupropion hydrochloride (WELLBUTRIN). The patient previously took erythromycin, morphine and experienced drug hypersensitivity. The patient experienced anaphylaxis, throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache on 06Jan2021 11:15. Seriousness criteria reported as life threatening. Taken to ER had IV benadryl, solumedrol, pepcid for anaphylaxis. Placed on O2 and given albuterol nebulizer. Had IV fluid bolus. Now on benadryl and 5 days of prednisone. The patient felt completely fine prior to vaccine. The patient underwent lab tests and procedures which included sars-cov-2 test: negative on 06Jan2021. The outcome of events was recovering. No other vaccine in four weeks; No covid prior vaccination.; Sender's Comments: A possible causal association between administration of BNT162B2 and the onset of anaphylaxis presented as throat tightening/tingling/soreness, dry wheezy cough a little dizziness and tachycardia. Itching, numb R foot, Low grade temp and chills and headache cannot be excluded, considering the plausible temporal relationship and the known adverse event profile of the suspect product. The underlying predisposing condition of drug allergies may put the patient at high risk of anaphylactic reactions. 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. |
| WHITE BLOOD CELL COUNT INCREASED | MODERNA | 18-29 years | Life Threatening | 916710-1 | 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) |
| WHITE BLOOD CELL COUNT INCREASED | MODERNA | 30-39 years | Life Threatening | 916538-1 | "15-20 mins after receiving the vaccine she reported she had difficulty swallowing and difficulty breathing and was ?shaking."" a PA wrote in her note that when she ran in to help, she found the patient to be tachypneic, diaphoretic, warm with some red blotchy patches on face, chest & neck. Able to speak easily c/o trouble breathing & sensation of throat swelling & extremities feeling abnormal. No stridor. No facial edema noted by that clinician. Administered epi-pen 0.3mg - IV started , Benadryl 50mg IVP and solumedrol 125mg IVP. Patient reports she subsequently arched her back and had rigidity of her arms/legs and tremors. Clinic PA reports that while she was there, pt was never hypotensive. Initially hypertensive after epi as expected with some favorable response after 10-15 min Staff there gave her IM epinephrine, IV Solu-Medrol and 50 mg IV Benadryl. EMS was contacted and transported to the emergency room. She arrived at the ER, was monitored for 2 hours, was started on pepcid and benadryl and discharged from the ER. She had a diffuse itchy rash. The following day she again developed recurrence of throat swelling. Went back to a different ER. Developed dyspnea immediately prior to arrival at ER. There was again given solumedrol and benadryl and pepcid and developed muscle rigidity and arched back for 10 minutes. Symptoms of SOB and dyspnea resolved with epinephrine. Was discharged from the ER with prednisone after being monitored for 5 hours. Is continuing to take prednisone and benadryl. Rash is still present but improving with scheduled benadryl. Has new redness at injection site today. Continues to feel some throat swelling but no tightness today. This information was gathered from talking with pt today for a phone appt and also from her medical chart regarding her vaccination visit and two ER visits." |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
|---|---|---|---|---|---|
| WHITE BLOOD CELL COUNT INCREASED | MODERNA | 65+ years | Death | 920368-1 | 12/30/2020 07:02 AM Resident noted to have some redness in face and respiration were fast. Resident vital signs were abnormal except blood pressure. Temp at the time was 102.0 F taken temporal. Resident respirations were 22 labored at times. Pulse is 105 and pulse ox 94% on room air. Resident is made comfortable in bed. Notified triage of change in condition also made triage aware of resident receiving Covid vaccination yesterday morning. Resident appetite and fluid consumption has been poor for few days. 12/30/2020 07:32 AM Received order from agency to administer Acetaminophen 650mg suppos rectally due to resident not wanting to swallow anything including fluids, medications and food. This writer administered medication as NP ordered. Will monitor for effectiveness and adverse effects if any. 12/30/2020 08:41 AM Received new orders to obtain Flu swab, obtain CBC and BMP, and Chest Xray all to be obtained today. Notified family of resident having temperature and vital signs excluding b/p that was abnormal. Family was thankful for call and inierated to nurse that family does not want resident sent to hospital. Did educate family on benefits of Hospice services, but family persistant on continued daily care provided by nursing staff. Requests visits if decline continues. Family assured if resident continues to decline, facility will accomandate resident family to be able to be at bedside when time comes to do so. NP ordered IVF and IV Levaquin on 12/31/20. Family chose at that time to sign for Hospice services and not have resident provided with IVF or IV Antibiotics |
| WHITE BLOOD CELL COUNT INCREASED | MODERNA | 65+ years | Death | 927260-1 | 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. |
| WHITE BLOOD CELL COUNT INCREASED | MODERNA | 65+ years | Life Threatening | 917784-1 | Pt had vaccination at city site. Waitied 15 min after shot and was cleared to go. Reported to wife that he was very thristy, 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. |
| WHITE BLOOD CELL COUNT INCREASED | PFIZER\BIONTECH | 30-39 years | Life Threatening | 917210-1 | 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 (started before doxy) 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). |
| WHITE BLOOD CELL COUNT INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 904436-1 | 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. |
| WHITE BLOOD CELL COUNT INCREASED | PFIZER\BIONTECH | 40-49 years | Life Threatening | 938524-1 | 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 |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| WHITE BLOOD CELL COUNT INCREASED | PFIZER\BIONTECH | 50-59 years | Life Threatening | 923000-1 | 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. |
| WHITE BLOOD CELL COUNT INCREASED | PFIZER\BIONTECH | 65+ years | Life Threatening | 909031-1 | Patient presented with signs and symptoms of sepsis, developing over 12 to 24 hours 6 days after vaccination. was hypotensive and confused (beyond baseline) |
| WHITE BLOOD CELL COUNT NORMAL | MODERNA | 18-29 years | Life Threatening | 932915-1 | Severe thrombocytopenia (plts 3k/uL), oral mucosal bleeding, bruising |
| WHITE BLOOD CELL COUNT NORMAL | MODERNA | 30-39 years | Life Threatening | 919604-1 | 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. á Received PO Benadryl 25mg, IV Benadryl 25mg, Epinephrine 0.3mg x 2, IV Famotidine 20mg, IV Solumedrol 125mg & 60mg, DuoNebs x 3, Racepinephrine x 1. |
| WHITE BLOOD CELL COUNT NORMAL | MODERNA | 40-49 years | Life Threatening | 933935-1 | Sever thrombocytopenia (platelet count 2,000) 8 days following Moderna COVID vaccine. Clinically suspicious for ITP. |
| WHITE BLOOD CELL COUNT NORMAL | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |
| WHITE BLOOD CELL COUNT NORMAL | MODERNA | 65+ years | Life Threatening | 916497-1 | 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 |
| WHITE BLOOD CELL COUNT NORMAL | PFIZER\BIONTECH | 30-39 years | Life Threatening | 903123-1 | About 5 minutes after the vaccine developed chest tightness, increased work of breathing, palpitations and severe dizzyness. Transferred to the ED where i received oxygen, IV benadryl, IV fluids and monitoring. Released after about 4 hours and continue to take benadryl 50 mg PO q 4 hours. Also developed red facial rash (unknown time) Pain at injection site began the morning after the injection. |
| WHITE BLOOD CELL COUNT NORMAL | PFIZER\BIONTECH | 65+ years | Life Threatening | 930894-1 | Low grade Fever, headache needing admission Intracranial hemorrhage with hypertension Medical management for hypertensive emergency Received surgical evacuation admitted in Intensive care, |
| WHITE BLOOD CELLS URINE POSITIVE | MODERNA | 50-59 years | Death | 941811-1 | Resident began having fever on 1/11/21 @0600. VS= T-102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis. |

| Symptoms | Vaccine Manufacturer | Age | Event Category | VAERS ID | Adverse Event Description |
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| WITHDRAWAL OF LIFE SUPPORT | PFIZER\BIONTECH | 50-59 years | Death | 933739-1 | "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." |
| WITHDRAWAL OF LIFE SUPPORT | PFIZER\BIONTECH | 60-64 years | Death | 932898-1 | The patient had an apparent cardiac arrest on 12/23/20 and was admitted to the ICU. He was taken off of life support on 12/30/20. He had known cardiac disease. |
| X-RAY ABNORMAL | MODERNA | 65+ years | Death | 924664-1 | At approximately, 1855, I was alerted by caregiver, resident was not responding. Per caregiver, she was doing her rounds and found resident in bed, unresponsive, mouth open, observed gurgling noises and tongue hanging out of mouth. This primary caregiver observed resident at baseline and ambulating after dinner at approximately, 1800 less than an hour prior to incident. This PCG called 911 for EMS and gave report of incident. Resident was taken to Medical Center Emergency Department. At ER, CT scan and X-ray was performed. Per report from ER RN, CT scan and x-ray revealed an intracranial aneurysm and fluid in the lungs. Per RN, resident was still unresponsive and was admitted to Medical Center for observation and comfort measures. This primary caregiver reported to RN, resident recently received the first dose of COVID-19 vaccine on 1/2/21. Primary caregiver received a call from Castle RN at 0700, resident expired at 0615. |
| X-RAY WITH CONTRAST | MODERNA | 65+ years | Death | 930876-1 | Death |

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

**Notes:**

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

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

Key considerations and limitations of VAERS data:

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

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

Data contains VAERS reports processed as of the previous Friday. The VAERS data in WONDER are updated weekly, yet the VAERS system receives continuous updates including revisions and new reports for preceding time periods. More information. (/wonder/help/vaers.html#Reporting)

Values of Event Category field vary in their availability over time due to changes in the reporting form. The "Emergency Room/Office Visit" value was avaliable only for events reported using the VAERS-1 form, active 07/01/1990 to 06/29/2017. The "Congenital Anomaly/Birth Defect", "Emergency Room", and "Office Visit" values are available only for events reported using the VAERS 2.0 form, active 06/30/2017 to present. These changes must be considered when evaluating count of events for these categories.

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

**Query Date:** Jan 27, 2021 4:17:35 PM

## Suggested Citation:

United States Department of Health and Human Services (DHHS), Public Health Service (PHS), Centers for Disease Control (CDC) / Food and Drug Administration (FDA), Vaccine Adverse Event Reporting System (VAERS) 1990 - Previous Friday, CDC WONDER On-line Database. Accessed at http://wonder.cdc.gov/vaers.html on Jan 27, 2021 4:17:35 PM

## Query Criteria:

| | |
|---|---|
| **Event Category:** | Death; Life Threatening |
| **State / Territory:** | The United States/Territories/Unknown |
| **Vaccine Products:** | COVID19 VACCINE (COVID19) |
| **VAERS ID:** | All |
| **Group By:** | Symptoms; Vaccine Manufacturer; Age; Event Category; VAERS ID |
| **Show Totals:** | False |
| **Show Zero Values:** | Disabled |