

## The Vaccine Adverse Event Reporting System (VAERS) Results

### CoVid19 Vaccination Effects by Month in USA

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Dec., 2020	30-39 years	<a href="#">939050-1</a>	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.	Unknown
MODERNA	Death	Dec., 2020	40-49 years	<a href="#">929764-1</a>	The patient was found deceased at home about 24 hours after immunization. Date of Death:: 12/29/2020; estimated time of death 6:00pm	No current illness for this event.
MODERNA	Death	Dec., 2020	50-59 years	<a href="#">918518-1</a>	syncopal episode - arrested - CPR - death	To be determined
MODERNA	Death	Dec., 2020	65+ years	<a href="#">909095-1</a>	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	End stage renal disease with dependence on renal dialysis, COPD, cirrhosis of the liver, hypokalemia, gout, heart failure, hyperlipidemia, atrial fibrillation.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">910363-1</a>	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.	dementia declining oral intake
MODERNA	Death	Dec., 2020	65+ years	<a href="#">913733-1</a>	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.	No current illness for this event.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">914621-1</a>	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.	None
MODERNA	Death	Dec., 2020	65+ years	<a href="#">915880-1</a>	Patient died within 12 hours of receiving the vaccine.	Refused food for one week prior to death.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">917117-1</a>	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.	Yes
MODERNA	Death	Dec., 2020	65+ years	<a href="#">917790-1</a>	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.	Patient was a resident of a long term care facility and had numerous chronic conditions prior to vaccination.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">917793-1</a>	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.	Diabetes, Thyroid disease

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Dec., 2020	65+ years	<a href="#">920326-1</a>	Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21	G30.1 Alzheimer's disease with late onset (Primary) M19.90 Unspecified osteoarthritis, unspecified site J44.9 Chronic obstructive pulmonary disease, unspecified I95.1 Orthostatic hypotension J45.909 Unspecified asthma, uncomplicated R13.12 Dysphagia, oropharyngeal phase M15.0 Primary generalized (osteo)arthritis M85.80 Other specified disorders of bone density and structure, unspecified site Note: Osteopenia J30.9 Allergic rhinitis, unspecified F41.1 Generalized anxiety disorder M24.511 Contracture, right shoulder M24.512 Contracture, left shoulder M24.521 Contracture, right elbow R29.3 Abnormal posture M17.4 Other bilateral secondary osteoarthritis of knee M25.561 Pain in right knee R26.89 Other abnormalities of gait and mob
MODERNA	Death	Dec., 2020	65+ years	<a href="#">920368-1</a>	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	F03.90 Unspecified dementia without behavioral disturbance E78.5 Hyperlipidemia, unspecified K21.9 Gastro-esophageal reflux disease without esophagitis I10 Essential (primary) hypertension Z74.09 Other reduced mobility M62.81 Muscle weakness (generalized) R13.12 Dysphagia, oropharyngeal phase R26.81 Unsteadiness on feet R27.8 Other lack of coordination R41.841 Cognitive communication deficit R54 Age-related physical debility D53.9 Nutritional anemia, unspecified R29.6 Repeated falls M13.80 Other specified arthritis, unspecified site M25.512 Pain in left shoulder M19.012 Primary osteoarthritis, left shoulder K59.09 Other constipation R26.89 Other abnormalities of gait and mobility R63.8 Other symptoms and signs concerning f
MODERNA	Death	Dec., 2020	65+ years	<a href="#">921572-1</a>	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.	Heart Failure
MODERNA	Death	Dec., 2020	65+ years	<a href="#">922977-1</a>	Fever, RespDepression & COVID positive REMDESIVIR (EUA) 200 mg x1 then 100 mg daily	No current illness for this event.

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MODERNA	Death	Dec., 2020	65+ years	<a href="#">937127-1</a>	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.	Chronic pain
MODERNA	Death	Dec., 2020	65+ years	<a href="#">937152-1</a>	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.	High blood pressure, pain, eye issues
MODERNA	Death	Dec., 2020	65+ years	<a href="#">937186-1</a>	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.	Chronic pain
MODERNA	Death	Dec., 2020	65+ years	<a href="#">947129-1</a>	Resident received Moderna vaccine on 12/23/2020 around 5 pm. At approximately 3:35 am on 12/25/2020, resident had a CVA and died on 1/1/2021 at 3:00 am.	Anemia, cardiac murmur, atrial fibrillation, osteoporosis, dysphagia, hyperlipidemia, muscle weakness, aortic valve stenosis
MODERNA	Death	Dec., 2020	65+ years	<a href="#">953348-1</a>	Patient was living in a nursing home with positive cases when administered. His age and chronic condition was such that he did not have time after the vaccination to avoid exposure or develop immunity.	No current illness for this event.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">956903-1</a>	mi Narrative: patient with asymptomatic covid 19, covid positive 12/10/2020.	No current illness for this event.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">956966-1</a>	hypoxia, secretions,cough, dyspnea Narrative: ALS patient on hospice with ongoing history of aspiration pna, receiving tube feeds. Developed incr in secretions, hypoxeia, temp and with recently noted clogged feeding tube.	No current illness for this event.
MODERNA	Death	Dec., 2020	65+ years	<a href="#">959591-1</a>	Resident has increase weakness and lethargy with abnormal labs. He was transferred to the ER. He was admitted to the hospital and treated for worsening AKI and hypotension.	He was treated for pneumonia and C-Diff at the beginning of December. He had abnormal blood work with elevated BUN and WBC on 12/31 and 1/3/21. Appetite was fluctuating and recently began increase medication for depression. Decrease responsiveness sent to ER on 1/4/2021.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Dec., 2020	Unknown	<a href="#">969648-1</a>	death of unknown cause; Swelling on Right side of the neck and under chin; Warmth on right side of neck and under chin; Redness on right side of neck and under chin; A spontaneous report was received from a healthcare professional concerning an 89-year-old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced events of redness, warmth and swelling on right side of neck and under chin, and death of unknown cause. The patient's medical history included Alzheimer's and chronic obstructive pulmonary disease (COPD). No concomitant medications were reported. On 29 Dec 2020, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (Lot number: Unknown) intramuscularly for prophylaxis of COVID-19 infection. On 30 Dec 2020, the patient experienced the events of redness, warmth and swelling on right side of neck and under chin. There was no indication that the patient was transferred out to hospital, which was unlikely because she was under hospice care. On 01 Jan 2021, the patient died due to an unknown cause of death. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 01 Jan 2020. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: This case concerns a 89-year-old, female subject with a medical history of Alzheimer's and chronic obstructive pulmonary disease (COPD) who experienced redness, warmth and swelling on R side of neck and under chin and expired from an unknown cause. The events of redness, warmth and swelling on R side of neck and under chin occurred 2 days after administration of the first and only dose of the mRNA-1273 vaccine and patient expired 4 days after mRNA-1273 vaccine administration. Lot # of the vaccine was not provided. De-challenge and re-challenge are not applicable. The events of redness, warmth and swelling on R side of neck and under chin are temporarily associated with the administration of the mRNA-1273 and thus, a causal relationship cannot be excluded. Due to limited information, the fatal outcome was considered unrelated to mRNA-1273 administration pending additional information. Fatal outcome is confounded by the patient's underlying condition and advanced age.; Reported Cause(s) of Death: Unknown cause of death	Alzheimer's disease; COPD
MODERNA	Death	Jan., 2021	18-29 years	<a href="#">936805-1</a>	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.	Whiplash injury to neck. Sprain of ligaments of cervical spine
MODERNA	Death	Jan., 2021	30-39 years	<a href="#">965256-1</a>	Found deceased, presumed while exercising	No current illness for this event.
MODERNA	Death	Jan., 2021	40-49 years	<a href="#">950057-1</a>	Patient suffered a cardiac arrest and was unable to give details about her symptoms. Per husband, patient did not complain of any symptoms after vaccine administration. She began seizing without warning which was complicated by cardiac arrest of uncertain etiology	No current illness for this event.
MODERNA	Death	Jan., 2021	40-49 years	<a href="#">961339-1</a>	possibly got it at clinic, possibly who administered shot. Pts. daughter said the pts boyfriend denied any symptoms the whole day but that in the middle of the night the pt passed away.	No current illness for this event.
MODERNA	Death	Jan., 2021	40-49 years	<a href="#">977319-1</a>	Notified by patient's sister on 1/26/2021 that patient died in his sleep on 1/25/2021. She did not know cause of death.	Unknown
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">920815-1</a>	Found deceased in her home, unknown cause, 6 days after vaccine.	unknown
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">928933-1</a>	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	No current illness for this event.



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MODERNA	Death	Jan., 2021	50-59 years	<a href="#">930910-1</a>	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.	None
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">935511-1</a>	Patient received the 1st dose of Moderna and was found deceased in her home the next day.	none known of
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">946293-1</a>	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.	Pulmonary fibrosis on O2
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">950108-1</a>	""Moderna COVID-19 Vaccine EUA"" It has been reported to me that pt. had gone into hospital for a heart catheterization on 1/12/2021. It was found during this procedure that pt. had suffered a MI. She was release to home the following day and passed away at her residence on 1/15/2021."	Pt. stated she was not ill at the time of vaccination.
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">959001-1</a>	Patient woke apx 0200 complaining of nausea to group home staff. Vitals were checked at that time and WNL. Patient went back to bed. When staff went to wake patient apx 0530, he was unresponsive and had no pulse. Chest compressions were started and EMS called.	Unknown
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">964401-1</a>	Pt died 4 days after vaccine, no known reaction to the vaccination	No current illness for this event.
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">965564-1</a>	Cardiac arrest Narrative:	No current illness for this event.
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">966888-1</a>	At 04:30 on 1/22/2021, facility was notified of employee death at home.	No current illness for this event.
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">974960-1</a>	ON 1/14/2021 TYPICAL UTI SYMPTOMS FOR RESIDENT DEVELOPED INCLUDING FEVER AND RIGIDITY. RESIDENT IS NON-VERBAL. IV ANTIBIOTICS WERE STARTED. FREQUENT UTI'S ARE COMMON FOR THIS RESIDENT.	UTI
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">975762-1</a>	Pt deceased	N/A
MODERNA	Death	Jan., 2021	50-59 years	<a href="#">982942-1</a>	per recipient spouse - vaccine recipient became ill during the night of 1/21/21 or early morning of 1/22/21 and was deceased in the morning of 1/22/21.	unknown
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">918065-1</a>	1/1/2020: Residents was found unresponsive. Pronounced deceased at 6:02pm	- covid-19
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">923993-1</a>	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.	No
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">930154-1</a>	Notified today that he passed away. No other details known at this time.	unkown
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">937569-1</a>	patient reported expired 1/7/2021	unknown
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">941743-1</a>	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.	None
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">949523-1</a>	Around 00:50am on 01/15/21, C.N.A. reported that the resident looked different and not responding. Initiated Code Blue and started CPR. 911 arrived and pronounced resident dead at 1:01 am.	None

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MODERNA	Death	Jan., 2021	60-64 years	<a href="#">950073-1</a>	"On 1/15/2021 at 1800, resident noted to be lethargic and shaking, stating ""I don't care."" repeatedly. C/O head and neck pain. T100.6. Given Tylenol with no relief of pain. Order received for Aleve and administered.. Assisted to bed as usual in evening. Monitored during night shift and noted to be resting comfortably/sleeping.. Noted agonal breathing at 4:10 AM 1/16/2021 , T 99.4, Absence of vital signs at 4:15AM 1/16/21 and death pronounced at 4:40AM 1/16/21."	Non-Hodgkin Lymphoma, Rhabdomyolysis, Anemia, Acute Kidney Failure, Chronic Embolism and Thrombosis of Lower Extremity
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">951688-1</a>	Resident expired 1/17/21	11/25/20 Lower mid back abscess 11/4/20 toenail removal
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">952713-1</a>	Weakness, Low O2, death. Positive for COVID on 1/12/21, dies on 1/16/21	No current illness for this event.
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">962995-1</a>	No immediate reaction. Patient-reported deceased four days later on Jan. 19, 2021. As of this date cause of death is unknown to our clinic.	Unknown
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">963610-1</a>	Patient deceased on 01/17/2021	TB DMII Hyperlipidemia GERD CKD Renal Failure
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">969219-1</a>	patient received the Moderna Covid 19 vaccine on 1/23/2021 around 5:45pm wife called management today and reported that he had collapsed and passed away today around noon	reported on profile were hypertension, pain, gout, bladder and urine flow issues
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">972370-1</a>	patient received covid vaccine and had a heart attack the next day and died	No current illness for this event.
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">975421-1</a>	Resident was discovered deceased in his apartment on 1/23/2021. Family had	Patient had reported on 8/8/2019 having arthritis, leg wounds, COPD, asthma, incontinence of bladder. Resident may also have had blood clots in his legs, per his sister.
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">975918-1</a>	death Narrative:	No current illness for this event.
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">979841-1</a>	Pt likely presented to vaccine appt with asymptomatic/early infection of COVID-19, as he presented 2 days post-vaccination and tested positive for COVID-19 on rapid and PCR test. He was hospitalized where he eventually died of complications from COVID-19 while in ICU. Date of death was 1/15/2021.	Evaluated for L flank pain in ED on 1/1/2021, no acute findings on CT. Noted to be in mild CHF, discharged home from local ED.
MODERNA	Death	Jan., 2021	60-64 years	<a href="#">979990-1</a>	sudden cardiac arrest	none
MODERNA	Death	Jan., 2021	65+ years	<a href="#">918487-1</a>	Two days post vaccine patient went into cardiac arrest and passed away.	NSTEMI, Dementia, TIA, COVID-19, HTN, CVA, PVD
MODERNA	Death	Jan., 2021	65+ years	<a href="#">919537-1</a>	Resident exhibited no adverse events during 30 minute monitoring following vaccine administration. Resident found without pulse at 1900.	Resident had suspected vasovagal episode with drop in O2 saturation.

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MODERNA	Death	Jan., 2021	65+ years	<a href="#">921547-1</a>	DEATH ON 1/4/2021, RESIDENT RECIEVED VACCINE ON 1/2/20	CEREBRAL INFARCTION, UNSPECIFIED(I63.9), LONG TERM (CURRENT) USE OF ASPIRIN(Z79.82), VITAMIN DEFICIENCY, UNSPECIFIED(E56.9), ACUTE KIDNEY FAILURE, UNSPECIFIED(N17.9), HYPERKALEMIA(E87.5), ACUTE RESPIRATORY FAILURE, UNSPECIFIED WHETHER WITH HYPOXIA OR HYPERCAPNIA(J96.00), PURE HYPERCHOLESTEROLEMIA, UNSPECIFIED(E78.00), PAIN IN RIGHT FOOT(M79.671), ESSENTIAL (PRIMARY) HYPERTENSION(I10), ACIDOSIS(E87.2), ABNORMAL LEVELS OF OTHER SERUM ENZYMES(R74.8), HYPERLIPIDEMIA, UNSPECIFIED(E78.5), DISORDER OF THYROID, UNSPECIFIED(E07.9), GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS(K21.9), MUSCLE WASTING AND ATROPHY, NOT ELSEWHERE CLASSIFIED, UNSPECIFIED SITE(M62.50), MUSCLE WASTING AND ATROPHY, NOT ELSEWHERE CLASSIFIED, MULTIPLE SITES(M62.59), CO
MODERNA	Death	Jan., 2021	65+ years	<a href="#">924126-1</a>	resident expired 1/1/2021	Low blood pressure requiring medication changes. Sent to ER on 1/1 with low b/p sent back same day, heart failure. Family requests comfort measures only.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">924186-1</a>	Resident expired 1/3/21	Covid positive previous with no s/s poor appetite Chronic wound right leg
MODERNA	Death	Jan., 2021	65+ years	<a href="#">924664-1</a>	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.	none
MODERNA	Death	Jan., 2021	65+ years	<a href="#">925154-1</a>	Deceased	NONE
MODERNA	Death	Jan., 2021	65+ years	<a href="#">926600-1</a>	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.	Diabetes, renal insufficiency

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MODERNA	Death	Jan., 2021	65+ years	<a href="#">926797-1</a>	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.	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
MODERNA	Death	Jan., 2021	65+ years	<a href="#">927260-1</a>	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 where 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.	Digestive Surgery for bowel obstruction
MODERNA	Death	Jan., 2021	65+ years	<a href="#">928513-1</a>	Resident passed away in her sleep	Atrial fibrillation, Anemia, 1st degree AV block, CDK stage 4,
MODERNA	Death	Jan., 2021	65+ years	<a href="#">929997-1</a>	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 and could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair.	none acute
MODERNA	Death	Jan., 2021	65+ years	<a href="#">930487-1</a>	Medical doctor state patient has a acute cardiac attack	na
MODERNA	Death	Jan., 2021	65+ years	<a href="#">930876-1</a>	Death	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">933846-1</a>	"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."	MACULAR DEGENERATION 10 YEARS OR MORE
MODERNA	Death	Jan., 2021	65+ years	<a href="#">934050-1</a>	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.	No Acute Illnesses
MODERNA	Death	Jan., 2021	65+ years	<a href="#">934263-1</a>	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.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">934539-1</a>	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	Cellulitis of left lower limb (12/2020)
MODERNA	Death	Jan., 2021	65+ years	<a href="#">935222-1</a>	Patient was reported to be deceased at home by law enforcement on 1/7/21	No acute illnesses
MODERNA	Death	Jan., 2021	65+ years	<a href="#">935350-1</a>	Patient was found unresponsive at home with SpO2 20% 1/2/2021	Dyspnea, Shortness of breath



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">936043-1</a>	RESIDENT 1ST DOSE OF MODERNA VACCINE ADMINISTERED ON 01/04/2021 AT 8:30PM, RESIDENT FOUND UNRESPONSIVE ON 01/05/2021.	S82.001D Unspecified fracture of right patella, subsequent encounter for closed fracture with routine healing(Primary, Admission), M62.81 Muscle weakness (generalized), R29.3 Abnormal posture, M19.90 Unspecified osteoarthritis, unspecified site, E11.9 Type 2 diabetes mellitus without complications, Z86.73 Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits, E03.9 Hypothyroidism, unspecified, E78.5 Hyperlipidemia, unspecified, F03.90 Unspecified dementia
MODERNA	Death	Jan., 2021	65+ years	<a href="#">937434-1</a>	Pt expired due to possible cardiac arrest. Unsure if this was vaccine related.	None known
MODERNA	Death	Jan., 2021	65+ years	<a href="#">940855-1</a>	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.	Resident was a hospice patient but POA requested that she get the vaccination. Resident was already near end of life and the vaccine may not have had anything to do with her death.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">940866-1</a>	"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."	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">941561-1</a>	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.	Resident was on hospice for Alzheimer's disease.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">941607-1</a>	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.	N/A
MODERNA	Death	Jan., 2021	65+ years	<a href="#">943362-1</a>	Pt collapsed at home approx 5:30 pm and died	none known
MODERNA	Death	Jan., 2021	65+ years	<a href="#">944641-1</a>	Patient died on 1/21-2021	CAD, angina, coronary bypass in 1990's, Cardiac Cath on 12/28/2020
MODERNA	Death	Jan., 2021	65+ years	<a href="#">944732-1</a>	Resident found unresponsive and without pulse at 05:45am.	Covid-19 infection from 12/31-01/10/2021
MODERNA	Death	Jan., 2021	65+ years	<a href="#">947662-1</a>	Accelerated decline in condition with decreased input, decreased responsiveness, somnolence, and death	no acute illnesses
MODERNA	Death	Jan., 2021	65+ years	<a href="#">947841-1</a>	Patient had no immediate effects from the vaccine, but died approximately 8 hours after receiving first dose of vaccine.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">948164-1</a>	Abdominal pain, Headaches, chest pain, loss of appetite, confusion, elevated liver enzymes 1/8-1/15/21	UTI and Sinus infection
MODERNA	Death	Jan., 2021	65+ years	<a href="#">949474-1</a>	Resident had lunch on 01/14/21 and after lunch around 2:00pm, he vomited and stopped breathing. We coded the resident and 911 paramedics came. They pronounced him dead at 2:18pm.	None but he has History of COVID-19 previously when initially admitted to the facility.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">949630-1</a>	This patient has been under hospice care for over 2 years at the nursing home. She has had a steady decline with gradual weight loss. She was totally dependent in her care needs. She received the vaccine on 1/2/2021 as part of the facility vaccination campaign. No adverse events noted initially. On 1/3/2021 at 6:06 pm, she was noted on vital sign checks (done every 4 hours for first 72 hours after vaccination) with BP 64/52 but otherwise asymptomatic. Subsequent BP improved. On 1/4/2021 at 4:45 am, pt found with respiratory rate of 30 with otherwise normal vital signs. Tachypnea persisted, so she received liquid morphine 2.5 mg without improvement. Supplemental oxygen was applied. Tachypnea persisted. She had poor oral intake after that point had persistent tachypnea and worsening hypoxemia despite clear lungs on exam. She remained under hospice care and comfort measures were continued. No blood testing or imaging tests were done. She required increasing amounts of oxygen, became hypotensive, and died peacefully on 1/8/2021 at 7:45 pm.	Redness to left foot about 1 week prior to vaccination that resolved a few days prior
MODERNA	Death	Jan., 2021	65+ years	<a href="#">950979-1</a>	Headache after dose was given at 10:00 a.m Died at after 7:30 pm the same night the dose was given.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">951518-1</a>	"Narrative: Patient with severe aphasia and only able to say ""hey, hey, hey"" or ""uh huh"" or shake his head no as a way to communicate. Patient previously able to ambulate with significant limp and hyperextension of right knee, but mostly wheelchair bound over last several years as he had had a slow and steady decline in overall health and mobility. Patient developed aggressive behavior of shouting ""hey"" and grabbing of groin in 2016. This was worked up with CT scans, labs, referral to urology, neurology, and referrals to psychiatry. The exact etiology of this action was never able to be affirmed, but thought to be more psychiatrically related. It improved significantly with addition of antipsychotics, worsened when antipsychotics were reduced, and improved again with addition of injectable antipsychotic on 12-10-2020. Patient suffered from falls on occasion given his significantly impaired physical mobility. His last documented fall was 8-31-2019. Patient began utilizing wheelchair most of time following that fall. No significant injuries noted in documentation of the falls. In the last 3 months, patient would often refuse medications. He would sometimes indicate that they would cause dizziness, and other times he would simply refuse. We attempted to hide medications in his food/fluid (with wife's blessing) and when he detected this he would occasionally refuse to eat. Patient previously on DOAC. After pharmacy review in 12/2020 it was recommended to discontinue this as no clear indication to continue use. He was high fall risk and would often refuse this medication as well since 10/2020. Noted to be in NSR on EKGs and decision made to discontinue the DOAC. Patient had no evidence of adverse effects noted after vaccination on December 28th. Patient seen by provider on the morning of his death (1/4/2021) with no noticeable significant change in health condition. Temperature 36.8C on January 4th at 19:45. During routine bedtime cares, patient suddenly collapsed and death was pronounced January 4, 2021 at 20:05. Autopsy was requested from next of kin and no autopsy was granted. Symptoms: & DEATH Treatment:"	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">952881-1</a>	Resident was seen by MD on 1/11/2021 due to increasing in edema and shortness of breath. Lasix 40 mg STAT given. New orders to get a STAT CBC, CMP, and BNP. Resident has been dependent on Oxygen since his diagnosis of COVID-19 on 11/23/2020. Labs were abnormal. Continued on the lasix 40 mgs. Resident remained short of breath with exertion and on oxygen. He was assisted to the toilet on 1/15/2021 in the morning where he subsequently passed away.	Edema, Hypokalemia, Hypertensive heart with heart failure
MODERNA	Death	Jan., 2021	65+ years	<a href="#">953129-1</a>	Patient presented to our Emergency Department via EMS in full code status; asystole. Patient expired. Per nursing, husband stated patient awoke this AM and reported pain in back between shoulders and in bilateral shoulders. Patient then went unresponsive and husband called EMS.	none known
MODERNA	Death	Jan., 2021	65+ years	<a href="#">953785-1</a>	Death	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">953858-1</a>	patient started to decline 1/10/2021, patient seen at facility by medical professional - patient deceased 1/13/2021	COVID-19, ARDS, enterocolitis, Sepsis, UTI, Acute renal failure
MODERNA	Death	Jan., 2021	65+ years	<a href="#">954780-1</a>	On 1/13/2021, resident had sudden emesis. Immediately following emesis he was noted without a pulse and pronounced deceased. No acute symptoms noted prior to this episode. Resident does have a significant cardiac history.	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">955425-1</a>	resident had a pressure ulcer to RT hip, was getting treatment on. Was scheduled to have wound debrided and wound vac applied on 1-19-2021. Appetite was poor, not wanting to get out of bed, and decline in alertness. Passed away on 1-16-2021	pressure ulcer
MODERNA	Death	Jan., 2021	65+ years	<a href="#">955959-1</a>	Patient died 1 week after vaccination. According to family was having very rapid decline in status in recent weeks and they did not think related to vaccination.	recently diagnosed with progressive supranuclear palsy
MODERNA	Death	Jan., 2021	65+ years	<a href="#">956994-1</a>	The patient had severe shortness of breath resulting in cardiac arrest on the 5th day after the vaccine. Shortness of breath started 12 hours after injection. On the 5th day, the patient was discovered to also have a rash throughout his body, but it is unknown when this rash started.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">957116-1</a>	Sudden death without warning symptoms 4 days after vaccine. Many medical problems which most likely explain the outcome but spouse feels it is related and it is a new vaccine. Monitor for pattern?	Diabetes, Chronic renal failure on hemodialysis, Atrial fibrillation, Quadriplegia, Thrombocytopenia, Gastroparesis, Vitamin D deficiency, BPH, Neurogenic bladder, distant history of small intestine carcinoid tumor, right cerebral artery aneurysm, Barrett's esophagus, MGUS, Hypertension, obstructive sleep apnea, Pulmonary hypertension, Junctional tachycardia.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">957799-1</a>	Presented to Urgent Care for weakness and confusion, transferred to ED, patient had a cardiac arrest and was unable to be resuscitated	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">958069-1</a>	Started with cough, mild shortness of breath and feeling terrible in evening of 1/19.	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">958228-1</a>	Patient has end stage renal disease and rapidly worsening dementia, family could no longer care for him at home, and he was admitted for 14-day quarantine prior to admission to inpatient hospice. Received vaccine on 1/12 without apparent adverse reactions. Patient started refusing oral intake on 1/16, and CMP on 1/17 showed hypernatremia 165 (new issue). His BUN 138 CREAT 6.93 K 5.2 were his baseline. He was found to be deceased on 1/18 at 11:18 pm.	none other than chronic conditions as listed under item 12.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">958565-1</a>	Clients wife reported on 1/18/2021, that her husband died unexpectedly the day after receiving the COVID 19 vaccine. I called and spoke with her. She stated that the client had started experienced some tightness in his chest the evening of 1/11/2021. She stated that it was normal for him to have the tightness in his chest if he got stressed. She stated that she found him on the garage floor on 1/12/2021 at 2120. He was taken by ambulance to the hospital. She stated that the hospital told her that his COPD had caused him to go into arrhythmia.	lung infection treated with antibiotics a couple of weeks ago
MODERNA	Death	Jan., 2021	65+ years	<a href="#">958745-1</a>	Resident was noted to have increase weakness on 1/15/2021. Resident was warm to touch with low grade fever of 99.3 F. Resident was up propelling self in w/c on 1/16/2021 he was pleasant, accepted medications and ate lunch. He was found slumped over in his w/c not responding and vital signs absent.	Hx of TBI and schizophrenia with worsening behaviors over the past few months including refusing care including meals and medications and striking out with care. Resident had a fall on 1/14/2021. Resident received treatment for a UTI with Keflex for 7 days starting 12/6/2020.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">958935-1</a>	Sudden Death within 24 hours of vaccine	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">958971-1</a>	Hemorrhagic Stroke, Right Basal Ganglion	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">959167-1</a>	Patient received COVID 19 vaccine 01/14/2021. Patient died in his sleep 01/16/2021.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">959272-1</a>	Patient died 4 days after immunization. Probably unrelated to immunization, as patient has been in poor health and was receiving hospice services. I have no details related to his illness or symptoms. Daughter is the HIPAA/emergency contact and will have all the information needed.	uncertain illness, however, patient was on Hospice.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">959356-1</a>	Pt passed away the day after the vaccine was given.	n/a
MODERNA	Death	Jan., 2021	65+ years	<a href="#">959568-1</a>	Patient received her first dose of the Moderna COVID-19 Vaccination on Saturday January 16th 2021 at approximately 12pm. She completed all necessary screening forms and was deemed to be at low risk for serious allergic reactions. She tolerated the vaccination well, and no complications or immediate adverse events occurred. She was observed for a full 15 mins per CDPHE/CDC guidelines and left the Clinic in stable condition after her observation period was complete. On the morning of Tuesday, January 19th, 2021, the patient was found unconscious and unresponsive by her husband. She was transferred by Ambulance to Hospital shortly thereafter. She was diagnosed with a brain bleed that was determined to be inoperable. She was transferred to other Hospital for higher level care. She was seen by neurosurgery and diagnosed with a ruptured aneurysm. She was treated in the ICU for 24 hours, at which point her team determined that the severity of her brain bleed would not respond to treatment. Supportive cares were withdrawn on Wednesday Jan 20th, and she passed away shortly thereafter.	None disclosed
MODERNA	Death	Jan., 2021	65+ years	<a href="#">960752-1</a>	Extreme Fatigue	No
MODERNA	Death	Jan., 2021	65+ years	<a href="#">961845-1</a>	Narrative:	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">962318-1</a>	"Called to schedule second vaccine and daughter reports that he died on 01/19/2021 with ""COVID"""	unknown



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">962940-1</a>	Pt received second dose of COVID vaccine on 01/20/2021 at 1430. At 1600 Pt developed a wet productive cough with coarse crackles. Pt ate dinner at 5 pm cough persisted. At 18:30 the nurse went to Pt's room to give him his medications. Pt still had a cough, denied shortness of breath. Pt was in a good mood and joking with staff. Pt asked to be shaved. At 19:45 Pt was sitting in the lounge and a CNA noticed that Pt was pale/white in color and clammy. O2 Sat was 85%. Respirations were labored. Pt was placed on 4 L of O2. Increased to 5 L via face mask and O2 sat was 89-90%. Ambulance was called at unknown time. Pt arrived at Medical Center at 2120 and was pronounced dead at 2127.	Unknown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">963016-1</a>	unknown. Event occurred after leaving vaccination site	denied ill symptpoms at time of vaccination
MODERNA	Death	Jan., 2021	65+ years	<a href="#">963163-1</a>	Narrative:	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">963167-1</a>	Narrative: Symptoms: & Cardiac Arrest; Death Treatment: EPINEPHRINE	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">963235-1</a>	Patient diagnosed with COVID on January 9, 2021 after being exposed to family member that was under quarantine in the same household. Admitted to the hospital and was discharged on January 14, 2021 with home hospice. Patient passed away on January 18, 2021	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">963269-1</a>	Patient passed away on 01/18/2021	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">963388-1</a>	Patient died unexpectedly 5 days after receiving vaccine (1/10/2021).	No known illnesses at time of vaccination.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">964956-1</a>	Patient began with a wet productive cough with crackles heard at 4 pm, at 5pm he went to dinner and still had cough, at 630 was administered his medications and he had cough, no shortness of breath and was in a good mood. By 7:45pm CNA found him in the lounge with labored breathing, O2 was at 85%. They gave him 4 liters O2, then a facemask at 5 liters which brought his O2 into the 90's. At that time called ambulance, patient arrived to ER around 9:20pm and passed away shortly after. Cardiac Arrest	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">965571-1</a>	1/13/21 pt came into clinic for vaccine. Had difficulty remembering age. Called me Mon. 1/18/21 stating she was sick. When asked what her sx were, she stated fatigue. She was well the night of the shot, Thur. and Fri. but became tired on Sat. and Sun. I went through other sx with her such as h/a, fever, n/v, muscle aches, weakness and she said she experienced none of those. I questioned her about eating and drinking and she said she ate and drank water. She seemed fine so I told her to call her doctor if she was worse or the fatigue persisted or call 911. She agreed. Two staff from clinic called her Mon. and Tues, (1/18 and 1/19). On Tues. she may have had slurred speech. She was found deceased on	Unknown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">965807-1</a>	began itching within 24 hours, within 5 days couldn't move on her own, by 6th day was having respiratory issues, by day 7 unresponsive, by day 8 dead	nose bleeds
MODERNA	Death	Jan., 2021	65+ years	<a href="#">965831-1</a>	Patient received her first dose of vaccine on Monday, January 18th. Two days later on Wednesday, January 20th, she retired to bed early. Later that night when her husband went to bed, he found her in the bed deceased. No other details of the event are know.	Emergency Room Visit 1/7/2021 complaining of shortness of breath and swelling. She and elevated D-dimer with no evidence of a Pulmonary Embolus. Persantine Myoview showed small mild area of reversible ischemia to the inferolateral apical wall. Mild symptoms of vague discomfort in her chest, but nothing that has been reproducible with activity. She is chronically short of breath with limited activities because of problems with her hip

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">965860-1</a>	Patient had increased SOB while at home. EMS was called. Patient coded in the squad	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">965922-1</a>	We were alerted that the patient died at home.	pt denied
MODERNA	Death	Jan., 2021	65+ years	<a href="#">966359-1</a>	Headache, pain in the injection site, threw up. A few hours later she died.	Diabetes, hyper tension
MODERNA	Death	Jan., 2021	65+ years	<a href="#">966844-1</a>	"Patient is reported to have died at home, the day after his COVID test. Family member states that he did good the afternoon and evening after his COVID-19 injection, but that he started not feeling good the next day. The patient ""was having palpitations"". The family tried to convince him to go to the Emergency Room, but he refused. Patient died at home."	DM II
MODERNA	Death	Jan., 2021	65+ years	<a href="#">967506-1</a>	Died within 5 days of receiving vaccine. Exact cause and day unknown.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">967747-1</a>	Pt passed away evening of 1/13 - unknown reason currently Narrative:	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">968195-1</a>	My dad got the Moderna Vaccine on Tuesday, January 12, 2021 in his left arm at the Mall injection site for the Health Department. He was told that the side effects could mean his arm hurting, tiredness, headache, and even a low grade fever. Additionally, the site informed us both (as I was with him to get the injection) that this was all normal and not to seek medical attention unless these symptoms last longer than 72 hours. That evening, my dad was experiencing all of those symptoms, and went to bed at 7pm. A little after 10am on Wednesday, January 13, 2021, when he awoke, my dad went to the bathroom vomiting. This was where he collapsed and went into cardiac arrest. Fire/Rescue was dispatched about 10:30am after my mom started CPR. County Fire Rescue EMTs and Paramedics continued CPR and other attempts at reviving him all the way to Hospital Emergency Department. He was pronounced dead at 12:14pm on Wednesday, January 13, 2021. We have no doubt my dad, following the instructions of the injection facility, thought he was just experiencing the side effects of the vaccine. He had no chance. Had this injection been done in the RIGHT arm, perhaps he could have recognized the arm numbness being that of an impending heart attack. We really miss Dad. He served this country with distinction for over 50 years, and we believe his country failed him.	None known
MODERNA	Death	Jan., 2021	65+ years	<a href="#">968707-1</a>	My mother died 12 hours after the vaccine was administered	unknown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">969363-1</a>	Patient obtained initial dose of Moderna vaccine on Thursday, Jan 14. No adverse effects reported during initial 15 minute post vaccine waiting period. Saturday morning (Jan 16), patient developed severe cough, labored breathing, and fever. Additionally patient mental status changed suddenly, became non-communicative (unable to speak, but would scream if she was touched). O2 status was irregular, dropping to 78. Sunday morning, EMT and then hospice was hospice called. Monday morning, after hospice emergency kit was initiated, patient passed away.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">969636-1</a>	Found dead at home slumped on the floor; Loss of appetite; Body aches; Feverish; A spontaneous report was received from a physician, concerning a 65-years-old male patient, who received Moderna's COVID-19 Vaccine and experienced feverish, body aches, loss of appetite, and death. The patient's medical history, as provided by the reporter, included diabetes, hypertension, Hashimoto's, smoker, cataracts, atrioventricular block, occasional premature ventricular contractions, and hypertriglyceridemia. Concomitant medications reported included metformin, glimepiride, lisinopril, atorvastatin, aspirin, methimazole, propranolol, and cilostazol. On 05 Jan 2021, prior to the onset of events, the patient received the first of two planned doses of mRNA-1273 (lot number 037k20a) for COVID-19 infection prophylaxis. On an unknown date in Jan 2021, some time after receiving the vaccine, the patient was feeling feverish with body aches and loss of appetite. On 09 Jan 2021 at approximately 21:30, the patient was found dead at home slumped on the floor. According to the paramedics, the patient was dead longer than when his wife found him, and no resuscitation was performed. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the events, feverish, body aches, loss of appetite, was considered resolved. The patient died on 09 Jan 2021. The cause of death was not reported. The reporter assessed the event, death, as not related to Moderna's COVID-19 Vaccine. The reporter did not provide assessment for the events, feverish and body aches, in relation to Moderna's COVID-19 Vaccine.; Reporter's Comments: This case concerns a 65 year old male patient with medical history of diabetes, hypertension, Hashimoto's, smoker, cataracts, atrioventricular block, occasional premature ventricular contractions, and hypertriglyceridemia, who experienced the serious unexpected event of death, non-serious unexpected event of loss of appetite, and non-serious expected events of fever and body pain. The event of death occurred 5 days after the first dose of mRNA-1273. The events of fever, body pain and loss of appetite occurred an unspecified period of time after the first dose of mRNA-1273. Very limited information regarding these events has been provided at this time. Based on temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. Definitive causal association is confounded by age and medical history of diabetes, hypertension, Hashimoto's, smoker, cataracts, atrioventricular block, occasional premature ventricular contractions, and hypertriglyceridemia.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">969699-1</a>	Patient died.	Metastatic duodenal adenocarcinoma , bladder cancer, undergoing chemotherapy with success. Dual chamber pacemaker
MODERNA	Death	Jan., 2021	65+ years	<a href="#">970412-1</a>	Fever Feeling tired short of breath all night and morning after the vaccine My grandma had to be intubated and then passed away to a heart distress we think it was the vaccine because she was fine even with dialysis. When she got the vaccine it took hours and her health conditions changed.	High blood pressure. Dialysis
MODERNA	Death	Jan., 2021	65+ years	<a href="#">970495-1</a>	Patient expired three days after receiving first dose of Moderna COVID-19 vaccine. The death certificate states cause of death is sudden cardiac arrest.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">970930-1</a>	Pt developed COVID-19 infection, symptoms starting 7 days after first dose was given. Patient was admitted to hospital on 1/21 after falling (secondary to weakness) and striking head on toilet. Patient expired due to respiratory complications of COVID on 1/25.	-

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">971176-1</a>	"Pt. woke up the next morning after vaccination and ""didn't feel well"", described by wife as fatigue, no energy. At approximately 2 PM, he vomited. His wife checked on him at 4:20 PM and he wasn't breathing sitting in his chair. EMS squad was called but when they arrived he was asystole and mottling present. Did not start CPR since he was already gone too long. Pronounced by coroner on scene."	last doctor visit on 10/27/2020 and no illness at that time, routine follow up
MODERNA	Death	Jan., 2021	65+ years	<a href="#">971813-1</a>	patient received vaccine on 1/20/21, later that night husband found her slumped in chair, called EMS and patient was taken to Hospital where she died on 1/21/2021	A fib, type 2 diabetes, HTN, seizure disorder, CHF
MODERNA	Death	Jan., 2021	65+ years	<a href="#">972113-1</a>	Resident became lethargic and reports of blood coming from resident's nose and mouth on the morning of 1/13/21. Resident went out to ER for eval, and came back to facility with dx of pneumonia and recommendations for resident to be placed on hospice. Resident deceased on 1/14/21. Unknown if vaccine related, but with timeline of events I was advised to report this per medical director of facility, as well as Pharmacy who administered the vaccine.	Resident was Dx with pneumonia the day after vaccine.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">972148-1</a>	VACCINATION WAS RECEIVED THE MORNING OF 1/5/2021- IN THE EVENING OF THAT DAY RESIDENT SUSTAINED A FALL AND WAS TRANSPORTED TO FACILITY FOR TREATMENT. IT IS NOT UNUSUAL THAT RESIDENT WAS SELF TRANSFERRING AND HAS A HISTORY OF FALLS.	RESIDENT SUSTAINED A FALL ON 1/5/2021.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">972394-1</a>	Died about 24 hours later	Unknown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">972610-1</a>	"Patient was tested positive for Covid-19 on 12/9/20. Patient received Covid Vaccine on 1/21/21. Patient was observing for 15 minutes in treatment room by Nursing staff. Patient denied any signs/symptoms adverse effect: headache, dizziness & weakness, difficulty breathing, muscle pain, chills, nausea and vomiting, and fever . Patient seated on treatment table appeared to be relaxed, respiration even and unlabored. Health teaching provided. Patient educated to report any changes in condition to staff immediately. Patient verbalized understanding and able to verbalize signs and symptoms and adverse effects to be aware of related vaccine. On 1/22/21: patient was seen by medical provider for ""altered behavior"". Per medical provider's documentation: ""Patient was fallen on 1/2/21 and was sent out to outside hospital on 1/4/21. CT head: no intracranial abnormality, age-related changes. Patient had labs (B12, RPR, folate) were within normal limit"". We did MMSE today: 22/30 score ""mild dementia"" On 1/23/20: ""Patient was inside his cell. He was walking towards cell door to obtain his breakfast, when custody witnessed him collapse and activated the alarm. Nursing staff arrived at cell front at 06:34 am and found the patient pulseless and unresponsive, and CPR was immediately initiated. AED was attached at 06:35 am and no shock advised. AMR then arrived and patient did not have ROSC, and was pronounced dead at 06:54 am.""	Fall on 1/2/2021
MODERNA	Death	Jan., 2021	65+ years	<a href="#">972890-1</a>	On the evening of 10JAN2021, patient experienced a low grade fever, decreased oxygen saturation of 38%, heart rate of 124, confusion. Patient received oxygen via face mask, morphine and ativan. By 11JAN2021, patient was no longer verbal, able to eat or communicate and was kept on comfort measure only. On the morning of 17JAN2021, the patient passed away.	COVID-19 positive on November 19, 2020 and didn't test negative until December 26, 2020
MODERNA	Death	Jan., 2021	65+ years	<a href="#">973814-1</a>	DEATH Narrative:	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">973820-1</a>	Narrative: Symptoms: & DEATH DUE TO COVID 01/13/21 Treatment:	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">974033-1</a>	Resident deceased on 1/26 at 445am. No signs ahead of time.	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">974443-1</a>	Patient received Moderna COVID vaccine on 12/30/2020 at a Pharmacy clinic where he was a resident. Nurses at the facility reported that he was responsive and showed no signs of any adverse effects until 1/2/2021 when he was observed slightly unresponsive and staring at the ceiling and trembling. He had a fever of 101F at this time. The facility ordered labs and a rapid COVID test (all of which came back normal) and started IV antibiotics. A few hours later, patient began bleeding from his eyes, nose, and mouth and was sent to the local ER. The patient refused being admitted to the ICU for possible sepsis/hemorrhage and died the following day on 1/3/2021. All healthcare professionals involved agreed that this was not likely due to the vaccine, but needed to be reported nonetheless.	Unkown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">974454-1</a>	Patient passed away 23 days after receiving COVID vaccine	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">974573-1</a>	ON 1/21/2020 RESIDENT WAS EXPERINCING CHILLS AND LOOSE STOOLS. FOLLOWING THIS EPISODE BECAME UNRESPONSIVE, PALE, DIAPHORETIC AND BRADYCARDIC. PALLIATIVE CARE WAS PROVIDED. RESIDENT PASSED AWAY APPROX. 10 HOURS LATER.	URINARY TRACT INFECTION
MODERNA	Death	Jan., 2021	65+ years	<a href="#">974794-1</a>	Patient presented to Vaccine clinic 1/12/21 to receive COVID vaccination. Patient denied any ill feeling, no fever, cleared for vaccination. Is chronically SOB due to COPD, but patient reported no different than usual. Presented to the ED the next day c/o SOB and weakness for the last week. Patients condition ultimately declined over the next few days and died 01/21/21 from pneumonia (not COVID). Patient did admit she lied about her symptoms on the day of vaccination to get the shot.	Pneumonia, pleural effusion, COPD,
MODERNA	Death	Jan., 2021	65+ years	<a href="#">974833-1</a>	1/24/21 0445- patient presents to the ED with complaints of neck pain, chest pain, and back pain for about a week. States also feels SOB, intermittent fever with temperature 100.3 on arrival. Patient was worked up for his cardiac type symptoms, found to have elevated WBC and CRP with no explanation. D-Dimer was elevated with CT showing no sign of PE. Patient was sent home from the ED with instructions to follow up with primary care and/or return if s/s worsen. 1/24/21 1705- patient is returned to the ED via ambulance after becoming unresponsive and some seizure like activity. Patient was intubated. Head CT showed large brain bleed that was irreparable and not compatible with life. Patient was also found with positive blood cultures x2 with gram positive cocci in clusters growing after 9 hours.	unknown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">975002-1</a>	on 1/13/2021 at 3:40am Cliff called for assistance. He lost his balance and had fallen. Cliff refused vitals, refused emergency department, denied hitting his head. As the day progressed patient developed a headache, diarrhea, and vomiting. He again declined the offer for the emergency room. At supper time wife and staff found Cliff unresponsive, 911 was called and he was taken to the emergency department. The ER did a CT scan and found an acute subdural hematoma. Patient was placed on comfort cares and expired at 3pm on 01/14/2021. Cliff did not have a history of falls.	Stable
MODERNA	Death	Jan., 2021	65+ years	<a href="#">975023-1</a>	CARDIAC ARREST THAT LEAD TO DEATH - IT WAS REPORTED BY EMS THAT THE PT HAD RECEIVED THE VACCINE ABOUT 30 MINS PRIOR. HE ARRIVED HOME, BECAME SHORT OF BREATH & COLLAPSED. 911 WAS CALLED AND HE WAS TRANSPORTED VIA EMS TO HOSPITAL (16:17) WHERE HE LATER EXPIRED (23:01).	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">975689-1</a>	Resident vaccinated on 01/06/21 she acquired COVID 19 on 01/10/2021. Resident had multiple co morbidities and was declining prior to the vaccine. Resident expired on 01/20/2021	COVID 19 01/10/2021 HYPEROSMOLOTY AND HYPERNATREMIA HERNIA HYPERGLYCEMIA LOW BACK PAIN ANEMIA OSTEOPOROSIS DEMENTIA WITH BEHAVIORS CONSTIPATION CARDIAC MURMUR/HEART DISEASE POLYNEUROPATHY HX OF BREAST CANCER HTN DEPRESSION
MODERNA	Death	Jan., 2021	65+ years	<a href="#">975735-1</a>	VACCINE ADMINISTERED 01/06/21 ACQUIRED COVID 19 01/10/21 RESIDENT HAD MULTIPLE CO MORBIDITIES AND WAS DECLINING PRIOR TO VACCINE. RESIDENT EXPIRED ON 01/25/2021	COVID 19 01-10-2021 GERD DELUSIONS VASCULAR DEMENTIA WITH BEHAVIORS INSOMNIA CHRONIC DVT LEFT LOWER EXTREMITY HEMOCHROMATOSIS PSYCHOSIS MAJOR DEPRESSIVE DISORDER WITH ANXIETY IMPULSE DISORDER VITAMIN DEFICIENCY EDEMA CONSTIPATION HALLUCINATIONS HYPOTHYROIDISM HX OF SKIN CANCER CARPAL TUNNEL LT HAND DYSTHYMIC HTN
MODERNA	Death	Jan., 2021	65+ years	<a href="#">976112-1</a>	Resident expired on january 21, 2021	Resident started manifesting loss of appetite and body weakness on January 10,2021 a few days after vaccination. She expired in our facility 1/21/2021.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">976146-1</a>	Resident is asymptomatic	No symptoms after COVID vaccinations
MODERNA	Death	Jan., 2021	65+ years	<a href="#">976166-1</a>	ASYMPTOMATIC	NONE
MODERNA	Death	Jan., 2021	65+ years	<a href="#">977320-1</a>	about 20+ hours after vaccination resident was having hard time breathing, 911 was called. Resident coded multiple times at the facility after CPR she was taken to ICU. She coded again and was placed on life support. Due to her choice to not be on life support she passed on 11/26/2021.	acute pancreatitis, gerd, ibs, OA, rheumatoid arthritis, HTN, H/o falls, osteoporosis, pre- diabetes, hyperlipidemia, diverticulosis, interstitial lung disease, permatomyoitis
MODERNA	Death	Jan., 2021	65+ years	<a href="#">977358-1</a>	cough congestive heart failure death	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">977426-1</a>	Patient has a history of advanced melanoma with brain metastasis. He developed seizure disorder as well and had some mild seizures at home over the prior month. He received the vaccine at 4pm and was monitored in the office for 15 minutes. He then went home with his daughter whom he lives with. He ate dinner with her and read until 8pm when he went to his room. She found him in his room at 9pm unresponsive with seizures. Hospice was alerted and recommend oral valium. He continued to be unresponsive and expired the following day at 7:30 pm.	1. Melanoma with brain metastasis 2. Seizure disorder
MODERNA	Death	Jan., 2021	65+ years	<a href="#">978529-1</a>	Patient developed Covid pneumonia dx 1/15/21, patient expired	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">978567-1</a>	Resident received the first dose of Moderna Vaccine on 01/12/2021 and Tested for COVID-19 on 01/12/2021. Resident tested positive on 01/13/2021. Resident was transferred to acute hospital on 01/19/2021 due to desaturation. Resident expired at Hospital on 01/24/2021.	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">979081-1</a>	Patient found dead in home the next morning. May or may not be connected to vaccination. Instructed to report it from our medical director and director of nursing.	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">979223-1</a>	Patient developed SOB but reported good O2Sats. Instructed on going to ER if worsening symptoms. Patient eventually expired on 1/22/21	CHF, hypertension, type 2 DM

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">979533-1</a>	Patient recieved vaccine 1 of covid 19 i 1/19/2021. She felt poorly on 1/20/2021. She felt dizzy and fell at 3 AM on 1/23/2021. She felt poorly and did not know her son's name which was not normal. She went to ER on 1/24. She was assessed as not having fractures. She was going to be transferred to a skilled nursing facility. She was not having respiratory complaints. She was awaiting transfer when her O2 levels started dropping substantially. She declined aggressive intervention and she died within a few hours.	chronic copd is stable condition; no illnesses at time of vaccination
MODERNA	Death	Jan., 2021	65+ years	<a href="#">979773-1</a>	Not sure if it has to do with the COVID vaccine but her caregiver reported to me today (1/27/20201) that she passed away on 01/16/2021 from a pulmonary embolism that was 18 days after vaccine	none per care giver
MODERNA	Death	Jan., 2021	65+ years	<a href="#">979796-1</a>	Patient went to hospital with COVID symptoms on 01/10/2021 and passed away on 01/22/2021	"not known. I spoke with his wife when he was in the hospital a couple of days after the first dose of Moderna vaccine. She mentioned that he felt ill a few days before and up to the vaccine date. Despite feeling ill, he checked off ""no"" on the questionnaire section that asked if patients were feeling ill that day."
MODERNA	Death	Jan., 2021	65+ years	<a href="#">981061-1</a>	Patient died 3 days post Moderna vaccine.	None
MODERNA	Death	Jan., 2021	65+ years	<a href="#">981406-1</a>	Stroke, death	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">981849-1</a>	died 01/16/2021	unknown
MODERNA	Death	Jan., 2021	65+ years	<a href="#">981912-1</a>	Patient presented to the Emergency Department complaining of chest pain, pale, cool diaphoretic, and hypotensive. The patient was discovered to have a large saddle pulmonary embolism, went into cardiac arrest and expired. Of note, the patient received her second Moderna COVID vaccine on 1/23, which would place her first one approximately 12/25 if she received them at the appropriate interval. This information is from the patient's daughter and the ED record, the information is not available in CAIR. Per the daughter, the patient started feeling ill on 1/21, improved on 1/25, and then acutely worsened on 1/27, resulting in the ED visit.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">981938-1</a>	UNKNOWN/ASYTOLE Narrative: Please refer to section 6. 68y/o male with h/o severe peripheral vascular disease with previous left AKA 2/3/20, s/p bilateral bypasses in the past. Pt recently underwent right AKA on 1/12/21. Per Hospital remote data 1/10/21 pt c/o shortness of breath, CXR demonstrated right lower lobe opacity & left basilar infiltrate. Pt s/p >10 days emperic IV abx. Moderna vaccine 0.5ml IM was administered via left deltoid on 1/22/21 around 16:21. On 1/23/21@05:14 code blue was called as pt found to be unresponsive, breathless and pulseless, facial cyanosis noted, CPR started immediately.Pt found to be in asystole. ACLS guideline followed but no return of spontaneous circulation, At 05:32 pt remained pulseless and breathless and was pronounced. Autopsy currently pending.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">981945-1</a>	weakness and fallsNarrative: 95 yo male w/ a PMH significant for Afib, legal blindness, Hx of CVA, cognitive impairment, GERD, HTN, pseudogout, BPH, chronic knee infection, and DJD who received his first dose of the Moderna COVID-19 vaccine on 01/08/21. The pt's COVID-19 screening questionnaire prior to receiving the vaccine was negative. The pt presented to the ED on 01/13/21 for weakness and m PCR test on ultiple recent falls (since receiving his first dose of the COVID-19 vaccine). The pt's COVID-19 01/13/20 was positive and he was admitted. He was started on treatment with remdesivir + dexamethasone on 1/14. The pt initially required supplemental oxygen via low-flow NC, however his oxygen requirements increased to 100% NRB. On 01/16/21 his MPOA elected for hospice care. The pt passed on 01/17/21. Unclear if the COVID-19 vaccine attributed to the patient's hospitalization and eventual death, or whether these events occurred from COVID-19 itself, however this case is being reported the FDA since this vaccine is under an emergency use authorization (EUA).	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982354-1</a>	patient received COVID vaccine on 12/29/2020 and passed away on 1/23/2021	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982370-1</a>	Patient died at hospital on j/16/2021 approximately 48 after receiving vaccination. Believe death related to fall at home prior to vaccination.	Patient fell at home night before vaccination.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982472-1</a>	Worsening respiratory failure 1/20/2021 death 1/27/2021	Chf, CKD
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982495-1</a>	Client's sister called crying and said the family just found out yesterday that Client had died some time last week. The last time any family talked to him was on the 19th of January, missed calls show on the phone on the 21st. His last internet search was sternum pain. . She will also call the Agency and report this. The vaccine isn't in Registry at this time, do I don't know the lot number but she said he was due back in one month. She said he was very healthy and ran triathalons.	none
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982517-1</a>	patient received COVID vaccine on 1/11/2021 and passed away on 1/25/2021	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982541-1</a>	36 hours after vaccination, the patient had increased respiratory distress. He was placed on high flow nasal cannula oxygen with mild improvement. He then continued to be hypotensive requiring IV fluids and subsequently IV vasopressors. Patient's BP was stabilized with vasopresor, however he continued to deteriorate clinically with altered mental status and lethargy, concerned for bowel peroration based on physical exam by MD. He was then emergency intubated and placed on mechanical ventilation. He was then transferred to acute care hospital near by.	COVID pneumonia 12/2020
MODERNA	Death	Jan., 2021	65+ years	<a href="#">982890-1</a>	Pt presented to ER via EMS at 1556 3 days after receiving vaccine. pt was breathing approximately 50 times a minutes and o2 sats in the 70's upon arrival. NP decided to intubate, Rocuronium and Versed given. Pt became bradycardic and 1 amp of Atropine was given without improvement. No pulse felt, CPR started per ACLS protocol. 7 Epi's given. Time of death- 1632. After TOD pt was swabbed for COVID-19 and the results were positive.	GI Bleed and Anemia- DX: 1/31/2021



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Death	Jan., 2021	65+ years	<a href="#">983428-1</a>	Pt. was admitted to hospital on 1/6/21 with fatigue, weakness. Pt. was Covid positive in November of 2020. Impression upon admission was fatigue may be due to her aortic stenosis and some hypertensive issues with blood pressure changes. She was anemic. WBC was elevated to 19.2, HBG 10.5, NA-131, K+ - 3.1, Rule out bacterial infection. Potential source could be her heart valve. Also noted to have acute renal failure with BUN of 47 and Creatinine of 2.2 noted. Pt. was transferred to Hospital on 1/8/2021 with dx of aortic stenosis, bacteremia, ARF, Dehydration and anemia. Discharged with dx. of sepsis. Pt. expired on 1/18/21 with dx. of severe sepsis, complete heart block, staphylococcus epidermidis bacteremia.	Denied any illness at time of the vaccination. November 2020 was diagnosed with Covid-19. Admitted to Hospital on 01/6/2021 with c/o weakness. Reported that her weakness was over her entire body. Reports having episodes of vomiting once or twice a week.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">983720-1</a>	Death Narrative: Patient had Parkinson's and advanced Dementia. He was on a palliative care unit and a DNR.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">983721-1</a>	Death Narrative: Patient with Severe Dementia and on Hospice for end of life care.	No current illness for this event.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">983766-1</a>	Pt started complaining of chest heaviness and shortness of breath on the afternoon of 1/21/21. EMS was called to the patients home and she was found to have an O2 sat in the 70's. She was admitted to hospital and found to have a proBNP of 5000. She tested negative for Covid-19. She was determined to be in acute-on-chronic heart failure and was referred for hospice care. She passed away on the evening of 1/24/21.	Heart failure with reduced EF, history of moderate pulmonary hypertension, history of moderate mitral valve regurgitation and moderate pulmonary valve regurgitation. History of A. fib.
MODERNA	Death	Jan., 2021	65+ years	<a href="#">985205-1</a>	Patient was feeling dizzy and under the weather after the vaccination. The following day he died in his sleep during a nap.	No
MODERNA	Life Threatening	Jan., 2021	65+ years	<a href="#">982472-1</a>	Worsening respiratory failure 1/20/2021 death 1/27/2021	Chf, CKD
MODERNA	Hospitalized	Dec., 2020	65+ years	<a href="#">959591-1</a>	Resident has increase weakness and lethargy with abnormal labs. He was transferred to the ER. He was admitted to the hospital and treated for worsening AKI and hypotension.	He was treated for pneumonia and C-Diff at the beginning of December. He had abnormal blood work with elevated BUN and WBC on 12/31 and 1/3/21. Appetite was fluctuating and recently began increase medication for depression. Decrease responsiveness sent to ER on 1/4/2021.
MODERNA	Hospitalized	Jan., 2021	50-59 years	<a href="#">946293-1</a>	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.	Pulmonary fibrosis on O2
MODERNA	Hospitalized	Jan., 2021	50-59 years	<a href="#">950108-1</a>	""Moderna COVID-19 Vaccine EUA"" It has been reported to me that pt. had gone into hospital for a heart catheterization on 1/12/2021. It was found during this procedure that pt. had suffered a MI. She was release to home the following day and passed away at her residence on 1/15/2021."	Pt. stated she was not ill at the time of vaccination.
MODERNA	Hospitalized	Jan., 2021	60-64 years	<a href="#">979841-1</a>	Pt likely presented to vaccine appt with asymptomatic/early infection of COVID-19, as he presented 2 days post-vaccination and tested positive for COVID-19 on rapid and PCR test. He was hospitalized where he eventually died of complications from COVID-19 while in ICU. Date of death was 1/15/2021.	Evaluated for L flank pain in ED on 1/1/2021, no acute findings on CT. Noted to be in mild CHF, discharged home from local ED.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">927260-1</a>	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.	Digestive Surgery for bowel obstruction

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">935350-1</a>	Patient was found unresponsive at home with SpO2 20% 1/2/2021	Dyspnea, Shortness of breath
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">948164-1</a>	Abdominal pain, Headaches, chest pain, loss of appetite, confusion, elevated liver enzymes 1/8-1/15/21	UTI and Sinus infection
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">957799-1</a>	Presented to Urgent Care for weakness and confusion, transferred to ED, patient had a cardiac arrest and was unable to be resuscitated	No current illness for this event.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">958971-1</a>	Hemorrhagic Stroke, Right Basal Ganglion	No current illness for this event.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">959568-1</a>	Patient received her first dose of the Moderna COVID-19 Vaccination on Saturday January 16th 2021 at approximately 12pm. She completed all necessary screening forms and was deemed to be at low risk for serious allergic reactions. She tolerated the vaccination well, and no complications or immediate adverse events occurred. She was observed for a full 15 mins per CDPHE/CDC guidelines and left the Clinic in stable condition after her observation period was complete. On the morning of Tuesday, January 19th, 2021, the patient was found unconscious and unresponsive by her husband. She was transferred by Ambulance to Hospital shortly thereafter. She was diagnosed with a brain bleed that was determined to be inoperable. She was transferred to other Hospital for higher level care. She was seen by neurosurgery and diagnosed with a ruptured aneurysm. She was treated in the ICU for 24 hours, at which point her team determined that the severity of her brain bleed would not respond to treatment. Supportive cares were withdrawn on Wednesday Jan 20th, and she passed away shortly thereafter.	None disclosed
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">963235-1</a>	Patient diagnosed with COVID on January 9, 2021 after being exposed to family member that was under quarantine in the same household. Admitted to the hospital and was discharged on January 14, 2021 with home hospice. Patient passed away on January 18, 2021	No current illness for this event.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">964956-1</a>	Patient began with a wet productive cough with crackles heard at 4 pm, at 5pm he went to dinner and still had cough, at 630 was administered his medications and he had cough, no shortness of breath and was in a good mood. By 7:45pm CNA found him in the lounge with labored breathing, O2 was at 85%. They gave him 4 liters O2, then a facemask at 5 liters which brought his O2 into the 90's. At that time called ambulance, patient arrived to ER around 9:20pm and passed away shortly after. Cardiac Arrest	No current illness for this event.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">970412-1</a>	Fever Feeling tired short of breath all night and morning after the vaccine My grandma had to be intubated and then passed away to a heart distress we think it was the vaccine because she was fine even with dialysis. When she got the vaccine it took hours and her health conditions changed.	High blood pressure. Dialysis
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">970930-1</a>	Pt developed COVID-19 infection, symptoms starting 7 days after first dose was given. Patient was admitted to hospital on 1/21 after falling (secondary to weakness) and striking head on toilet. Patient expired due to respiratory complications of COVID on 1/25.	-
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">974794-1</a>	Patient presented to Vaccine clinic 1/12/21 to receive COVID vaccination. Patient denied any ill feeling, no fever, cleared for vaccination. Is chronically SOB due to COPD, but patient reported no different than usual. Presented to the ED the next day c/o SOB and weakness for the last week. Patients condition ultimately declined over the next few days and died 01/21/21 from pneumonia (not COVID). Patient did admit she lied about her symptoms on the day of vaccination to get the shot.	Pneumonia, pleural effusion, COPD,

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">974833-1</a>	1/24/21 0445- patient presents to the ED with complaints of neck pain, chest pain, and back pain for about a week. States also feels SOB, intermittent fever with temperature 100.3 on arrival. Patient was worked up for his cardiac type symptoms, found to have elevated WBC and CRP with no explanation. D-Dimer was elevated with CT showing no sign of PE. Patient was sent home from the ED with instructions to follow up with primary care and/or return if s/s worsen. 1/24/21 1705- patient is returned to the ED via ambulance after becoming unresponsive and some seizure like activity. Patient was intubated. Head CT showed large brain bleed that was irreparable and not compatible with life. Patient was also found with positive blood cultures x2 with gram positive cocci in clusters growing after 9 hours.	unknown
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">975002-1</a>	on 1/13/2021 at 3:40am Cliff called for assistance. He lost his balance and had fallen. Cliff refused vitals, refused emergency department, denied hitting his head. As the day progressed patient developed a headache, diarrhea, and vomiting. He again declined the offer for the emergency room. At supper time wife and staff found Cliff unresponsive, 911 was called and he was taken to the emergency department. The ER did a CT scan and found an acute subdural hematoma. Patient was placed on comfort cares and expired at 3pm on 01/14/2021. Cliff did not have a history of falls.	Stable
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">975689-1</a>	Resident vaccinated on 01/06/21 she acquired COVID 19 on 01/10/2021. Resident had multiple co morbidities and was declining prior to the vaccine. Resident expired on 01/20/2021	COVID 19 01/10/2021 HYPEROSMOLOTY AND HYPERNATREMIA HERNIA HYPERGLYCEMIA LOW BACK PAIN ANEMIA OSTEOPOROSIS DEMENTIA WITH BEHAVIORS CONSTIPATION CARDIAC MURMUR/HEART DISEASE POLYNEUROPATHY HX OF BREAST CANCER HTN DEPRESSION
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">975735-1</a>	VACCINE ADMINISTERED 01/06/21 ACQUIRED COVID 19 01/10/21 RESIDENT HAD MULTIPLE CO MORBIDITIES AND WAS DECLINING PRIOR TO VACCINE. RESIDENT EXPIRED ON 01/25/2021	COVID 19 01-10-2021 GERD DELUSIONS VASCULAR DEMENTIA WITH BEHAVIORS INSOMNIA CHRONIC DVT LEFT LOWER EXTREMITY HEMOCHROMATOSIS PSYCHOSIS MAJOR DEPRESSIVE DISORDER WITH ANXIETY IMPULSE DISORDER VITAMIN DEFICIENCY EDEMA CONSTIPATION HALLUCINATIONS HYPOTHYROIDISM HX OF SKIN CANCER CARPAL TUNNEL LT HAND DYSTHYMIC HTN
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">977320-1</a>	about 20+ hours after vaccination resident was having hard time breathing, 911 was called. Resident coded multiple times at the facility after CPR she was taken to ICU. She coded again and was placed on life support. Due to her choice to not be on life support she passed on 11/26/2021.	acute pancreatitis, gerd, ibs, OA, rheumatoid arthritis, HTN, H/o falls, osteoporosis, pre- diabetes, hyperlipidemia, diverticulosis, interstitial lung disease, permatomyoitis
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">977358-1</a>	cough congestive heart failure death	No current illness for this event.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">978529-1</a>	Patient developed Covid pneumonia dx 1/15/21, patient expired	None
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">979223-1</a>	Patient developed SOB but reported good O2Sats. Instructed on going to ER if worsening symptoms. Patient eventually expired on 1/22/21	CHF, hypertension, type 2 DM
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">981406-1</a>	Stroke, death	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">981945-1</a>	weakness and fallsNarrative: 95 yo male w/ a PMH significant for Afib, legal blindness, Hx of CVA, cognitive impairment, GERD, HTN, pseudogout, BPH, chronic knee infection, and DJD who received his first dose of the Moderna COVID-19 vaccine on 01/08/21. The pt's COVID-19 screening questionnaire prior to receiving the vaccine was negative. The pt presented to the ED on 01/13/21 for weakness and m PCR test on ultiple recent falls (since receiving his first dose of the COVID-19 vaccine). The pt's COVID-19 01/13/20 was positive and he was admitted. He was started on treatment with remdesivir + dexamethasone on 1/14. The pt initially required supplemental oxygen via low-flow NC, however his oxygen requirements increased to 100% NRB. On 01/16/21 his MPOA elected for hospice care. The pt passed on 01/17/21. Unclear if the COVID-19 vaccine attributed to the patient's hospitalization and eventual death, or whether these events occurred from COVID-19 itself, however this case is being reported the FDA since this vaccine is under an emergency use authorization (EUA).	No current illness for this event.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">982472-1</a>	Worsening respiratory failure 1/20/2021 death 1/27/2021	Chf, CKD
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">983428-1</a>	Pt. was admitted to hospital on 1/6/21 with fatigue, weakness. Pt. was Covid positive in November of 2020. Impression upon admission was fatigue may be due to her aortic stenosis and some hypertensive issues with blood pressure changes. She was anemic. WBC was elevated to 19.2, HBG 10.5, NA-131, K+ - 3.1, Rule out bacterial infection. Potential source could be her heart valve. Also noted to have acute renal failure with BUN of 47 and Creatinine of 2.2 noted. Pt. was transferred to Hospital on 1/8/2021 with dx of aortic stenosis, bacteremia, ARF, Dehydration and anemia. Discharged with dx. of sepsis. Pt. expired on 1/18/21 with dx. of severe sepsis, complete heart block, staphylococcus epidermidis bacteremia.	Denied any illness at time of the vaccination. November 2020 was diagnosed with Covid-19. Admitted to Hospital on 01/6/2021 with c/o weakness. Reported that her weakness was over her entire body. Reports having episodes of vomiting once or twice a week.
MODERNA	Hospitalized	Jan., 2021	65+ years	<a href="#">983766-1</a>	Pt started complaining of chest heaviness and shortness of breath on the afternoon of 1/21/21. EMS was called to the patients home and she was found to have an O2 sat in the 70's. She was admitted to hospital and found to have a proBNP of 5000. She tested negative for Covid-19. She was determined to be in acute-on-chronic heart failure and was referred for hospice care. She passed away on the evening of 1/24/21.	Heart failure with reduced EF, history of moderate pulmonary hypertension, history of moderate mitral valve regurgitation and moderate pulmonary valve regurgitation. History of A. fib.
MODERNA	Emergency Room *	Dec., 2020	50-59 years	<a href="#">918518-1</a>	syncopal episode - arrested - CPR - death	To be determined
MODERNA	Emergency Room *	Dec., 2020	65+ years	<a href="#">921572-1</a>	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.	Heart Failure
MODERNA	Emergency Room *	Dec., 2020	65+ years	<a href="#">947129-1</a>	Resident received Moderna vaccine on 12/23/2020 around 5 pm. At approximately 3:35 am on 12/25/2020, resident had a CVA and died on 1/1/2021 at 3:00 am.	Anemia, cardiac murmur, atrial fibrillation, osteoporosis, dysphagia, hyperlipidemia, muscle weakness, aortic valve stenosis
MODERNA	Emergency Room *	Dec., 2020	65+ years	<a href="#">956903-1</a>	mi Narrative: patient with asymptomatic covid 19, covid positive 12/10/2020.	No current illness for this event.
MODERNA	Emergency Room *	Dec., 2020	65+ years	<a href="#">956966-1</a>	hypoxia, secretions,cough, dyspnea Narrative: ALS patient on hospice with ongoing history of aspiration pna, receiving tube feeds. Developed incr in secretions, hypoxeia, temp and with recently noted clogged feeding tube.	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	50-59 years	<a href="#">950108-1</a>	""Moderna COVID-19 Vaccine EUA"" It has been reported to me that pt. had gone into hospital for a heart catheterization on 1/12/2021. It was found during this procedure that pt. had suffered a MI. She was release to home the following day and passed away at her residence on 1/15/2021."	Pt. stated she was not ill at the time of vaccination.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Emergency Room *	Jan., 2021	50-59 years	<a href="#">965564-1</a>	Cardiac arrest Narrative:	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	50-59 years	<a href="#">975762-1</a>	Pt deceased	N/A
MODERNA	Emergency Room *	Jan., 2021	60-64 years	<a href="#">952713-1</a>	Weakness, Low O2, death. Positive for COVID on 1/12/21, dies on 1/16/21	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	60-64 years	<a href="#">975918-1</a>	death Narrative:	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">925154-1</a>	Deceased	NONE
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">935350-1</a>	Patient was found unresponsive at home with SpO2 20% 1/2/2021	Dyspnea, Shortness of breath
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">940866-1</a>	"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."	None
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">948164-1</a>	Abdominal pain, Headaches, chest pain, loss of appetite, confusion, elevated liver enzymes 1/8-1/15/21	UTI and Sinus infection
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">958565-1</a>	Clients wife reported on 1/18/2021, that her husband died unexpectedly the day after receiving the COVID 19 vaccine. I called and spoke with her. She stated that the client had started experienced some tightness in his chest the evening of 1/11/2021. She stated that it was normal for him to have the tightness in his chest if he got stressed. She stated that she found him on the garage floor on 1/12/2021 at 2120. He was taken by ambulance to the hospital. She stated that the hospital told her that his COPD had caused him to go into arrhythmia.	lung infection treated with antibiotics a couple of weeks ago
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">958971-1</a>	Hemorrhagic Stroke, Right Basal Ganglion	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">959568-1</a>	Patient received her first dose of the Moderna COVID-19 Vaccination on Saturday January 16th 2021 at approximately 12pm. She completed all necessary screening forms and was deemed to be at low risk for serious allergic reactions. She tolerated the vaccination well, and no complications or immediate adverse events occurred. She was observed for a full 15 mins per CDPHE/CDC guidelines and left the Clinic in stable condition after her observation period was complete. On the morning of Tuesday, January 19th, 2021, the patient was found unconscious and unresponsive by her husband. She was transferred by Ambulance to Hospital shortly thereafter. She was diagnosed with a brain bleed that was determined to be inoperable. She was transferred to other Hospital for higher level care. She was seen by neurosurgery and diagnosed with a ruptured aneurysm. She was treated in the ICU for 24 hours, at which point her team determined that the severity of her brain bleed would not respond to treatment. Supportive cares were withdrawn on Wednesday Jan 20th, and she passed away shortly thereafter.	None disclosed
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">961845-1</a>	Narrative:	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">962940-1</a>	Pt received second dose of COVID vaccine on 01/20/2021 at 1430. At 1600 Pt developed a wet productive cough with coarse crackles. Pt ate dinner at 5 pm cough persisted. At 18:30 the nurse went to Pt's room to give him his medications. Pt still had a cough, denied shortness of breath. Pt was in a good mood and joking with staff. Pt asked to be shaved. At 19:45 Pt was sitting in the lounge and a CNA noticed that Pt was pale/white in color and clammy. 02 Sat was 85%. Respirations were labored. Pt was placed on 4 L of 02. Increased to 5 L via face mask and 02 sat was 89-90%. Ambulance was called at unknown time. Pt arrived at Medical Center at 2120 and was pronounced dead at 2127.	Unknown

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">963163-1</a>	Narrative:	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">963235-1</a>	Patient diagnosed with COVID on January 9, 2021 after being exposed to family member that was under quarantine in the same household. Admitted to the hospital and was discharged on January 14, 2021 with home hospice. Patient passed away on January 18, 2021	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">967747-1</a>	Pt passed away evening of 1/13 - unknown reason currently Narrative:	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">968195-1</a>	My dad got the Moderna Vaccine on Tuesday, January 12, 2021 in his left arm at the Mall injection site for the Health Department. He was told that the side effects could mean his arm hurting, tiredness, headache, and even a low grade fever. Additionally, the site informed us both (as I was with him to get the injection) that this was all normal and not to seek medical attention unless these symptoms last longer than 72 hours. That evening, my dad was experiencing all of those symptoms, and went to bed at 7pm. A little after 10am on Wednesday, January 13, 2021, when he awoke, my dad went to the bathroom vomiting. This was where he collapsed and went into cardiac arrest. Fire/Rescue was dispatched about 10:30am after my mom started CPR. County Fire Rescue EMTs and Paramedics continued CPR and other attempts at reviving him all the way to Hospital Emergency Department. He was pronounced dead at 12:14pm on Wednesday, January 13, 2021. We have no doubt my dad, following the instructions of the injection facility, thought he was just experiencing the side effects of the vaccine. He had no chance. Had this injection been done in the RIGHT arm, perhaps he could have recognized the arm numbness being that of an impending heart attack. We really miss Dad. He served this country with distinction for over 50 years, and we believe his country failed him.	None known
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">970930-1</a>	Pt developed COVID-19 infection, symptoms starting 7 days after first dose was given. Patient was admitted to hospital on 1/21 after falling (secondary to weakness) and striking head on toilet. Patient expired due to respiratory complications of COVID on 1/25.	-
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">972113-1</a>	Resident became lethargic and reports of blood coming from resident's nose and mouth on the morning of 1/13/21. Resident went out to ER for eval, and came back to facility with dx of pneumonia and recommendations for resident to be placed on hospice. Resident deceased on 1/14/21. Unknown if vaccine related, but with timeline of events I was advised to report this per medical director of facility, as well as Pharmacy who administered the vaccine.	Resident was Dx with pneumonia the day after vaccine.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">973814-1</a>	DEATH Narrative:	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">975002-1</a>	on 1/13/2021 at 3:40am Cliff called for assistance. He lost his balance and had fallen. Cliff refused vitals, refused emergency department, denied hitting his head. As the day progressed patient developed a headache, diarrhea, and vomiting. He again declined the offer for the emergency room. At supper time wife and staff found Cliff unresponsive, 911 was called and he was taken to the emergency department. The ER did a CT scan and found an acute subdural hematoma. Patient was placed on comfort cares and expired at 3pm on 01/14/2021. Cliff did not have a history of falls.	Stable
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">978529-1</a>	Patient developed Covid pneumonia dx 1/15/21, patient expired	None
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">979223-1</a>	Patient developed SOB but reported good O2Sats. Instructed on going to ER if worsening symptoms. Patient eventually expired on 1/22/21	CHF, hypertension, type 2 DM

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">979533-1</a>	Patient recieved vaccine 1 of covid 19 i 1/19/2021. She felt poorly on 1/20/2021. She felt dizzy and fell at 3 AM on 1/23/2021. She felt poorly and did not know her son's name which was not normal. She went to ER on 1/24. She was assessed as not having fractures. She was going to be transferred to a skilled nursing facility. She was not having respiratory complaints. She was awaiting transfer when her O2 levels started dropping substantially. She declined aggressive intervention and she died within a few hours.	chronic copd is stable condition; no illnesses at time of vaccination
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">981938-1</a>	UNKNOWN/ASYTOLE Narrative: Please refer to section 6. 68y/o male with h/o severe peripheral vascular disease with previous left AKA 2/3/20, s/p bilateral bypasses in the past. Pt recently underwent right AKA on 1/12/21. Per Hospital remote data 1/10/21 pt c/o shortness of breath, CXR demonstrated right lower lobe opacity & left basilar infiltrate. Pt s/p >10 days emperic IV abx. Moderna vaccine 0.5ml IM was administered via left deltoid on 1/22/21 around 16:21. On 1/23/21@05:14 code blue was called as pt found to be unresponsive, breathless and pulseless, facial cyanosis noted, CPR started immediately.Pt found to be in asystole. ACLS guideline followed but no return of spontaneous circulation, At 05:32 pt remained pulseless and breathless and was pronounced. Autopsy currently pending.	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">981945-1</a>	weakness and fallsNarrative: 95 yo male w/ a PMH significant for Afib, legal blindness, Hx of CVA, cognitive impairment, GERD, HTN, pseudogout, BPH, chronic knee infection, and DJD who received his first dose of the Moderna COVID-19 vaccine on 01/08/21. The pt's COVID-19 screening questionnaire prior to receiving the vaccine was negative. The pt presented to the ED on 01/13/21 for weakness and m PCR test on ultiple recent falls (since receiving his first dose of the COVID-19 vaccine). The pt's COVID-19 01/13/20 was positive and he was admitted. He was started on treatment with remdesivir + dexamethasone on 1/14. The pt initially required supplemental oxygen via low-flow NC, however his oxygen requirements increased to 100% NRB. On 01/16/21 his MPOA elected for hospice care. The pt passed on 01/17/21. Unclear if the COVID-19 vaccine attributed to the patient's hospitalization and eventual death, or whether these events occurred from COVID-19 itself, however this case is being reported the FDA since this vaccine is under an emergency use authorization (EUA).	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">982370-1</a>	Patient died at hospital on j/16/2021 approximately 48 after receiving vaccination. Believe death related to fall at home prior to vaccination.	Patient fell at home night before vaccination.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">983428-1</a>	Pt. was admitted to hospital on 1/6/21 with fatigue, weakness. Pt. was Covid positive in November of 2020. Impression upon admission was fatigue may be due to her aortic stenosis and some hypertensive issues with blood pressure changes. She was anemic. WBC was elevated to 19.2, HBG 10.5, NA-131, K+ - 3.1, Rule out bacterial infection. Potential source could be her heart valve. Also noted to have acute renal failure with BUN of 47 and Creatinine of 2.2 noted. Pt. was transferred to Hospital on 1/8/2021 with dx of aortic stenosis, bacteremia, ARF, Dehydration and anemia. Discharged with dx. of sepsis. Pt. expired on 1/18/21 with dx. of severe sepsis, complete heart block, staphylococcus epidermidis bacteremia.	Denied any illness at time of the vaccination. November 2020 was diagnosed with Covid-19. Admitted to Hospital on 01/6/2021 with c/o weakness. Reported that her weakness was over her entire body. Reports having episodes of vomiting once or twice a week.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">983720-1</a>	Death Narrative: Patient had Parkinson's and advanced Dementia. He was on a palliative care unit and a DNR.	No current illness for this event.
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">983721-1</a>	Death Narrative: Patient with Severe Dementia and on Hospice for end of life care.	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Emergency Room *	Jan., 2021	65+ years	<a href="#">983766-1</a>	Pt started complaining of chest heaviness and shortness of breath on the afternoon of 1/21/21. EMS was called to the patients home and she was found to have an O2 sat in the 70's. She was admitted to hospital and found to have a proBNP of 5000. She tested negative for Covid-19. She was determined to be in acute-on-chronic heart failure and was referred for hospice care. She passed away on the evening of 1/24/21.	Heart failure with reduced EF, history of moderate pulmonary hypertension, history of moderate mitral valve regurgitation and moderate pulmonary valve regurgitation. History of A. fib.
MODERNA	Office Visit *	Dec., 2020	65+ years	<a href="#">956903-1</a>	mi Narrative: patient with asymptomatic covid 19, covid positive 12/10/2020.	No current illness for this event.
MODERNA	Office Visit *	Dec., 2020	65+ years	<a href="#">956966-1</a>	hypoxia, secretions,cough, dyspnea Narrative: ALS patient on hospice with ongoing history of aspiration pneumonia, receiving tube feeds. Developed incr in secretions, hypoxemia, temp and with recently noted clogged feeding tube.	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	50-59 years	<a href="#">965564-1</a>	Cardiac arrest Narrative:	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	60-64 years	<a href="#">975918-1</a>	death Narrative:	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">940855-1</a>	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.	Resident was a hospice patient but POA requested that she get the vaccination. Resident was already near end of life and the vaccine may not have had anything to do with her death.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">947662-1</a>	Accelerated decline in condition with decreased input, decreased responsiveness, somnolence, and death	no acute illnesses
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">961845-1</a>	Narrative:	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">963163-1</a>	Narrative:	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">967747-1</a>	Pt passed away evening of 1/13 - unknown reason currently Narrative:	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">969363-1</a>	Patient obtained initial dose of Moderna vaccine on Thursday, Jan 14. No adverse effects reported during initial 15 minute post vaccine waiting period. Saturday morning (Jan 16), patient developed severe cough, labored breathing, and fever. Additionally patient mental status changed suddenly, became non-communicative (unable to speak, but would scream if she was touched). O2 status was irregular, dropping to 78. Sunday morning, EMT and then hospice was hospice called. Monday morning, after hospice emergency kit was initiated, patient passed away.	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">970930-1</a>	Pt developed COVID-19 infection, symptoms starting 7 days after first dose was given. Patient was admitted to hospital on 1/21 after falling (secondary to weakness) and striking head on toilet. Patient expired due to respiratory complications of COVID on 1/25.	-
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">973814-1</a>	DEATH Narrative:	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">981938-1</a>	UNKNOWN/ASYTOLE Narrative: Please refer to section 6. 68y/o male with h/o severe peripheral vascular disease with previous left AKA 2/3/20, s/p bilateral bypasses in the past. Pt recently underwent right AKA on 1/12/21. Per Hospital remote data 1/10/21 pt c/o shortness of breath, CXR demonstrated right lower lobe opacity & left basilar infiltrate. Pt s/p >10 days empiric IV abx. Moderna vaccine 0.5ml IM was administered via left deltoid on 1/22/21 around 16:21. On 1/23/21@05:14 code blue was called as pt found to be unresponsive, breathless and pulseless, facial cyanosis noted, CPR started immediately.Pt found to be in asystole. ACLS guideline followed but no return of spontaneous circulation, At 05:32 pt remained pulseless and breathless and was pronounced. Autopsy currently pending.	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">981945-1</a>	weakness and fallsNarrative: 95 yo male w/ a PMH significant for Afib, legal blindness, Hx of CVA, cognitive impairment, GERD, HTN, pseudogout, BPH, chronic knee infection, and DJD who received his first dose of the Moderna COVID-19 vaccine on 01/08/21. The pt's COVID-19 screening questionnaire prior to receiving the vaccine was negative. The pt presented to the ED on 01/13/21 for weakness and m PCR test on ultiple recent falls (since receiving his first dose of the COVID-19 vaccine). The pt's COVID-19 01/13/20 was positive and he was admitted. He was started on treatment with remdesivir + dexamethasone on 1/14. The pt initially required supplemental oxygen via low-flow NC, however his oxygen requirements increased to 100% NRB. On 01/16/21 his MPOA elected for hospice care. The pt passed on 01/17/21. Unclear if the COVID-19 vaccine attributed to the patient's hospitalization and eventual death, or whether these events occurred from COVID-19 itself, however this case is being reported the FDA since this vaccine is under an emergency use authorization (EUA).	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">983720-1</a>	Death Narrative: Patient had Parkinson's and advanced Dementia. He was on a palliative care unit and a DNR.	No current illness for this event.
MODERNA	Office Visit *	Jan., 2021	65+ years	<a href="#">983721-1</a>	Death Narrative: Patient with Severe Dementia and on Hospice for end of life care.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2020	65+ years	<a href="#">958914-1</a>	Death on 1/15/2020	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	1-2 years	<a href="#">958443-1</a>	death by suicide Narrative: death by suicide; 12/26/20, self inflicted gun shot wound; found deceased by family member	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	40-49 years	<a href="#">939270-1</a>	Sudden cardiac death	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	60-64 years	<a href="#">914805-1</a>	RESIDENT CODED AND EXPIRED	none
PFIZER\BIONTECH	Death	Dec., 2020	60-64 years	<a href="#">914917-1</a>	Death by massive heart attack. Pfizer-BioNTech COVID-19 Vaccine EUA	None
PFIZER\BIONTECH	Death	Dec., 2020	60-64 years	<a href="#">932898-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	60-64 years	<a href="#">964629-1</a>	Death - Hospice patient with metastatic CA admitted to facility and received vaccine during stay. No adverse sequelae noted from vaccine administration, but reporting as required because pt died 7 days later. Narrative: Reporting this event because patient died 7 days after receiving vaccine in the facility where he was in hospice care for metastatic cancer. Vaccine was administered by protocol without complications. The patient had been asked and denied any prior severe reaction to this vaccine or its components and gave permission to receive it. No vaccine adverse sequelae were documented after the immunization as monitored for 15 minutes nor in facility notes for 7 days after the immunization. The patient's death was felt to be due to underlying terminal illness.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Dec., 2020	60-64 years	<a href="#">965561-1</a>	respiratory distress; fever; anxiety developed requiring oxygen; Passed away; This is a spontaneous report via a Pfizer-sponsored program from a non-contactable consumer. A 63-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot and expiry not reported), via an unspecified route of administration on 23Dec2020 at a single dose for COVID-19 immunization. Medical history included anaphylactic reaction (broad), neuroleptic malignant syndrome (broad), anticholinergic syndrome (broad), acute central respiratory depression (broad), hypersensitivity (broad), respiratory failure (narrow), drug reaction with eosinophilia and systemic symptoms (broad), hypoglycaemia (broad), COVID-19 (broad) and chronic obstructive pulmonary disease (COPD); all from an unknown date and unknown if ongoing. Concomitant medications included levothyroxine sodium and lorazepam (ATIVAN). Within 24 hours of receiving the vaccine, the patient experienced fever, respiratory distress, and anxiety developed requiring oxygen, morphine and lorazepam (ATIVAN). The patient passed away on the evening of 26Dec2020. The patient underwent lab tests and procedures which included SARS-COV-2 antibody test: negative on an unspecified date. The outcome of the event death was fatal, while of the other events was unknown. 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: Passed a	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	60-64 years	<a href="#">982891-1</a>	All residents had been in isolation due to multiple cases of COVID in the facility. Resident voiced no health related complaints. He continued to visit with staff and required moderate assist with toileting. Resident had fall 0130 on 1-15-2021, which resulted in laceration with surgical repair. Resident was noted to change in mental status and respirations on morning of 1-16-2021 during morning blood sugar check. Resident had O2 @1.5l/m via n/c and respirations of 10 with periods of apnea and unresponsive to verbal stimuli. Blood sugar was 583. Resident deceased upon re-check after calling PCP to report status change.	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">913143-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">914604-1</a>	Spouse awoke 12/20 and found spouse dead. Client was not transferred to hospital.	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">914690-1</a>	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.	none known
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">914895-1</a>	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)	Alzheimer's Disease, Encephalopathy, Hypertension, Acute Kidney failure, Urine Retention, Recent UTI
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">914961-1</a>	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	per nursing home staff over 14 days post covid
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">914994-1</a>	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	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">915562-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">915682-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">915920-1</a>	Resident received vaccine in am and expired that afternoon.	Resident was living in an assisted living facility. She fell on 11/24/2020 and was seen in the ER. There, she tested positive for COVID 19. She was admitted to this facility for rehab. She showed a decline after admission and was referred to hospice.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">919108-1</a>	Fever, Malaise	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">926568-1</a>	patient declined 12/30/2020 and was transferred to hospital where he did not respond to treatment and passed away 1/4/2020	chronic medical problems as noted below
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">944365-1</a>	Resident expired on 12/30/20, dx cardiac arrest.	None
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">952204-1</a>	Patient became sick 3 hours after the vaccine and was found deceased 1 day after his vaccination. He passed away in his sleep.	None: Clean bill of health and a full cardiac exam was performed 2 months prior.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">953922-1</a>	The day following the vaccine, the patient complained of throat issues and anxiety. This was not new... however . That evening he reported difficulty breathing and was placed on oxygen; a COVID test was performed and was negative. On 12/30/2020, patient complained of sternal pressure and was transferred to the hospital. The patient died 12/31/2020 and records obtained from the hospital indicated the patient died from a massive myocardial infarction.	Diabetes, COPD, Chrone's Disease, DJD, OSA, PTSD, GERD, HLD, Depression, HTN, lobectomy 3/4/2019, cancer
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">962764-1</a>	Patient did not have any adverse reaction to the COVID vaccine, but we were asked by our health dept to submit a VAERS report since the patient died between his first and second dose. Received Pfizer Dose #1 12/17/2020. No side effects or adverse events noted; lived in 24/7 care facility and monitored twice daily for reaction. Date of death 12/23/2020 from aspiration pneumonia complicated by end-stage heart failure and ischemic cardiomyopathy. Death was anticipated and not sudden.	Scrotal edema, aspiration pneumonia
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">964636-1</a>	Pt on hospice in facility for severe cardiomyopathy unable to perform interventions received vaccine without adverse sequelae died 5 days later. Reporting as required. Narrative: Reporting as required patient death 5 days after immunization with Pfizer vaccine. However, no adverse sequelae were noted to the vaccine in the 15minute observation period, nor in the days following the immunization related to the vaccine. The patient denied any prior severe reaction to this vaccine or its components, and the patient gave verbal consent to receive the vaccine. Patient had been in the facility on hospice since 11/18/20 for severe decompensated HF and newly diagnosed cardiomyopathy, unable to perform interventions, also LE ischemic wounds with very poor potential to heal due to advanced PVD.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">965548-1</a>	passed away; This is a spontaneous report from non-contactable consumers received via a Pfizer-sponsored program An 88-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot EL0142) via an unspecified route of administration on 30Dec2020 at a single dose (1 dose) in the left arm (LA) (administered by: senior living) as Covid vaccine. Medical history included patient was 14 plus days post COVID and unresponsive. The patient had no listed allergies. Concomitant medications were not reported. The patient passed away with an hour and half of receiving vaccine on 30Dec2020. Per nursing staff, they did not expect the patient to make it many more days. She was unresponsive in the room when shot was given. It was unknown if an autopsy was performed. No follow-up attempts are possible. No further information is expected.; Reported Cause(s) of Death: passed away	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	65+ years	<a href="#">973808-1</a>	"shortness of breath, chest xray with pulmonary edema, periorbital edema Narrative: 73 yo M w/ PMH HTN, HLD, EVAR (2013) for AAA c/b persistent type II endoleak s/p multiple repairs (2015 & 2017) c/b glue embolization down into the R CIA secured with additional stent placement with the R iliac limb, s/p b/l Iliac artery aneurysm stent 08/31/20, and PTSD. Former smoker, quit 12+ yrs ago. 11/1/20-11/6/20: Hospitalized for acute on chronic back pain, found to multiple hypermetabolic lesions in the axial skeleton. Diagnosed with epithelioid angiosarcoma. Patient discharged to facility. 12/17/20: Patient received his 1st COVID-19 vaccine w/o complications at facility. 12/21/20: Underwent cyberknife treatment. 12/31/20: Transferred from facility to ER for new O2 requirement, SOB, cough, chest X ray / pulm edema, tachycardic and new periorbital edema. 12/31/20: Admitted to ICU before transfer to acute care. 1/1/21: Pulmonary consult, ""Labs are notable for progressive left shift with bandemia, markedly elevated inflammatory markers (D-dimer, ESR, CRP, ferritin, LDH), mild elevation in procalcitonin, mild elevation in lactate that has improved, and negative viral panel including COVID-19 x2. CT chest is notable for b/l GGOs along with some interstitial infiltrates with an upper and particularly mid zone and perihilar predominance, septal thickening and crazy paving, and numerous cystic lesions or pneumatocoles. There is a lack of lobar consolidation and pulmonary nodules. Of note, PET/CT about 2 months ago only demonstrated some mild to moderate emphysema mostly in the upper lobes. Therefore, there has been a relatively dramatic change in a few months, suggesting a more subacute process, rather than an acute infectious process such as a viral pneumonia, including COVID-19 infection, in which the GGOs tend to be subpleural and peripheral. Overall, our suspicion for COVID-19 is relatively low, with negative testing x2 yesterday, negative testing a few weeks ago, and lack of sick contacts, but it is possible. Therefore, higher on the differential is a more subacute infection or chemotherapy-induced pneumonitis. Risk factors include malignancy, chemotherapy, and use of steroids (equivalence of about 27 mg of Prednisone in the form of Dexamethasone since 11/6/20 without PJP prophylaxis). These risk factors, along with consistent imaging and elevated LDH, make PJP quite likely. Fungal infection is less likely based on imaging. Chemotherapy-induced pneumonitis is a possibility, especially given the more subacute picture based on imaging. Both Gemcitabine and Docetaxel can cause pneumonitis. However, the patient has been on steroids, which is used to treat drug-induced pneumonitis, although this does not exclude it completely."" 1/2/21: Transferred to ICU for worsening hypoxemia as patient reached 40L/100% FIO2 and remained on	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	COVID isolation/COVID patient under Adverse Event Description	Current Illness
					<p>investigation per ID recommendation. 1/4/21: Isolation precautions discontinued due to lower suspicion for active COVID infection to explain current presentation 1/6/21: Went into atrial fibrillation w/o RVR overnight 1/6. Tolerating, with MAPs in low 60s and HR in high 90s/low 100s. Suspect due to being-1L yesterday from diuresis, lasix stopped. S/p amiodarone bolus + drip, albumin 5% bolus 1/5/21: Macrocytic anemia NOS w/ slowly worsening H/H s/p PRBC x 1 unit 1/7/21: Per ICU Life-sustaining treatment note, ""Following discussion w/ patient that his lung dx has been refractory to txt and hasn't improved despite maximal therapy, patient agreed to transition to hospice after he settles affairs. "" 1/7/21 Infectious Disease note: ""This is an immunocompromised host due to cancer on active chemotherapy (albeit ANC&gt;4000 on admission) and notably had been on daily PO dexamethasone 1 mg TID (total daily dose 3 mg, equivalent to 20 mg PO prednisone) since 11/6/20 without any PJP ppx. There was elevated c/f COVID-19 infection in setting of patient's presenting symptoms, especially in conjunction with b/l GGOs on imaging. Has undergone multiple COVID test that have all resulted negative. Discussed radiographic findings with radiology colleagues, and overall, it is difficult to definitively narrow the differential with imaging alone, but overall density of GGOs seem to appear less likely PJP and more in line with chemical pneumonitis vs COVID, although less typical for viral pneumonia as well. Given false-negative COVID tests are not unheard of, especially in the immunocompromised population, patient was kept on isolation precautions as a PUI for abundance of caution. He is now off precautions. In setting of patient having been on prednisone for some time without PJP ppx, he was also started on treatment dose TMP/SMX. Beta-d-glucan has returned positive, and although not the ideal test for PJP, this can certainly support a potential dx of PJP. Unfortunately, DFA from sputum was not performed due to insufficient sample and currently the patient is unable to produce an additional sample for testing. He is tolerating the high-dose TMP/SMX; we adjusted the dose to three SS tablets TID based on his somewhat declining UOP. Other fungal etiologies are pending work-up as well. Lastly, patient's chemotherapy is known to cause pneumonitis, but per pulmonology team, he receives prophylactic dexamethasone with his chemo cycles that should help to prevent drug-induced pneumonitis. Remains on the differential for now and this should also be concurrently treated with the steroids he is receiving."" 1/10/21: Comfort care initiated. All non-comfort measures were discontinued. Time of death: Jan 10,2021@14:56; immediate cause of death per death note is ""hypoxic respiratory failure""""</p>	

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Dec., 2020	Unknown	<a href="#">963902-1</a>	Death; This is a spontaneous report from four non-contactable consumers via a Pfizer-sponsored program Corporate (Pfizer) Social Media Platforms. A 78-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration, on 28Dec2020 at a single dose for COVID-19 immunization. Ongoing medical history included Alzheimer's Disease, encephalopathy, hypertension, acute kidney failure, urinary retention and recent urinary tract infection (UTI), all from an unspecified date. Concomitant medication included acetaminophen (MANUFACTURER UNKNOWN), bisacodyl (MANUFACTURER UNKNOWN), bupropion (MANUFACTURER UNKNOWN), escitalopram (MANUFACTURER UNKNOWN), hydrocodone bitartrate, paracetamol (HYDROCODONE/ACETAMINOPHEN), loperamide (MANUFACTURER UNKNOWN), ondansetron (MANUFACTURER UNKNOWN), senna alexandrina (SENNA PLUS), vitamin d3 (MANUFACTURER UNKNOWN). The patient had no known drug allergies. The patient experienced death on 30Dec2020. The vaccine was given on 28Dec2020 with no adverse events and no issues on 29Dec2020. The patient died on 30Dec2020, at approximately 2:00 AM. It was unknown if an autopsy was performed. It was unknown if the event was related to the suspect drug, the administrator marked as natural causes. No follow-up attempts are possible; information about batch/lot number cannot be obtained.; Reported Cause(s) of Death: Death	Acute kidney failure; Alzheimer's disease; Encephalopathy; Hypertension; Urinary retention; UTI
PFIZER\BIONTECH	Death	Dec., 2020	Unknown	<a href="#">965547-1</a>	resident coded and expired; This is a spontaneous report from a non-contactable consumer via Pfizer Sponsored Program. A 63-year-old male patient received the 1st dose of bnt162b2 (BNT162B2, Lot # EH9899) intramuscular at single dose at left arm on 28Dec2020 for Covid-19 immunisation. Medical history included no current illness, no known allergies, but preexisting conditions: dysphagia, violent behaviors, depressive disorder, schizophrenia, aspiration, gastroesophageal reflux disease (GERD), hyperlipidaemia, bipolar disorder, rectal bleeding, hypertension. The patient had no birth defect. Concomitant medication included asa (ASA) at 81mg, lisinopril (LISINOPRIL) at 10mg daily, ferrous sulfate (FERROUS SULFATE) at 325 (unit unknown), olanzapine (ZYPREXA) at 20mg, morniflumate (FLOMAX [MORNIFLUMATE]) at 0.4 (unit unknown), famotidine (FAMOTIDINE) at 20mg, ascorbic acid (VIT C), carbamazepine (CARBAMAZEPINE) at 250mg bid, valproate semisodium (DEPAKOTE) at 750mg bid, metformin (METFORMIN) at 1000 (unit unknown) bid, sertraline (SERTRALINE) at 100 (unit unknown) bid, albuterol [salbutamol] (ALBUTEROL [SALBUTAMOL]), buspirone hydrochloride (BUSPAR) at 10mg tid, polycarbophil calcium (FIBERCON). The patient died on 29Dec2020. The patient had no ER or Doctor visit and was not hospitalized. It was not reported if an autopsy was performed. No follow-up attempts are possible. No further information is expected.; Reported Cause(s) of Death: resident coded and expired	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Dec., 2020	Unknown	<a href="#">970042-1</a>	patient passed away with in 90 minutes of getting vaccine; This is a spontaneous report from three non-contactable consumer reporting on behalf of the patient via a Pfizer sponsored program, Corporate (Pfizer) Social Media Platforms. A 90 (unspecified unit) old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; Solution for injection, lot number: EL0142, unknown expiration), via an unspecified route of administration in right arm (reported as AR) on 30Dec2020 at a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. It was reported that the patient was a nursing home patient and received the first dose of COVID vaccine on 30Dec2020. The patient was monitored for 15 minutes after getting shot. Staff reported that the patient was 15 days post COVID. The patient passed away with in 90 minutes of getting vaccine on 30Dec2020. The patient did not require office/ ER visit. An autopsy was not performed. No follow-up attempts are possible. No further information is expected.; Reported Cause(s) of Death: Patient passed away with in 90 minutes of getting vaccine	No current illness for this event.
PFIZER\BIONTECH	Death	Dec., 2020	Unknown	<a href="#">970044-1</a>	reported causes of death :circulatory collapse; asystole; reported causes of death :circulatory collapse; asystole; This is a spontaneous report from a Pfizer-sponsored program received from the Regulatory Authority-WEB GB-MHRA-WEBCOVID-20201214111558, safety Report unique Identifier GB-MHRA-ADR 24542972 and EU-EC-10007191566 received via Regulatory Authority 908245. A contactable pharmacist and three consumers reported that an adult female patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 13Dec2020 at a single dose for COVID-19 vaccination. The patient's medical history was not reported. Concomitant medications included acetylsalicylic acid, amiloride HCl, allopurinol, desogestrel, furosemide, levothyroxine, sildenafil, and spironolactone. The patient experienced circulatory collapse and asystole on 13Dec2020. The patient died due to asystole and circulatory collapse on 13Dec2020. It was unknown if an autopsy was performed. No follow-up attempts are possible, information about lot/batch number cannot be obtained. No further information Is expected.; Sender's Comments: The information available is limited and does not allow a meaningful case evaluation. However, based solely on a close chronological association (same day) a causal relationship between events circulatory collapse and cardiac arrest and BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) cannot be completely excluded. The case will be reevaluated should additional information become available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: reported causes of death :circulatory collapse; asystole; reported causes of death :circulatory collapse; asystole	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	18-29 years	<a href="#">943397-1</a>	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.	None

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	18-29 years	<a href="#">960841-1</a>	Patient developed 104.4 temp approximately 48 hours after being given the vaccine. I treated him with antibiotics, IV fluids, cooling methods. CXR does show a new right perihilar infiltrate. However, his fever came down within the next 24-48 hours. Unfortunately, he suffered a cardiac arrest on 1/21/21 in the early morning and expired.	none
PFIZER\BIONTECH	Death	Jan., 2021	30-39 years	<a href="#">921667-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	30-39 years	<a href="#">948418-1</a>	Expired on 1/12/2021; unknown cause of death	Received 1st Covid vaccine 12/18/2020; 2nd 1/7/2021. This patient is now deceased 1/12/2021.
PFIZER\BIONTECH	Death	Jan., 2021	40-49 years	<a href="#">937527-1</a>	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.	unknown
PFIZER\BIONTECH	Death	Jan., 2021	40-49 years	<a href="#">967240-1</a>	Patient unexpectedly died on 01/6/2020. No known signs or symptoms.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	40-49 years	<a href="#">981407-1</a>	Expired in sleep on 1/24/21	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	40-49 years	<a href="#">982826-1</a>	Was at work on 1/26/21 and collapsed, no known complaints a the time. CRP was initiated immediately, transported to ER and pronounced dead	immunocompromised with reportable conditions
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">921768-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">933739-1</a>	"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."	Recent g-tube placement, Several hospitalizations over the pas few months due to low Oxygen Levels.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">934968-1</a>	<p>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</p>	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">938118-1</a>	on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm	none mentioned
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">942106-1</a>	<p>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.</p>	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">944595-1</a>	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	No known new illnesses,
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">955597-1</a>	Death	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">958072-1</a>	Death 3 days after receiving 2nd dose of COVID vaccine, unknown if related to vaccine administration.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">965910-1</a>	The employee found dead at her home on 1/21/2021.	not known
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">967399-1</a>	Sudden death	No
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">971800-1</a>	Patient expired - autopsy preformed - cause of death not related to COVID-19 vaccination according to coroner.	Unknown - Smoker
PFIZER\BIONTECH	Death	Jan., 2021	50-59 years	<a href="#">981225-1</a>	Patient with inoperable pancreatic cancer received second Pfizer vaccine approximately 12:30 pm on 1/27/21. At approximately 16:30, patient complained of abdominal pain and was given Levsin 0.125mg and morphine 5mg orally. At approximately 19:30 patient was found on the floor covered in a large amount of emesis, unresponsive without a pulse.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">924464-1</a>	coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer	COPD, lung cancer
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">933090-1</a>	Patient died, I have a copy of his vaccination card	Unknown
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">935815-1</a>	Difficulty breathing, death.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">942085-1</a>	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, SaO2 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.	Medical diagnosis: quadriplegia, Atherosclerotic heart disease
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">944439-1</a>	Resident expired on 1/2/21.	Receiving hospice services

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">956458-1</a>	Patient was vaccinated for SARS-CoV-2 on 6-Jan-21 at his site of employment, a Nursing Home. Patient presented to Urgent Care on 15-Jan-21 complaining of left sided chest pain that started the evening before with an associated slight cough. Pt was afebrile with a heart rate of 88 and an O2 sat on room air of 98% in triage. His EKG showed a sinus tachycardia of 114 with a slightly prolonged QTc of 463 ms. Physical exam was significant for bibasilar crackles and X-ray showed bibasilar infiltrates consistent with COVID pneumonia but bacterial pneumonia could not be excluded. The patients BP was documented as 97/64. He was treated with Zofran for nausea and tylenol. He was prescribed a five day course of Azithromycin, an Albuterol inhaler, guaifenesin with codeine cough syrup, and Zofran. Labs were drawn and he was discharged. His lab results were reported after his departure and were significant for a white blood cell count of 1.33, platelet count of 73, 2% myelocytes, 1% metamyelocytes, an absolute neutrophil count of 0.75 K/uL, a creatinine of 1.83, total bilirubin of 1.3, with direct bilirubin of 0.8, alkaline phosphatase of 294 and AST of 112 with ALT noted to be within normal limit. His COVID nasopharyngeal swab from the visit was reported as negative and a swab performed at his employment on 13-Jan-21 was also reported to be negative. Patient could not be reached by phone after discharge from Urgent Care about these labs. On the evening of 16-Jan-21, Police Department received a 911 call about an adult at the patient's address who was found unresponsive. Upon arrival on scene, the patient was found to be deceased and a decision was made not to attempt to resuscitate. The death was deemed to be non-suspicious and the patient's body was transported to a funeral home. On 19-Jan-21, I contacted the State Medical Examiner's Office. They have decided to perform an autopsy and have recovered the CBC and chemistry specimens obtained for further testing.	None
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">958322-1</a>	Shaking and then became unresponsive	Hyperlipidemia, Head Trauma, Hx of Seizures, Unspecified Psychosis, Depression, Mood Disorder, Substance Abuse
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">961705-1</a>	approximately 3 hours prior to expiring the patient was experiencing forceful emesis. later was found to have expired, patient was comfort care only.	none
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">962716-1</a>	Patient deceased	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">967830-1</a>	Patient was brought to the ED from facility which he received the vaccine via ambulance with BiPAP, hypoxia, and one dose of Epi of 0.3 mg. He then required intubation, and had struggled with hypoxia, even on increasing PEEP. CODE BLUE called in the ED for PEA. He was medicated for such (please see the code run sheet for details), and he came in and out of the code 5 times. After 95 minutes, with the wife at the bedside, and family conference by phone, the code was called, and he was pronounced at 18:20. He received in total 8 mg of Epi, 3 shots of Atropine, 3 amps bicarb. He got lasix 40 mg, lovenox 60 mg subcutaneous once. He had a CVC into the right internal jugular, and levophed was started, then Epinephrine drip was started. Prior to the code he got steroids (solumedrol 125 mg, then later decadron 6 mg iv), benadryl iv, antibiotics (ceftriaxone / zithromax), and lasix 40 mg. All this time while in the ED, the Rt was at the bedside, and lots of secretions from the lungs were aspirated, bloody color. A Code was the result of PEA secondary to hypoxia (	HTN, DM2. COVID-19 infection, 12/24/20.
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">979101-1</a>	cardiac arrest - no warning signs	none

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">982778-1</a>	""We held our COVID 19 vaccination clinic in our facility on 1/5/2021 with partnership of a pharmacy. One of our housekeeping staff (63 year old male) who had confirmed to be vaccinated, came to the facility and was vaccinated by the pharmacist with Pfizer vaccine. The pharmacist explained the facts of vaccine and the employee signed the consent form for the vaccine. He was monitored in our observation area under the supervision of an RN post vaccination for 15 minutes. He did not complain of any side effects and did not appear to be in any distress. Per daughter, employee went to his pharmacy in the evening some time after leaving the facility. Daughter reported that he called his wife from the pharmacy and asked his wife to come and pick him up as he did not feel well. His wife went to the pharmacy and found him in the parking lot where he gave her his medical card and asked her to get his medication from the pharmacy. His wife went to pick up the medication and upon her return, found him in the car in the passenger seat. The daughter reported that he took the medicine that the wife brought from the pharmacy while in the car. His wife drove him home and upon reaching home when she tried to get him out, he was unresponsive. His wife called her children to help her and there was no response. Family called the paramedics and he was pronounced dead. I have informed pharmacy and they are reporting to FDA per their protocol. PHD has been notified as well and they are doing their reporting per their procedure. Daughter reported that employee had a history of heart disease and diabetes and had a pace maker.""	At the time of the clinic when the patient filled out the VAR form, he did not indicated any health issues. However, according to an e-mail the Health Care Facility sent us, he had a history of heart disease, diabetes, and a pace maker.
PFIZER\BIONTECH	Death	Jan., 2021	60-64 years	<a href="#">982929-1</a>	Client was being treated with antibiotics by her PCP for diverticulitis flare up. It had not been resolved on the date of her death which occurred 01/27/21, She was found unresponsive by staff, 911 contacted, and paramedics pronounced her deceased at 7:48 AM. After consultation with PCP manner of death was noted as cardiac arrest. PCP was to sign off on death certificate.	Ongoing Sinus and ear infections being treated by PCP
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">918388-1</a>	Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue	No acute illness at time of vaccination. History of: CVA SCPT Dementia Seizure Disorder HTN COPD
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">918418-1</a>	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 started on 1/1/2021. History of: Osteomyelitis CVA Pain Pressure Ulcers PVD Hepatitis C COPD HTN HLD Constipation SCPT Anemia Seizure disorder Depression AKA
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">920545-1</a>	"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."	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">920832-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">921175-1</a>	Resident received Covid Vaccine, noted after 30 mins with labored breathing BP 161/77, HR 116, R 38, T 101.4,	CHF, COPD, DM, heart failure, anemia, sleep apnea



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">921481-1</a>	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 condition reported, doctor and Hospice ordered comfort meds (Morphine, Ativan, Levsin). Resident expired on 1/4/2021	Dementia Chronic PVD
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">921880-1</a>	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	was under hospice care
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">924456-1</a>	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.	COVID-19 detected after vaccination; asymptomatic
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">925556-1</a>	Expired 1/05/2021	Acute on chronic heart failure, sepsis
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">926269-1</a>	"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"	Fracture of right superior and inferior pubic rami, fracture of the right sacral ala, and fracture of the L3 vertebral body. UNSPECIFIED PROTEIN-CALORIE MALNUTRITION
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">926462-1</a>	Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021	dementia, Upper gastrointestinal bleed
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">927189-1</a>	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	stroke
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">928062-1</a>	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.	Parkinson's Disease with advanced dementia, dysphagia. Alcoholism in remission. HTN. BPH. GERD
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">929359-1</a>	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	Cerebral Atherosclerosis, malnutrition, thrombocytopenia, cva, hypothyroidism
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">930466-1</a>	Fever, shortness of breath and chest pain that resulted in a heart attack a few hours after vaccination	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">932346-1</a>	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	none known
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">932787-1</a>	RECIEVED VACCINE 1/8/21 EXPIRED UNEXPECTED 1/10/21, NO ADVERSE REACTIONS NOTED	PNEUMONIA
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">934059-1</a>	Acute anterior MI with death	Had Covid 19 infection in November recovered, had spinal stenosis with leg weakness chronic

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">934373-1</a>	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.	Newly diagnosed heart murmur the week prior by PCP. Was referred to her cardiologist.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">934507-1</a>	Resident died suddenly and expectantly on 01/05/2021	No other illness prior to vaccination or within the month prior
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">935343-1</a>	There were no adverse reactions. Resident Died, she had a history of issues with her health prior to the vaccine.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">935767-1</a>	My mother was given Pfizer vaccine on Thursday and she died 3 days later yesterday on Sunday!!!	Pneumonia
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">936738-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">937444-1</a>	Resident was found deceased at approximately 6pm in her apartment	Brain bleed, sleep apnea, htn
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">938974-1</a>	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.	Hospice
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">939845-1</a>	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.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">940822-1</a>	<p>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</p>	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">940954-1</a>	<p>"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"</p>	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">940955-1</a>	<p>"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"</p>	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">941215-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">942040-1</a>	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.	none
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">942072-1</a>	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 pneumonia-completed treatment prior to vaccination.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">942290-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">943266-1</a>	Initial pain in back of head and extreme headache. Some vomiting. At emergency, went into coma and was intubated. Hole drilled in skull to relieve pressure. MRI taken. Lot of bleeding in brain - aneurism lead to death approximately 14 hours after initial symptoms.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">944282-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">944998-1</a>	On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">945241-1</a>	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.	UNK
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">945247-1</a>	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	Nothing acute prior

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">945253-1</a>	"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"	UNK
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">945578-1</a>	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.	Had a tooth extraction done on 1/6/21. Was on amoxicillin for 7 days and it caused diarrhea. Changed to Keflex.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">945603-1</a>	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.	Hospitalized for abnormal heart rhythm 12/18/20.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">946225-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">946959-1</a>	Sudden death 18 hours post vaccine .	Post COVID-19 complications, A-fib, CHF
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">947642-1</a>	died two days after receiving the vaccine; Fever; This is a spontaneous report from a contactable consumer (patient's stepchild). A 66-year-old male patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration, on 07Jan2021 (at the age of 66-years-old) as a single dose for COVID-19 immunization. The patient's medical history was not reported. Concomitant medications included an unspecified statin. The patient experienced fever on 08Jan2021. The patient died two days after receiving the vaccine on 09Jan2021, which was reported as fatal. The clinical course was reported as follows: The patient had a fever the day after getting the vaccine and then he just died in the middle of night. It was reported that it was not clear what exactly happened, but they are looking into this. The clinical outcome of fever was unknown and of died two days after receiving the vaccine was fatal. The patient died on 09Jan2021. The cause of death was not reported. An autopsy was not performed (was reported to be taking place soon). The batch/lot number for the vaccine, BNT162B2, was not provided and has been requested during follow up.; Reported Cause(s) of Death: died two days after receiving the vaccine	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">947974-1</a>	Resident was found without a pulse and not breathing 20 minutes after vaccine administration. Upon MD review, no signs of anaphylaxis were noted.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">948150-1</a>	increase weakness and fatigue, weakness in extremities, incontinent, jerky arm movements, within first 24 hours, continue to decline sent to hospital returned weaker, within 24 hrs BP dropped, low pulse oximeter reading, diaphoretic, lung sounds diminished, loss consciousness and passed away. 01-12-2021	pneumonia,
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">948228-1</a>	Patient reportedly expired the day following receipt of the vaccine.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">949547-1</a>	"The patient stated "" I just feel Blah"". vital signs obtained. 156/75 p-84 spo2 94% via NC 2L. T-96.7, c/o feeling restless, c/o nausea with no vomiting. Patient observed at 0600 nonresponsive, CPR initiated, and EMS notified Patient expired"	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">949657-1</a>	Veteran was found by family slumped over and unresponsive at the breakfast table on 1/13/21, had expired	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">949965-1</a>	Patient 101 years old, nursing home resident, received vaccine 1/11, on 1/13 found on floor without obvious trauma, unresponsive. Brought to ED and was bradycardic, hypotensive, hypothermic and refractory to aggressive medical management. No obvious cause of death found on exam or labs, cxr. Unknown if event could be related to vaccine or not. Medical Examiner accepted case although initially unknown that patient had recently received vaccine. ME updated with that information today as soon as discovered.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">950441-1</a>	Pt had witnessed arrest by wife. Pt wife started CPR and called EMS. CPR started at 15:12. Continued by EMS. Pt arrived to medical center asystole with CRP in progress and ventilated via igel device. He was in refractory ventricular fibrillation and continued CPR for a total of 1 hour. At that point, we checked a bedside ultrasound which showed his heart at a standstill. He was unresponsive to verbal and tactile stimulus and had fixed unreactive pupils. He was pronounced at 16:13.	Chronic systolic heart failure Coronary artery disease involving native coronary artery of native heart without angina pectoris
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">950893-1</a>	Death	Diabetes dementia, cli, trigeminal neuralgia
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">951101-1</a>	PATIENT GOT HER FIRST COVID PFIZER VACCINE AT 12/31 IN THE AM. HAD GOTTEN FLU LIKE SYMPTOMS AND HAD BEEN SICK FOR A COUPLE OF DAYS. HAD NAUSEA AND VOMITTING DURING THIS TIME AS WELL. ON 1/3 THE CARE GIVER WENT TO CHECK ON HER PT AT HER LTC FACILITY WHERE SHE LIVES AND SHE WASN'T ACTING RIGHT. SHE WAS UNABLE TO DO A STROKE EXAM. PT HAD NO MOVEMNET IN ARMS OR LEGS AND WAS UNABLE TO SPEAK. PT WAS VITALLY STABLE AT THE TIME. EMS RECORDED THAT THEY THOUGHT DIAGNOSIS WOULD BE STROKE, PNEUMONIA OR SEPSIS. AFTER ARRIVAL AT THE HOSPITAL DETERMED THAT SHE HAD A STORKE, ACUTE KIDNEY INJURY, ABNORMAL LFTS.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">951519-1</a>	Narrative: Symptoms: Palpitations & Syncope Treatment: EPINEPHRINE 1 MG ONCE ,EPINEPHRINE 1 MG ONCE ,SODIUM BICARBONATE 50 ML ONCE	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">952704-1</a>	Daughter call in for VAERS report to file for father whom committed suicide 1/16/2021 in the AM after reportable ae of COVID 19 vaccine administered 1/14/2021. Patient sought care twice at ER; first visit by ambulance around 5PM and Friday 1/15/2021 Medical Center: Emergency Room. 1st Discharge summary diagnosis: adverse reaction to COVID shot; 2nd Discharge summary diagnosis: adverse reaction to COVID shot, fever, Panic Disorder-- ER. Medical Center Discharge summary diagnosis: Adverse reaction to the vaccine, acute anxiety. Reportable patient symptoms at, 1st visit : fever, shaking stomach cramps, breathing issues. Medical Center -- No fever, confusion and dementia type, patient would not stay in patient bed; patient would get up and sit down again repeatedly, agitated and anxious. Attempted to urinated hospital bed. Patient committed suicide in home.	Pneumonia 12/20 not Covid19 related
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">952799-1</a>	On 1/17/2021 at 4:35 am resident found apneic and pulseless, at 4:40am death confirmed	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">953183-1</a>	1/11/21 at 8:57 Resident with fever and at 11 am saturation down to 83 O2 to 10 liters. Resident continued to decline until CTB on 1/14/2021 at 1325	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">953590-1</a>	resident expired; This is a spontaneous report from a contactable healthcare professional. An 82-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot number: EL0140), intramuscular in the left arm on 05Jan2021 15:00 at a single dose for COVID-19 immunization. Medical history included metabolic encephalopathy from, failure to thrive (FTT), diabetes mellitus (DM) 2 , chronic obstructive pulmonary disease (COPD), arthritis, weakness, hyperlipidemia, chronic kidney disease (CKD), dementia. Known allergies was none. The patient took unspecified concomitant medication. On 11Jan2021, the resident expired. The patient underwent lab tests and procedures which included nasal swab: negative on 09Jan2021. There was no treatment given for the event. The patient died on 11Jan2021. An autopsy was not performed.; Sender's Comments: Lacking information on the cause of patient's demise, the Company cannot completely exclude a causal relationship between COVID 19 vaccine, BNT162B2, and patient's death of unknown cause, as a cautionary measure and for reporting purposes. The patient's pre-existing medical condition of metabolic encephalopathy from, failure to thrive (FTT), diabetes mellitus (DM) 2 , chronic obstructive pulmonary disease (COPD), arthritis, weakness, hyperlipidemia, chronic kidney disease (CKD), dementia may have provided the contribution to the event in this 82-year-old male patient. The impacts of this report on the benefit/risk profile of the 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 expired	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">953754-1</a>	patient suddenly developed pneumonia 7 days after vaccination and died the evening of developing pneumonia	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">953865-1</a>	REPORTING ONLY AS RESIDENT EXPIRED ON 1/17/2021 3 DAYS AFTER. S/S HYPOXIA/CONGESTED LUNG SOUNDS	NONE

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">954251-1</a>	71 year old woman at rehabilitation center for physical therapy with history of cirrhosis of the liver, asthma, and heart condition was tested for COVID-19 on 01/07/21, received 1st dose of Pfizer COVID-19 vaccine on 01/08/21, positive test result for COVID-19 received on 01/09/21. She was sent to the hospital and admitted on 01/12/21 after O2 was 70% and was in a confused state. Patient passed away on 01/17/21.	Cirrhosis of the liver, asthma, heart condition
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">954812-1</a>	She had the first dose of Pfizer vaccine at the Campus on Friday 1/15 at 4:30 pm. After the vaccine, she had no new symptoms or signs of vaccine reaction and MD friend reports that he checked her pulse which was not elevated from baseline. On 1/16, she awakened and continued to feel at her recent baseline. However, in the early afternoon, she complained of headache, nausea/epigastric pain, and chest heaviness. These apparently were not unusual symptoms for her to feel intermittently. Per her niece, who has a home O2 sat device, her O2 sat that morning was 97 with a HR of 87 irregularly irregular. She was afebrile. (continue on page 2)	Unknown
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">955261-1</a>	Death	Hip fracture,
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">955390-1</a>	Resident received vaccination on January 15, 2021. She was found unresponsive with shallow respirations on the morning of January 16, 2021 and was sent to ER via ambulance. The resident was admitted to medical center ICU where she passed away later that day.	unknown
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">955436-1</a>	patient received vaccine 12/29. Unexpected death 1/5.	CAD s/p CABG, prior ischemic HFpEF (EF 45% > 50%), mild-mod Mitral Stenosis, bradycardia s/p PPM, HTN, HLD, DMII (A1C 6.5), CKD (baseline Cr 2-2.5), GERD, BPH, seizure disorder (on keppra)
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">956365-1</a>	12/28/2020: generalized weakness and fell twice at home, cough, nausea, 1/04/2021: cough, nausea, fever and chronic pain when she fell from being weak. admitted to hospital with Covid pneumonia, shortness of breath, covid positive, 1/09/2021: pt on bipap, 1/15/2021: pt was intubated, on TPN, pt DNR, 1/18/2021: was extubated and put on comfort measures and passed away	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">956761-1</a>	Family was told that Patient expired in his sleep during the early morning hours of 1/15. I spoke with him the evening before (on 1/14), which was a day after he had received the Covid vaccine. He was not having any symptoms of allergy or reaction then. He did say that he felt tired, but he often complained of feeling tired over time.	episode of congestive heart failure two months ago requiring hospitalization
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">956843-1</a>	Resident was found deceased in his bed at 7:15 am.	No illnesses at time of vaccination or up to one month prior
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">959079-1</a>	On 1/9/2021 observed with elevated respirations of 38-42 per minute, BP manually 72/50. pulse is jumping rapidly between 110-16 bpm. oxygen sat 76% RA, resident refusing oxygen at first attempt, allowed oxygen to be placed, is now 84% on 4L. resident shaking head yes that he is hurting, and yes that he would take medication for pain. Dr. notified, branch block. Received order for morphine 2mg per hr as needed for elevated respirations and pain. Dr. also gave orders to D/C Tamsulosin and finasteride. Resident continue with decreased O2 sats and elevated respirations. Absence of vital signs on 1/10/21 at 826PM.	Residents condition was declining over the past several months and has been treated for depression and dementia. Resident refusing care including meals, medication and ADL care.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">959179-1</a>	Patient received COVID-19 vaccination on 1/14/2021. On 1/17/2021, patient was transferred to Hospital s/p multiple cardiac arrests. Patient was hyperkalemic and in acute renal failure at time of transfer. Hyperkalemia was treated, but the patient suffered PEA vs VFib. At the time of transfer, patient was on vasopressin, norepinephrine, and epinephrine. The patient had an EF of 40-45% and elevated troponins. Patient was made DNR and placed on comfort care. Patient passed away on 1/18/2021. Ultimately we suspect that the patients condition was a direct result of his underlying disease states, but wanted to make sure reporting was made available.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">959929-1</a>	"Narrative: Patient seen in ED 1-17-21 with c/c of ""bloated with epigastric pain"". Patient with complicated medical history including stage 1B pancreatic cancer (was currently on chemotherapy mFOLFIRINOX), and a leadless permanent pacemaker implantation on 1-11-21 for long episodes of SR with complete heart block following symptoms of syncope (other cardiac history: CAD s/p CABG 2009, PAF, and HTN). Regarding ER visit for epigastric pain, nothing notable was found on workup and patient was to discharge home to rest. There were available doses of COVID-19 Vaccine following a vaccine clinic that same day, and patient was offered and agreed to a dose of vaccine. Patient was monitored for 15 minutes post vaccine with no notable issues. The following day, Monday 1-18-21, patient's caregiver called facility at 22:30 to report he had a fever of 102.8 degrees and that he had been ""feeling kind of bad all day"". Patient was advise to seek urgent medical care and reported back to ED on 1-19-21 at 00:55. Patient wasd admitted for SIRS (tachycardia and febrile) -- patient also reported diffuse myalgia. WBC WNL, CXR unremarkable for infection, UA neg for bacteria, LFTs WNL, blood cultures negative. Procalcitonin elevated at 17.8 -- suggesting inflammatory response. Patient initially reported feeling better on the morning of 1-19-21, but around 13:00 began rapidly declining (confusion, unable to walk) and started experiencing EKG changes (9 beats of SVT). Patient then coded and resuscitation was attempted for approximately 30 minutes. Patient did not survive the code. Coroner has been notified and family is considering autopsy at time of this report."	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">960460-1</a>	<p>"died; tested positive for COVID; tested positive for COVID; This is a spontaneous report from a contactable consumer from a Pfizer-sponsored program, Pfizer First Connect. A 97-year-old male patient received the first dose of the bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on 30Dec2020 at 97-years-old at a single dose for COVID-19 immunization; administered by the nursing home. Medical history included glaucoma from an unknown date and unknown if ongoing. Concomitant medications included: ""used a sav for skin tears"", and ""eye drops for glaucoma"" from an unknown date to an unknown date. On 07Jan2021, the patient experienced: tested positive for COVID (medically significant). The patient died (death, medically significant) on 17Jan2021. The clinical course was reported as follows: The reporter stated that in regard to the patient's height and weight: ""was probably getting down to about five foot eight. Shrinking."" The reporter stated that If she remembered correctly, they were trying to maintain the patient's weight 135 to 136 pounds. The reporter stated that her father was in a nursing home. The patient received his first dose of the COVID vaccine on 30Dec2020. The patient died on 17Jan2021. The reporter stated that she ""wanted Pfizer to know that the little old people in the nursing might not be strong enough for the vaccine."" The reporter stated that she was ""not calling to complaining."" The reporter stated that there was nothing wrong with her dad. He was elderly with no health issues. ""He was literally on no medications. The only reason he was in the nursing home was because he was afraid to walk."" The reporter stated that she received a call about giving the patient the vaccine and she said yes because she wanted him to have the vaccine. One week after the vaccine, the patient tested positive for COVID ""like all the other people"" (no further details provided). The reporter stated that her dad had no symptoms of COVID. The director of nursing said the patient was doing so well. The patient ate his lunch, he laid down for nap, and at 14:30 he was gone. The patient ""went peacefully in his sleep."" The reporter then again stated that the patient literally had nothing wrong with him. ""They were shocked. They fed him and he took a nap. He was sleeping, but it was eternally."" The reporter stated that, ""it might not have been the Pfizer vaccine, maybe his heart wore out."" In regard to an autopsy: the reporter stated that they would get it done if needed. The patient underwent lab tests and procedures which included COVID-19 virus test: positive on 07Jan2021. History of all previous immunization with the Pfizer vaccine considered as suspect: none. It was unknown if there were additional vaccines administered on the same date of the Pfizer suspect, but the reporter doubted it. There were no prior vaccinations within 4 weeks. There were no adverse events following the prior vaccinations. The clinical outcome of the event, died, was fatal. The clinical outcome of the event, tested positive for COVID, was unknown. The patient died on 17Jan2021 due to an unknown cause of death. An autopsy was not 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: died"</p>	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">960552-1</a>	At approximately 930am I arrived at Memory Care. I met with the director of the facility and she directed me to where my team would be setting up. My team consisted of (technician), (nurse) and I. As we were setting up, the director asked how she can help. I explained to her that we would need a designated area for patients to be monitored after vaccination for 15 minutes and maybe even longer . I also explained that we would need one of her staff monitoring while we vaccinate. She agreed, and proceeded to designate her staff and the cafeteria area, facing the vaccination station,the monitoring station. Throughout the day, nurse and I were both vaccinating,while the staff of the facility would monitor the vaccinated patients. I would also stop occasionally to mix the vaccine and check the temperature of the aero safe. At approximately 12:50pm, the director rushed in and stated that a patient is not responding, and that she had been vaccinated. At that point, I grabbed epipens and a thermometer and I also instructed nurse to grab an Epipen and come with me. We followed the director to pt's room. Once we got to the room, the patient was in bed and there were 4 staff members standing bedside and one of them turned and stated the patient has passed. At that point I asked the staff how long ago did the patient get the vaccine, they stated about 30 minutes ago. They also stated that the patient was a hospice patient and that the patient had declined, and was rapidly deteriorating and had not eaten or drank anything all day . They also stated that the patient had been monitored for 15 minutes post vaccination. I then left the room and grabbed the patients COVID Vaccine intake consent form. I looked at the answered questionnaire and all the responses were circled NO. Patient had a temp of 96.5 at the time of vaccination.The vaccine administration information for Immunizer Section was filled out by Nurse. I then proceeded to ask the director once again if there were staff that was monitoring her for 15 minutes, the director stated they had staff monitoring her. She also stated the Hospice nurse has to announce her death, so they waited for the Hospice Nurse to come. I then called Corporate and explained the situation. After speaking to corporate, I also asked nurse, if she remembered the patient. She stated that she did and at the time of the vaccination the patient was not alert, there were two staff members with the patient. She was non oriented and she kept closing her eyes. At that point, Nurse stated that she asked the two staff members with her if this is how she usually is and if its ok to vaccinate her. Both Staff members stated that it its ok,this is how she is. The Nurse then proceeded to vaccinate. At approximately 3:10pm, as I was leaving I spoke to the director, and one of her Staff members. Staff that the patient has actually not eaten/ or drank anything for the past several days, including today(01/18/21). Staff also stated that on Friday, Jan 15th,2021, they had informed the family that the patient was rapidly deteriorating. Staff also stated that the family knowingly gave the consent to vaccinate her. She also stated that the hospice Nurse believes that the death was primarily caused by her deteriorating state. She also stated that the hospice Nurse informed that the death was not due to the Vaccine. Per Lead Pharmacist at the clinic.	Patient was a hospice patient who was not doing well for several days per nurse. Patient had not eaten or consumed liquids in a few days.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">961010-1</a>	Resident returned to the memory support unit at 1500. Resident was than toileted and transferred in to bed per his request. At 1515 resident was observed face down beside bed, resident sustained a 1inX1in eccyhmotic/hematoma to the forehead. Neuro Checks with in normal limes Vital signs: 100/52, 100, 97.2, 28. Resident sent to ED for further medical evaluation via EMS.	n/a

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">961434-1</a>	This is a 94-year-old male who is brought in by ambulance after being found on the floor with unknown downtime. He was in asystole upon EMS arrival. He remains in asystole. No advanced airway is in place. The patient is getting compressions from Lucas device upon arrival. It was reported that he was last talked to by family at 2 PM. The patient got his SARS-CoV-2 vaccination this morning. The patient is evaluated emergently. CPR was ongoing with 3 rounds of epinephrine given. The patient remains in asystole. He has rigor mortis. The patient's pupils are fixed and dilated. The patient has compressions paused and ultrasound is used to evaluate for cardiac activity. None is detected. The patient has no electrical activity on monitor. The patient's time of death is 2113.	Chronic back pain
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">961776-1</a>	1/13/2021 12:00 PM: Patient received COVID-19 Vaccine. 1/14/2021 21:00: Nurse performed routine rounds and the patient appeared okay. 1/14/2021 22:00: CNA discovered patient unresponsive in bed, began CPR, and called 911. 1/14/2021 23:08: Pronounced deceased.	None
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962307-1</a>	tired; legs felt heavy; stopped breathing; This is a spontaneous report from a Pfizer-sponsored program a non-contactable consumer. A 93-year-old male patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 04Jan2021 11:00 at single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. Patient received vaccine around 11:00 a.m. About two hours later, he said he was tired and couldn't continue with the physical therapy he was doing. He was taken back to his room, where he said his legs felt heavy. Soon after, he stopped breathing. A nurse declared a do-not-resuscitate order. The patient died on 04Jan2021. It was not reported if an autopsy was performed. Outcome of stopped breathing was fatal. Outcome of tired and legs felt heavy was unknown. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: stopped breathing	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962325-1</a>	"Patient's wife called this morning stating that her husband has passed away last night. After receiving first dose of Pfizer COVID-19 vaccine at around 0830, patient remained in the Immunizations Department for the 15-minute monitoring period. Per wife, patient's only complaint was pain at the injection site. At 1300, wife states that patient complaint of dizziness which ""dissipated after a few minutes"" followed by a headache which ""dissipated after a few minutes"" as well. Then patient complained of nausea, no vomiting and ""couldn't relax."" Per wife, from around 1400/1500, patient stayed on his recliner while still having a conversation with her--""he didn't get up to eat."" Last conversation they had was around 2000/2100. Per wife, at around 2100/2200, patient was quiet and when she checked on him, ""he wasn't responding anymore."" Wife then called 911, ""but they couldn't revive him.""	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962390-1</a>	Admitted to hospital after vaccination with Acute hypoxemic respiratory failure, Septic shock; Aneurysm of arteriovenous dialysis fistula; expired 1/16/2021	intestinal adhesions with obstruction; Intestinal adhesions with partial obstruction; S/P colon resection; SBO (small bowel obstruction)

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962714-1</a>	We do not believe that the patient's death was an adverse event from the vaccine. Patient received COVID vaccine from Pfizer Dose #1 12/19/2020 (lot # EK5730) and Dose #2 1/7/2021 (lot # EL1284). No side effects or adverse events noted; lived in 24/7 care facility and monitored twice daily for reaction. Patient died 1/10/2021 from chronic respiratory failure and congestive heart failure after recent aspiration pneumonia requiring hospitalization. Death was anticipated and not sudden. We were told to report his death to VAERS even though his death was anticipated and not related to his vaccination.	Aspiration pneumonia (dx on 12/16/2020)
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962784-1</a>	patient expired 1/15/2021; had been treated as outpatient for pneumonia, likely COVID-19 but no positive test result in December 2020. PMH diabetes	PNEUMONIA
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962827-1</a>	Admitted 1/14/21: Patient is an elderly 93-year-old female with multiple medical problems including chronic combined CHF, P 80, diabetes mellitus, HTN, hyperlipidemia, CKD stage 3, has been complaining of generalized weakness, fatigue, decreased appetite for the past few days. She had an outpatient COVID-19 vaccine earlier today. Within 2 hr of admitting the patient to the hospital, condition clinically deteriorated. Patient elected to be DNR/DNI while in the ED. Patient was pronounced dead at 10:30 p.m. earlier today. Preliminary cause of death: Hypoglycemia induced lactic acidosis.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">962966-1</a>	On Saturday, 1/16/2021, Patient went to the grocery store. Upon her return, she indicated she was experiencing N/V and some throat swelling. Patient subsequently collapsed and expired before she could be brought to an emergency room. During investigation by Coroners Office, it has been reported that Patient may have gotten some takeout food while she was out. Labs are pending and the Coroners investigation is ongoing. Spouse believes that her death was caused by the vaccine.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">963057-1</a>	presented to ED 1/9/21 with abdominal pain, progressive worsening weakness and fatigue and new onset A fib with RVR likely due to hypertensive urgency . Patient progressed clinically with severe hypoxia and transferred to ICU and started on BiPAP; progressive decline with decreased urinary output with uremia likely secondary to sepsis. Concern with patient worsening clinical decline, palliative care had been consulted on end of life care. Patient expired 1/17/21	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">964617-1</a>	Death, which I believe is unrelated to vaccination	Alzheimers, Covid, COPD, Mood disorder, convulsions, HTN, anxiety, DM, parkinson's,
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">964653-1</a>	loss of consciousness; respiratory distress Narrative: Patient tolerated his 1st dose of the COVID-19 vaccine well, on 12/16/2020, and received his 2nd dose on 1/6/2021. Patient had some mild clinical decline the past few days prior to 2nd vaccination, with a decreased appetite and some increased fatigue per nursing report, but no significant changes. He experienced nausea on the evening of 1/6/21, which was effectively managed, but by early morning he spiked a fever of 102.9 with a sat of 86.1%. He continued to deteriorate from that point on and died 1/7/21 @13:20. Clinically, the presentation was most consistent with an aspiration pneumonia.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">964671-1</a>	Death on 1-5-21	DM, HTN, anemia, gout, BPH, atrial fib, heart failure, CAD, CKD,
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">964724-1</a>	Death 1-15-21	Dementia, Bipolar, COPD, HTN, Schizoaffective
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">964729-1</a>	Systemic: Vaccine administered 1/15/21, patient passed away on 1/18/21	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">964795-1</a>	Symptoms of fever (Tmax 102.9), diarrhea, and altered mental status started ~ 24 hours after vaccination. No evidence of septicemia with negative blood cultures Minimal improvement over 3 days, transferred to tertiary care center for MRI brain after which LP was recommended. However family declined as intubation would have been required and was not consistent with patient's goals of care.	Metastatic Renal Cell Carcinoma Diagnosed with COVID-19 on 12/7/2020, unknown severity of disease. Received first Pfizer SARS-COV-2 vaccine at the end of December
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">965565-1</a>	Narrative: Please note that patient is a hospice patient. Death occurred 10 days post vaccination. Providers do not believe that there was a correlation. Facility requires that we reports all death even if we suspect no correlation between death and vaccine. Symptoms: & death	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">966178-1</a>	Pt called son to let him know he couldn't breath around 2 AM. Pts son showed up at his house 10 minutes later and ambulance arrived with in 20 minutes at 2:15	skin ulcer of lower right leg due to old gun shot wound
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">966856-1</a>	Patient is a 90-year-old female. She is a nursing home resident with and ongoing COVID 19 outbreak occurring . She has been diagnosed with corona virus on 1/4/21. She apparently has not eaten or drank anything in about a week. She was being hydrated at the nursing home with normal saline, but has failed to improve. She was sent to the ER and was admitted on 1/8/21 to hospital At no time during the hospital stay has she been more than minimal responsive. She need O2 for Comfort but on CXR and CT cardiopulmonary imagining was clear. Discharge note stated that he was requiring supplemental oxygen, but her chest x-ray on admission actually showed no acute cardiopulmonary disease. She was diagnosed with COVID-19 on 1/4/21. Most likely, this disease set her level of function back to the point that she was no longer eating and drinking, and she just overall rapidly declined after that. There was no evidence of an actual COVID pneumonia or pneumonitis. On 1/12/2021 family made patient a DNR and IVF were stopped and switched to comforted care. Patient expired 1/13/21	unk
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">967743-1</a>	Possible seizer, unknown at this time, aprox 1hr and 20min after vac given. Passed away aprox 2hrs after vac.	n/A
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">967749-1</a>	Cardiac Arrest Narrative:	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">967754-1</a>	Death - unknown cause, no reported side effects Narrative: Unknown cause of death	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">968846-1</a>	Within 15 minutes of the injection, the individual became aphasia and stroke like symptoms. She was taken to the ER where she was later diagnosed with a cerebral hemorrhage and passed away.	None
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">969220-1</a>	Patient expired one week after vaccine. Cause of death unknown to me.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">969488-1</a>	Fatigue, muscle aches, vomiting, hematoma	Covid 19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">970139-1</a>	arrested/heart was at a standstill; brief seizure; Last blood glucose was 167; feeling poorly; This is a spontaneous report from a contactable pharmacist. A 66-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot number: EL1283), intramuscularly in the left arm, on 15Jan2021 at 14:00 (at the age of 66-years-old) at a single dose for COVID-19 immunization. Medical history included congestive heart failure presented with unresponsiveness, coronary artery disease, dyslipidemia, hypertension, non-ongoing stroke (no residuals) in 2001, thyroid disorder, walnuts allergies, stenting to left anterior descending artery (LAD) and right coronary artery (RCA), wheezing, chest pain, and erectile dysfunction. Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medication, taken within two weeks of	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	vaccination, included salbutamol (PROVENTIL) Adverse Event Description	Current Illness
					<p>taken for wheezing, salbutamol (VENTOLIN) taken for wheezing, acetylsalicylic acid (ASPIRIN 81), colecalciferol (reported as Vitamin D3; MANUFACTURER UNKNOWN), furosemide (LASIX) taken for weight gain, glyceryl trinitrate (reported as: nitroglycerin; NITROSTAT) taken for chest pain, hydrochlorothiazide (HYDRODIURIL), levothyroxine sodium (SYNTHROID), levothyroxine sodium (LEVOTHROID), metoprolol succinate (TOPROL XL), montelukast sodium (SINGULAIR), prasugrel hydrochloride (EFFIENT), rosuvastatin calcium (CRESTOR), sildenafil (VIAGRA) taken for erectile dysfunction, spironolactone (ALDACTONE), and testosterone (ANDROGEL). It was unknown if patient received other vaccines within four weeks of vaccination. The patient experienced feeling poorly on 15Jan2021 at 14:50 and patient arrested/heart was at a standstill, brief seizure, and last blood glucose was 167 on 15Jan2021 at 15:15. The patient expired on 15Jan2021 at 15:15. The clinical course was reported as follows: The patient received the vaccine on 15Jan2021 around 14:00 and started feeling poorly around 14:50. The patient arrested after a brief seizure. Cardiopulmonary resuscitation (CPR) was initiated by his wife. Emergency medical service (EMS) arrived around 15:21 and initiated advanced cardiovascular life support (ACLS). CPR was continued upon arrival. A bedside ultrasound was performed and revealed his heart was at a standstill on 15Jan2021 and last blood glucose was 167 on 15Jan2021. Therapeutic measures were taken as a result of the events as aforementioned. The clinical outcome of expired and arrested/heart was at a standstill was fatal and of feeling poorly, brief seizure, and last blood glucose was 167 was not recovered. The patient died on 15Jan2021. The cause of death was assessed as arrested/heart was at a standstill. It was not reported if an autopsy was performed. It was also reported that since the vaccination, the patient had not been tested for COVID-19.; Sender's Comments: The 66-year-old male patient had medical history included congestive heart failure presented with unresponsiveness, coronary artery disease, dyslipidemia, hypertension, stroke, thyroid disorder, stenting to left anterior descending artery (LAD) and right coronary artery (RCA), wheezing, chest pain. The reported fatal event cardiac arrest was most likely due to concurrent cardiac diseases, and unlikely causally related to the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE). The case will be reassessed should additional information become available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: arrested/heart was at a standstill</p>	
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">970618-1</a>	SON SAID PATIENT WAS FOUND UNRESPONSIVE AND CALLED 911	UNKNOWN

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">970976-1</a>	At approximately 12:15 pm the resident had a brief unresponsive episode that resolved quickly. Her Vital signs were stable and her mentation was at baseline. Later that evening approximately 10 pm she had labored respirations, shortness of breath, lethargy with bilateral crackles, Oxygen desaturated to 76% on room air, tachycardia and hypotension. She expired at 6:30 a.m. the following day.	Admitted from home to hospital on 1/5 for pancreatitis, Cholecystitis, GI bleed. HAd a biliary stent placed. TEsted positive for Covid 19 on 1/7/21. Transferred from hospital to a covid recovery Short term facility and transferred to this facility on 1/18/21 for long term care. She was admitted on comfort measures due to prior decline
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">971561-1</a>	"Unspecified event/he passed away; Dizziness; Nausea; Headache; This is a spontaneous report from a contactable consumer (patient's wife). An 80-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) (Lot number EL3302), intramuscular at single dose in the left arm on 20Jan2021 08:15AM for Covid-19 immunisation. Medical history included atrial fibrillation (Diagnosed about 10 years ago). Concomitant medications included unspecified drug for atrial fibrillation. On 20Jan2021, the patient experienced dizziness, nausea, headache with outcome of unknown and unspecified event/he passed away. The patient died on 20Jan2021. An autopsy was not performed. The events were described as follows: ""Her husband received the first dose of the vaccine yesterday morning and he passed away last night. She is not sure what time he died last night. States he was so eager to get the vaccine. Reports he was exhibiting symptoms that were listed as possible side effects. He was experiencing dizziness, nausea, and a headache that started several hours after the vaccine, the side effects started in the early afternoon. She does not know the cause of death and does not think an autopsy was performed"". The vaccine was administered at Hospital Facility. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine.; Reported Cause(s) of Death: Unspecified event/he passed away"	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">971676-1</a>	muscle aches-increased pain to lower back	HYPERLIPIDEMIA, UNSPECIFIED(E78.5), CHRONIC OBSTRUCTIVE PULMONARY DISEASE, UNSPECIFIED(J44.9), VASCULAR DEMENTIA WITHOUT BEHAVIORAL DISTURBANCE(F01.50), OTHER SPECIFIED ANXIETY DISORDERS(F41.8), VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE(K43.9), NONINFECTIVE GASTROENTERITIS AND COLITIS, UNSPECIFIED(K52.9), CHRONIC VASCULAR DISORDERS OF INTESTINE (K55.1), SACROCOCCYGEAL DISORDERS, NOT ELSEWHERE CLASSIFIED(M53.3), OTHER SPECIFIED DISORDERS OF BONE DENSITY AND STRUCTURE, UNSPECIFIED SITE(M85.80), PERSONAL HISTORY OF OTHER VENOUS THROMBOSIS AND EMBOLISM(Z86.718), PRESENCE OF INTRAOCULAR LENS(Z96.1), ANEMIA, UNSPECIFIED(D64.9), DISORDER OF WHITE BLOOD CELLS, UNSPECIFIED(D72.9), IRRITABLE BOWEL SYNDROME(K58), ABDOMINAL AORTIC ANEURYSM, WITHOU
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">971736-1</a>	Vomit 30 minutes after administration. approx. 9 hours later, resident has Stroke-like symptoms. He was previously on Hospice before admitting to our facility and planned to be readmitted to hospice upon discharge.	DISPLACED INTERTROCHANTERIC FRACTURE OF LEFT FEMUR, SUBSEQUENT ENCOUNTER FOR CLOSED FRACTURE WITH ROUTINE HEALING (S72.142D), MALIGNANT NEOPLASM OF PROSTATE(C61), UNSPECIFIED DEMENTIA WITHOUT BEHAVIORAL DISTURBANCE(F03.90), ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITHOUT ANGINA PECTORIS(I25.10), DISPLACED FRACTURE OF BASE OF NECK OF RIGHT FEMUR, SUBSEQUENT ENCOUNTER FOR CLOSED FRACTURE WITH ROUTINE HEALING(S72.041D), ESSENTIAL (PRIMARY) HYPERTENSION(I10), ANEMIA, UNSPECIFIED(D64.9), HYPOKALEMIA(E87.6), ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE(I21.3), MAJOR DEPRESSIVE DISORDER, RECURRENT, UNSPECIFIED(F33.9), HYPERLIPIDEMIA, UNSPECIFIED(E78.5), ALZHEIMER'S DISEASE WITH LATE ONSET(G30.1), OTHER ABNORMALITI
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">971969-1</a>	brought by EMS to ED; seizures at home in bed; 6 Epi and 1 bicarb; no hx of seizure	No current illness for this event

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">972092-1</a>	Reportedly, this employee's mother died the night of the vaccine. The details are not known at this time.	Diabetes Mellitus
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">972392-1</a>	Patient sent to hospital 1/2 and 1/5. Returned both times to nursing home covid unit without a hospital admission. Resident had been diagnosed with COVID later in the day on 12/30, when routine testing PCR results returned to facility, after resident had already had her first covid vaccination on 12/30/20 in the morning. Resident continued decline, was again sent to hospital on 1/24/21, and expired in hospital 1/25/21.	Left femur fx 12-7-20 UTI 12-7-20
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">972782-1</a>	Resident expired on 1/23/21 . Resident receiving care under hospice ,diagnosis Acute Myeloid Leukemia.	Acute Myeloid Leukemia
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">972836-1</a>	sudden death	no
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">974172-1</a>	Resident passed away 1/25/2021 at 1048pm after the vaccine was given on 1/24/2021. Resident had been being monitored but death was not expected.	COVID-19 diagnosis 12/29/2020, pneumonia, CHF, depression, rheumatoid arthritis and anemia.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">974422-1</a>	Patient developed fever to 102 within 24 hours with decreased mentation. Stopped eating/drinking despite aggressively treating fever. Was DNR B status. Family agreed to a trial of IV fluids on 1/21 but was not successfully started until 1/22 after several attempts. Family wanted only comfort measures with no transfer to hospital. Patient continued to have fevers to 102-103 range. Patient passed on 1/23 . Patient did test positive for COVID in early September without significant illness. She was in usual state of health prior to vaccination.	none
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">974489-1</a>	No immediate symptoms. No symptoms ever reported. Patient was found dead in her home on 1/25/2021 and last seen on 1/24/2021. Neighbor called for welfare check because they had not seen her and she had not checked mailbox. No evidence of foul play.	Asthma, COPD exacerbation.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">974855-1</a>	decendent had shortness of breath and hypoxia, cardiac arrested in front of the EMS crew, ACLS initiated, arrived in the Hospital ED asystole and pronounced dead	hypothyroid, hypertension
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">975184-1</a>	The patient had a heart attack and died at a local hospital morning of 1/19/2021.	none
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">975206-1</a>	1 fall after first dose on 1/8/2021 at 1930; no injuries; 4 falls after second dose on 1/14/21 at 1545, 1/15/21 at 1700, 1/21/21/at 1220 and 1/21/21 at 1330 all falls with no injuries. Started Ceftriaxone 1 GM IM daily for 5 dya on 1/21/21 for UTI: E. Coli	11/30/2020 positive for Covid-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">975382-1</a>	01/22/20When transferring resident from bed to W/C Resident became unresponsive to voice with eyes fix open and point up to the right. Placed resident back in bed found 82% o2 sats B/P 110/106 pulse 110 resp below 16 placed o2 via non rebreather with 20 l/min O2 up to 90% then stabilized at 89% Resident following all commands encouraged to take do breathing exercises, with some compliance, continues ABT/pneumonia , no s/s adverse 1/23/2021 16:48 Discharge Summary Note Text: Resident found unresponsive with no pulse or respirations in bed with emesis on gown. Time of death verified at 1645 with LPN. Funeral Home called at 1900 and body released at 2000.	Anemia, Dementia, COPD



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">975434-1</a>	"vomiting x3 1/8/21 1/9/21 00:34 - called to resident room by CNAs, staff stated resident was ""different"". Vitals taken and O2 sat was low, O2 in room and applied via NC @3L, O2 sat returned to 98 and all other vitals WNL including BS. Resident asked how he felt, stated he felt ""okay"". Resident exhibiting some shakey movements and clearing throat, states he does not have any phlegm or drainage or trouble swallowing. MD called and updated on situation, voicemail left. 1/9/21 11am- resident has been making a ""growling"" noise this shift. resident also has tremors. resident alert and answers questions appropriately. when asked if resident wants to go to hospital, resident firmly states ""no"". vitals wnl. no emesis noted. will continue to monitor resident. 1/9/21 12p- resident not answering questions appropriately. resident only answering yes or no. resident cannot tell me name, or the year, resident cannot state where he is currently or birthdate."	OTHER INJURY OF UNSPECIFIED BODY REGION, SUBSEQUENT ENCOUNTER , LOCAL INFECTION OF THE SKIN AND SUBCUTANEOUS TISSUE, UNSPECIFIED , CELLULITIS OF LEFT LOWER LIMB, CELLULITIS OF RIGHT LOWER LIMB , END STAGE RENAL DISEASE , DEPENDENCE ON RENAL DIALYSIS , TYPE 2 DIABETES MELLITUS WITH DIABETIC CHRONIC KIDNEY DISEASE, UNSTEADINESS ON FEET , CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH (ACUTE) EXACERBATION, DIFFICULTY IN WALKING, NOT ELSEWHERE CLASSIFIED , MUSCLE WASTING AND ATROPHY, NOT ELSEWHERE CLASSIFIED, UNSPECIFIED SITE , COGNITIVE COMMUNICATION DEFICIT, REPEATED FALLS, OTHER LACK OF COORDINATION, SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION, ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITHOUT ANGINA PECTORIS,
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">975744-1</a>	See initial report	The resident was febrile on 1/9/2021 after receiving the Pfizer vaccine on 1/7/2021. On 1/9/2021 UA, CBC, and CMP ordered indicating she had UTI. SARS-CoV-2 testing was performed using POCT GeneXpert on 1/9/2021. No SARS-CoV-2 was detected. The resident continued to decline and on 1/15/2021 she became tachycardiac and was having trouble breathing. She was transferred to ER where she later died.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">975952-1</a>	Narrative:	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">976032-1</a>	Patient stated he wasn't feeling well on January 25, 2021, wasn't eating and complained of abdominal pain. Patient noted to have indigestion and was constipated. Meds provided and labs ordered. On morning of January 26, 2021, patient became weak, lethargic and hypoxic and was sent to emergency department around 0700 hours on January 26, 2021. At approximately 1100 hours, emergency physician notified this writer that patient was not going to overcome his illness and would be placed on comfort care. At approximately 1130 hours, this writer was notified that patient had passed away from multi-organ failure.	CHF exacerbation in November 2020

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">976111-1</a>	"CC:full arrest HPI:HPI and ROS limited due to patient's condition. History is via EMS, medical record, and son. Per Son patient had Covid vaccine on Saturday morning. Slept all day Sunday. Woke up Sunday night a bit ""like coming out of a deep sleep per son, around 10 pm. Shortly after that patient was having a hard time breathing. Emergency called. Arrested around the time EMS arrived. King airway, I/O and CPR initiated. Patient has been in v fib. Was shocked multiple times, given 4 rounds of epi, bicarb and amiodarone. ACLS continued on arrival. Multiple rounds of epi, and attempted defib. Patient given epi, bicarb. Rhythms included fine v fib, asystole, and PEA. Unrecoverable with no cardiac motion. Time of death 11:50 pm."	Pt admitted with closed-loop bowel obstruction with subsequent surgery for ex-lap, SBR ~160cm jejunem and ileum, left with open abdomen with Abthera wound vac 12/22. Now s/p Exploratory laparotomy, primary stapled small bowel anastomosis, abdominal fascial and skin closure on 12/24.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">977963-1</a>	(Report per patients wife ) Patient took his usual nap around 12pm. She found him lying in the bed unresponsvie at 2pm. EMS was not called. Patient's wife called the Funeral home.	Unknown
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">978199-1</a>	Arm hurting used his oxygen at time of bed appeared vomited.	Heart disease
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">978754-1</a>	No symptoms appeared immediately after vaccination, although patient passed away around 6:00 pm unexpectedly. Staff talked with her last time at 5:30 pm and then found her at 6:00 pm passed away. Unknown at this time if death is directly related to receiving the vaccine.	Hospice client Some diarrhea with colostomy bag in place general decline
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">978872-1</a>	died suddenly at night; This is a spontaneous report from a contactable consumer. A 72-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration, on 15Jan2021 (at the age of 72-years-old) as single dose for COVID-19 immunization. Medical history included myasthenia gravis, hypertension (well controlled), non-ongoing major back surgery on an unspecified date (4 months ago), and deep vein thromboses (DVTs) (cleared by ultrasound after therapy). The patient was not pregnant at the time of vaccination. 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 did not receive any other vaccines within four weeks prior to the vaccination. Concomitant medications, taken within two weeks of vaccination, included pyridostigmine bromide (MESTINON), prednisone (MANUFACTURER UNKNOWN), tramadol (MANUFACTURER UNKNOWN), paracetamol (TYLENOL), hydrochlorothiazide, lisinopril (MANUFACTURER UNKNOWN), and rivaroxaban (XARELTO). The patient died suddenly at night on 21Jan2021 at 02:00. It was reported that the patient was not sick or showing any symptoms before bed on 20Jan2021 at 21:00 and reported feeling fine after getting the vaccine. The patient did not receive any treatment for the event. The patient died on 21Jan2021. The cause of death was unknown. An autopsy was not performed. 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 provided and has been requested during follow up.; Reported Cause(s) of Death: died suddenly at night	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">979155-1</a>	Jan 3 vaccine administered, jan 4 started headaches, vomiting, pain in the back of the neck, Headaches, chills, loss of speech,	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">979255-1</a>	Patient received COVID 19 vaccine the morning of 1/18/21 at Public Health COVID-19 vaccine clinic. I (person completing this report) work for PH. Later that night while in bed, patient reported difficulty breathing to his wife, then turned blue, and became unresponsive. Family report pt was without any symptoms prior to event. 911 called; CPR started by family member 15 min. after pt became unresponsive. EMS performed resuscitation for about 30-40 minutes with multiple defibrillation for V-fib. Between EMS and Medical Center ER, pt had 9 rounds of epi, CPR w/ LUCAS machine, given 2 doses of amiodarone (150 mg and 300 mg). Patient had 3 EKGs, which did not show STEMI, but did show nonspecific conduction delay and sinus arrest with junctional escape vs sinus bradycardia (HR 50's). Pt had return of spontaneous circulation. Pt intubated, and started on Levophed. Pt transferred to ICU, and had central line placed. Family decided to make patient DNR. Pt went into coarse VFib again, and as per wishes of family, code blue not called. Patient expired at 01:53 on 1/19/21.	unknown; family report pt without symptoms prior to event
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">979818-1</a>	Patient arrived at ER with complaints of CPR in progress. Per EMS, patient became short of breath while performing yard work on 1/26/2021. At arrival, patient was in fine v fib with a total of 6 shocks delivered along with 300 mg amiodarone followed by 150 mg amiodarone, 1 amp epinephrine and 2 epinephrine drips administered en route to ED. CPR initiated at 1755 and EMS reports asystole at 1829. TOD 1909 pronounced by ED DO Dx: Cardiac arrest	Malignant neoplasm of colon dx Stage IIB in 2018. Surgery in 2018 to remove mass Inguinal hernia (rt) CT follow up in 12/2020 r/t above found no evidence of metastatic disease in abdomen or pelvis, inguinal hernia still present. Distension in abdomen reported in 11/2020 through 12/2020 at office visit
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">979837-1</a>	Per EMS, the patient was last seen walking and talking to wife 10 minutes prior to EMS arrival. EMS reports via patients wife, that patient was upstairs to change for his doctor appointment then patient's wife found him down. The patient received his COVID-19 vaccine on 1/25/21. EMS states they gave 5 rounds of EPI then patient moved into vfib then was shocked once but returned to asystole. In ED, the patient initially in asystole CPR was started immediately. The patient was given 3 rounds EPI, 1 round bicarb. The patient stayed in PEA throughout. Patient was given tPA. Patient continued to be in asystole and time of death was called at 11:35 am.	History of benign prostatic hyperplasia, hypertension, urinary tract infection, cerebrovascular accident. 1/25/21 Brought to Hospital ED by EMS from Health District for near syncope and hypotension post Pfizer vaccine administration. 1/27/21 Brought to Hospital ED by EMS from home after wife found.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">979926-1</a>	Pt began experiencing shortness of breath 3 days after vaccine and expired later that day.	Pt was on hospice in LTCF at time of death, but expired 3 days after receiving vaccine. She exhibited shortness of breath the morning of death. 12/7-12/17 covid positive but seemed to be recovering HTN Alzheimer? s
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">980107-1</a>	Patient noted to have a change in status at 11:23PM that night. Her oxygen saturation had dropped from normal on room air to 82% and required oxygen. She was also noted to be lethargic with altered mental status and not responding verbally. She then began to mottle. Her oxygen saturation worsened to 51% on 4Liters of oxygen by the next day and she expired on 1/14/21.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">982417-1</a>	Resident tested positive for COVID on 1/7/2021.	This person had been on HOSPICE for Failure to Thrive since November 2019. She was treated for weight loss with nutritional supplements and served meals of her choice. She had noted increase in sleep in weeks prior to death, but would have times she wanted out of bed for meals and to attend some activity.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983169-1</a>	Client received the COVID-19 vaccine on 1/5/21 by the Vaccine clinic. Plans were for Hospice services. Client tested positive for COVID-19 by rapid testing on 1/8/21. On 1/10/21 at 0900 Client was unresponsive and without vital signs. Orders were for DNR, and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983173-1</a>	Client received the COVID-19 vaccine on 1/5/21 by the Vaccine clinic. Client tested positive for COVID-19 by rapid testing on 1/21/21, with c/o hurting all over and loose stools. She became non-verbal on 1/23/21 with poor intake. On 1/24/21 at 0537 Client was unresponsive and without vital signs. Orders were for DNR, and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983184-1</a>	Patient has been under Hospice services for almost a year. She began to demonstrate a large amount of oral secretions on 1/10/21 at 2130. She was suctioned and a Rapid COVID-19 test was performed, which was negative. The COVID-19 Rapid test was repeated on 1/11/21 and was positive. Oxygen saturation was noted to be 78% on 1/12/21, and oxygen was initiated at 1133 at 3L per nasal cannula. Oxygen was increased to 4L at 1635 d/t shortness of breath. On 1/15/21 @ 0645 patient was unresponsive and without vital signs. Orders were for DNR and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983187-1</a>	Client tested positive for COVID-19 by rapid test on 1/8/21. On 1/9/21 at 1405 his oxygen saturation dropped to 86% and oxygen was initiated at 2L per nasal cannula. A non-productive cough was noted on 1/10/21 and oxygen was increased to 3L. On 1/12/21 Client became non-responsive with 30 second periods of apnea. Dexamethasone was initiated on 1/13/21. Lung sounds were noted with crackles on 1/15/21 at 1158 and at 2120 Client was unresponsive and without vital signs. Orders were for DNR and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983189-1</a>	Patient tested positive for COVID-19 by rapid test on 1/6/21. She began to demonstrate a dry cough on 1/11/21. On 1/12/21 at 1723 her oxygen saturation dropped to 79% and oxygen was applied at 4L per nasal cannula. On 1/19/21 at 2130 Patient was unresponsive and without vital signs. Orders were for DNR and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983192-1</a>	Patient received the COVID-19 vaccine on 1/5/21 by the Vaccine clinic #1. Patient tested positive for COVID-19 by rapid testing on 1/6/21. She demonstrated poor appetite and fluid/food intake and an IV of Normal Saline was initiated on 1/7/21. Oxygen saturation was initiated on 1/12/21 at 4L per nasal cannula. for shortness of breath. On 1/22/21 at 0310 Patient was unresponsive and without vital signs. Orders were for DNR and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983193-1</a>	Patient began to demonstrate a cough the evening of 1/5/2021, after receiving the COVID-19 vaccine earlier in the afternoon. A rapid COVID-19 test was performed and was positive. She began to demonstrate shortness of breath with exertion on 1/7/21, and lethargy on 1/12/21. Appetite and oral intake began to decline on 1/12/21, and Oxygen saturation dropped on 1/16/21 to 82%, and oxygen was initiated at 3L per nasal cannula. On 1/19/21 at 0414 patient was unresponsive and without vital signs. Orders were for DNR, and CPR was not initiated.	COVID-19
PFIZER\BIONTECH	Death	Jan., 2021	65+ years	<a href="#">983482-1</a>	per daughter pt suffered a stroke 1 hour after he was given the covid vaccination. he passed away on 01/24/2021.	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	Unknown	<a href="#">930431-1</a>	Cardiac event, 2 days after vaccination, patient expired.	none



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Death	Jan., 2021	Unknown	<a href="#">934966-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Death	Jan., 2021	Unknown	<a href="#">971559-1</a>	her mother passed away 7-8 days after receiving the vaccine; This is a spontaneous report from a contactable consumer, the daughter of the patient. A female patient of an unspecified age received the first dose of COVID-19 mRNA VACCINE (MANUFACTURER UNKNOWN), via an unspecified route of administration in Jan2021 as a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. On 19Jan2021 about 7-8 days after receiving the vaccine, the patient passed away. The patient was fine before she received the vaccine and then passed away 7-8 days later. The cause of death was not reported. It was not reported if an autopsy was performed. The reporter thought her mother's death had everything to do with the COVID-19 vaccine. The lot number for the vaccine was not provided and will be requested during follow up.; Reported Cause(s) of Death: Death	No current illness for this event.
PFIZER\BIONTECH	Life Threatening	Jan., 2021	50-59 years	<a href="#">938118-1</a>	on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm	none mentioned
PFIZER\BIONTECH	Life Threatening	Jan., 2021	65+ years	<a href="#">969488-1</a>	Fatigue, muscle aches, vomiting, hematoma	Covid 19

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Life Threatening	Jan., 2021	65+ years	<a href="#">977963-1</a>	(Report per patients wife ) Patient took his usual nap around 12pm. She found him lying in the bed unresponsvie at 2pm. EMS was not called. Patient's wife called the Funeral home.	Unknown
PFIZER\BIONTECH	Congenital Anomaly / Birth Defect *	Jan., 2021	65+ years	<a href="#">932787-1</a>	RECIEVED VACCINE 1/8/21 EXPIRED UNEXPECTED 1/10/21, NO ADVERSE REACTIONS NOTED	PNEUMONIA
PFIZER\BIONTECH	Hospitalized	Dec., 2020	65+ years	<a href="#">926568-1</a>	patient declined 12/30/2020 and was transferred to hospital where he did not respond to treatment and passed away 1/4/2020	chronic medical problems as noted below
PFIZER\BIONTECH	Hospitalized	Dec., 2020	65+ years	<a href="#">953922-1</a>	The day following the vaccine, the patient complained of throat issues and anxiety. This was not new... however . That evening he reported difficulty breathing and was placed on oxygen; a COVID test was performed and was negative. On 12/30/2020, patient complained of sternal pressure and was transferred to the hospital. The patient died 12/31/2020 and records obtained from the hospital indicated the patient died from a massive myocardial infarction.	Diabetes, COPD, Chrones's Disease, DJD, OSA, PTSD, GERD, HLD, Depression, HTN, lobectomy 3/4/2019, cancer
PFIZER\BIONTECH	Hospitalized	Jan., 2021	50-59 years	<a href="#">933739-1</a>	"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."	Recent g-tube placement, Several hospitalizations over the pas few months due to low Oxygen Levels.
PFIZER\BIONTECH	Hospitalized	Jan., 2021	50-59 years	<a href="#">938118-1</a>	on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm	none mentioned
PFIZER\BIONTECH	Hospitalized	Jan., 2021	50-59 years	<a href="#">944595-1</a>	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	No known new illnesses,
PFIZER\BIONTECH	Hospitalized	Jan., 2021	50-59 years	<a href="#">958072-1</a>	Death 3 days after receiving 2nd dose of COVID vaccine, unknown if related to vaccine administration.	No current illness for this event.
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">921175-1</a>	Resident received Covid Vaccine, noted after 30 mins with labored breathing BP 161/77, HR 116, R 38, T 101.4,	CHF, COPD, DM, heart failure, anemia, sleep apnea
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">926462-1</a>	Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021	dementia, Upper gastrointestinal bleed
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">928062-1</a>	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.	Parkinson's Disease with advanced dementia, dysphagia. Alcoholism in remission. HTN. BPH. GERD
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">943266-1</a>	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.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">946225-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">948150-1</a>	increase weakness and fatigue, weakness in extremities, incontinent, jerky arm movements, within first 24 hours, continue to decline sent to hospital returned weaker, within 24 hrs hours BP dropped, low pulse oximeter reading, diaphoretic, lung sounds diminished, loss consciousness and passed away. 01-12-2021	pneumonia,
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">951101-1</a>	PATIENT GOT HER FIRST COVID PFIZER VACCINE AT 12/31 IN THE AM. HAD GOTTEN FLU LIKE SYMPTOMS AND HAD BEEN SICK FOR A COUPLE OF DAYS. HAD NAUSEA AND VOMITTING DURING THIS TIME AS WELL. ON 1/3 THE CARE GIVER WENT TO CHECK ON HER PT AT HER LTC FACILITY WHERE SHE LIVES AND SHE WASN'T ACTING RIGHT. SHE WAS UNABLE TO DO A STROKE EXAM. PT HAD NO MOVEMNET IN ARMS OR LEGS AND WAS UNABLE TO SPEAK. PT WAS VITALLY STABLE AT THE TIME. EMS RECORDED THAT THEY THOUGHT DIAGNOSIS WOULD BE STROKE, PNEUMONIA OR SEPSIS. AFTER ARRIVAL AT THE HOSPITAL DETERMED THAT SHE HAD A STORKE, ACUTE KIDNEY INJURY, ABNORMAL LFTS.	No current illness for this event.
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">954251-1</a>	71 year old woman at rehabilitation center for physical therapy with history of cirrhosis of the liver, asthma, and heart condition was tested for COVID-19 on 01/07/21, received 1st dose of Pfizer COVID-19 vaccine on 01/08/21, positive test result for COVID-19 received on 01/09/21. She was sent to the hospital and admitted on 01/12/21 after O2 was 70% and was in a confused state. Patient passed away on 01/17/21.	Cirrhosis of the liver, asthma, heart condition
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">955390-1</a>	Resident received vaccination on January 15, 2021. She was found unresponsive with shallow respirations on the morning of January 16, 2021 and was sent to ER via ambulance. The resident was admitted to medical center ICU where she passed away later that day.	unknown
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">959179-1</a>	Patient received COVID-19 vaccination on 1/14/2021. On 1/17/2021, patient was transferred to Hospital s/p multiple cardiac arrests. Patient was hyperkalemic and in acute renal failure at time of transfer. Hyperkalemia was treated, but the patient suffered PEA vs VFib. At the time of transfer, patient was on vasopressin, norepinephrine, and epinephrine. The patient had an EF of 40-45% and elevated troponins. Patient was made DNR and placed on comfort care. Patient passed away on 1/18/2021. Ultimately we suspect that the patients condition was a direct result of his underlying disease states, but wanted to make sure reporting was made available.	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">959929-1</a>	"Narrative: Patient seen in ED 1-17-21 with c/c of ""bloating with epigastric pain"". Patient with complicated medical history including stage 1B pancreatic cancer (was currently on chemotherapy mFOLFIRINOX), and a leadless permanent pacemaker implantation on 1-11-21 for long episodes of SR with complete heart block following symptoms of syncope (other cardiac history: CAD s/p CABG 2009, PAF, and HTN). Regarding ER visit for epigastric pain, nothing notable was found on workup and patient was to discharge home to rest. There were available doses of COVID-19 Vaccine following a vaccine clinic that same day, and patient was offered and agreed to a dose of vaccine. Patient was monitored for 15 minutes post vaccine with no notable issues. The following day, Monday 1-18-21, patient's caregiver called facility at 22:30 to report he had a fever of 102.8 degrees and that he had been ""feeling kind of bad all day"". Patient was advise to seek urgent medical care and reported back to ED on 1-19-21 at 00:55. Patient was admitted for SIRS (tachycardia and febrile) -- patient also reported diffuse myalgia. WBC WNL, CXR unremarkable for infection, UA neg for bacteria, LFTs WNL, blood cultures negative. Procalcitonin elevated at 17.8 -- suggesting inflammatory response. Patient initially reported feeling better on the morning of 1-19-21, but around 13:00 began rapidly declining (confusion, unable to walk) and started experiencing EKG changes (9 beats of SVT). Patient then coded and resuscitation was attempted for approximately 30 minutes. Patient did not survive the code. Coroner has been notified and family is considering autopsy at time of this report."	No current illness for this event.
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">961010-1</a>	Resident returned to the memory support unit at 1500. Resident was then toileted and transferred in to bed per his request. At 1515 resident was observed face down beside bed, resident sustained a 1inX1in ecchymotic/hematoma to the forehead. Neuro Checks with in normal limits Vital signs: 100/52, 100, 97.2, 28. Resident sent to ED for further medical evaluation via EMS.	n/a
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">962390-1</a>	Admitted to hospital after vaccination with Acute hypoxemic respiratory failure, Septic shock; Aneurysm of arteriovenous dialysis fistula; expired 1/16/2021	intestinal adhesions with obstruction; Intestinal adhesions with partial obstruction; S/P colon resection; SBO (small bowel obstruction)
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">962827-1</a>	Admitted 1/14/21: Patient is an elderly 93-year-old female with multiple medical problems including chronic combined CHF, P 80, diabetes mellitus, HTN, hyperlipidemia, CKD stage 3, has been complaining of generalized weakness, fatigue, decreased appetite for the past few days. She had an outpatient COVID-19 vaccine earlier today. Within 2 hr of admitting the patient to the hospital, condition clinically deteriorated. Patient elected to be DNR/DNI while in the ED. Patient was pronounced dead at 10:30 p.m. earlier today. Preliminary cause of death: Hypoglycemia induced lactic acidosis.	No current illness for this event.
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">963057-1</a>	presented to ED 1/9/21 with abdominal pain, progressive worsening weakness and fatigue and new onset A fib with RVR likely due to hypertensive urgency. Patient progressed clinically with severe hypoxia and transferred to ICU and started on BiPAP; progressive decline with decreased urinary output with uremia likely secondary to sepsis. Concern with patient worsening clinical decline, palliative care had been consulted on end of life care. Patient expired 1/17/21	No current illness for this event.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">966856-1</a>	Patient is a 90-year-old female. She is a nursing home resident with and ongoing COVID 19 outbreak occurring . She has been diagnosed with corona virus on 1/4/21. She apparently has not eaten or drank anything in about a week. She was being hydrated at the nursing home with normal saline, but has failed to improve. She was sent to the ER and was admitted on 1/8/21 to hospital At no time during the hospital stay has she been more than minimal responsive. She need O2 for Comfort but on CXR and CT cardiopulmonary imagining was clear. Discharge note stated that he was requiring supplemental oxygen, but her chest x-ray on admission actually showed no acute cardiopulmonary disease. She was diagnosed with COVID-19 on 1/4/21. Most likely, this disease set her level of function back to the point that she was no longer eating and drinking, and she just overall rapidly declined after that. There was no evidence of an actual COVID pneumonia or pneumonitis. On 1/12/2021 family made patient a DNR and IVF were stopped and switched to comforted care. Patient expired 1/13/21	unk
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">968846-1</a>	Within 15 minutes of the injection, the individual became aphasia and stroke like symptoms. She was taken to the ER where she was later diagnosed with a cerebral hemorrhage and passed away.	None
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">969488-1</a>	Fatigue, muscle aches, vomiting, hematoma	Covid 19
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">970618-1</a>	SON SAID PATIENT WAS FOUND UNRESPONSIVE AND CALLED 911	UNKNOWN
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">971676-1</a>	muscle aches-increased pain to lower back	HYPERLIPIDEMIA, UNSPECIFIED(E78.5), CHRONIC OBSTRUCTIVE PULMONARY DISEASE, UNSPECIFIED(J44.9), VASCULAR DEMENTIA WITHOUT BEHAVIORAL DISTURBANCE(F01.50), OTHER SPECIFIED ANXIETY DISORDERS(F41.8), VENTRAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE(K43.9), NONINFECTIVE GASTROENTERITIS AND COLITIS, UNSPECIFIED(K52.9), CHRONIC VASCULAR DISORDERS OF INTESTINE (K55.1), SACROCOCCYGEAL DISORDERS, NOT ELSEWHERE CLASSIFIED(M53.3), OTHER SPECIFIED DISORDERS OF BONE DENSITY AND STRUCTURE, UNSPECIFIED SITE(M85.80), PERSONAL HISTORY OF OTHER VENOUS THROMBOSIS AND EMBOLISM(Z86.718), PRESENCE OF INTRAOCULAR LENS(Z96.1), ANEMIA, UNSPECIFIED(D64.9), DISORDER OF WHITE BLOOD CELLS, UNSPECIFIED(D72.9), IRRITABLE BOWEL SYNDROME(K58), ABDOMINAL AORTIC ANEURYSM, WITHOU

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">972392-1</a>	Patient sent to hospital 1/2 and 1/5. Returned both times to nursing home covid unit without a hospital admission. Resident had been diagnosed with COVID later in the day on 12/30, when routine testing PCR results returned to facility, after resident had already had her first covid vaccination on 12/30/20 in the morning. Resident continued decline, was again sent to hospital on 1/24/21, and expired in hospital 1/25/21.	Left femur fx 12-7-20 UTI 12-7-20
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">975184-1</a>	The patient had a heart attack and died at a local hospital morning of 1/19/2021.	none
PFIZER\BIONTECH	Hospitalized	Jan., 2021	65+ years	<a href="#">975744-1</a>	See initial report	The resident was febrile on 1/9/2021 after receiving the Pfizer vaccine on 1/7/2021. On 1/9/2021 UA, CBC, and CMP ordered indicating she had UTI. SARS-CoV-2 testing was performed using POCT GeneXpert on 1/9/2021. No SARS-CoV-2 was detected. The resident continued to decline and on 1/15/2021 she became tachycardiac and was having trouble breathing. She was transferred to ER where she later died.
PFIZER\BIONTECH	Emergency Room *	Dec., 2020	60-64 years	<a href="#">964629-1</a>	Death - Hospice patient with metastatic CA admitted to facility and received vaccine during stay. No adverse sequelae noted from vaccine administration, but reporting as required because pt died 7 days later. Narrative: Reporting this event because patient died 7 days after receiving vaccine in the facility where he was in hospice care for metastatic cancer. Vaccine was administered by protocol without complications. The patient had been asked and denied any prior severe reaction to this vaccine or its components and gave permission to receive it. No vaccine adverse sequelae were documented after the immunization as monitored for 15 minutes nor in facility notes for 7 days after the immunization. The patient's death was felt to be due to underlying terminal illness.	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Dec., 2020	65+ years	<a href="#">915682-1</a>	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	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Dec., 2020	65+ years	<a href="#">952204-1</a>	Patient became sick 3 hours after the vaccine and was found deceased 1 day after his vaccination. He passed away in his sleep.	None: Clean bill of health and a full cardiac exam was performed 2 months prior.
PFIZER\BIONTECH	Emergency Room *	Dec., 2020	65+ years	<a href="#">964636-1</a>	Pt on hospice in facility for severe cardiomyopathy unable to perform interventions received vaccine without adverse sequelae died 5 days later. Reporting as required. Narrative: Reporting as required patient death 5 days after immunization with Pfizer vaccine. However, no adverse sequelae were noted to the vaccine in the 15minute observation period, nor in the days following the immunization related to the vaccine. The patient denied any prior severe reaction to this vaccine or its components, and the patient gave verbal consent to receive the vaccine. Patient had been in the facility on hospice since 11/18/20 for severe decompensated HF and newly diagnosed cardiomyopathy, unable to perform interventions, also LE ischemic wounds with very poor potential to heal due to advanced PVD.	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Dec., 2020	65+ years	<a href="#">973808-1</a>	"shortness of breath, chest xray with pulmonary edema, periorbital edema Narrative: 73 yo M w/ PMH HTN, HLD, EVAR (2013) for AAA c/b persistent type II endoleak s/p multilple repairs (2015 & 2017) c/b glue embolization down into the R CIA secured with additional stent placement with the R iliac limb, s/p b/I Iliac artery aneurysm stent	No current illness for this event.

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					<p>08/31/20, and PTSD. Former smoker, quit 12+ yrs ago. 11/1/20-11/6/20: Hospitalized for acute on chronic back pain, found to multiple hypermetabolic lesions in the axial skeleton. Diagnosed with epithelioid angiosarcoma. Patient discharged to facility. 12/17/20: Patient received his 1st COVID-19 vaccine w/o complications at facility. 12/21/20: Underwent cyberknife treatment. 12/31/20: Transferred from facility to ER for new O2 requirement, SOB, cough, chest X ray / pulm edema, tachycardic and new periorbital edema. 12/31/20: Admitted to ICU before transfer to acute care. 1/1/21: Pulmonary consult, ""Labs are notable for progressive left shift with bandemia, markedly elevated inflammatory markers (D-dimer, ESR, CRP, ferritin, LDH), mild elevation in procalcitonin, mild elevation in lactate that has improved, and negative viral panel including COVID-19 x2. CT chest is notable for b/l GGOs along with some interstitial infiltrates with an upper and particularly mid zone and perihilar predominance, septal thickening and crazy paving, and numerous cystic lesions or pneumatoceles. There is a lack of lobar consolidation and pulmonary nodules. Of note, PET/CT about 2 months ago only demonstrated some mild to moderate emphysema mostly in the upper lobes. Therefore, there has been a relatively dramatic change in a few months, suggesting a more subacute process, rather than an acute infectious process such as a viral pneumonia, including COVID-19 infection, in which the GGOs tend to be subpleural and peripheral. Overall, our suspicion for COVID-19 is relatively low, with negative testing x2 yesterday, negative testing a few weeks ago, and lack of sick contacts, but it is possible. Therefore, higher on the differential is a more subacute infection or chemotherapy-induced pneumonitis. Risk factors include malignancy, chemotherapy, and use of steroids (equivalence of about 27 mg of Prednisone in the form of Dexamethasone since 11/6/20 without PJP prophylaxis). These risk factors, along with consistent imaging and elevated LDH, make PJP quite likely. Fungal infection is less likely based on imaging. Chemotherapy-induced pneumonitis is a possibility, especially given the more subacute picture based on imaging. Both Gemcitabine and Docetaxel can cause pneumonitis. However, the patient has been on steroids, which is used to treat drug-induced pneumonitis, although this does not exclude it completely."" 1/2/21: Transferred to ICU for worsening hypoxemia as patient reached 40L/100% FIO2 and remained on COVID isolation/COVID patient under investigation per ID recommendation. 1/4/21: Isolation precautions discontinued due to lower suspicion for active COVID infection to explain current presentation 1/6/21: Went into atrial fibrillation w/o RVR overnight 1/6. Tolerating, with MAPs in low 60s and HR in high 90s/low 100s. Suspect due to being-1L yesterday from diuresis, lasix stopped. S/p amiodarone bolus + drip, albumin 5% bolus 1/5/21: Macrocytic anemia NOS w/ slowly worsening H/H s/p PRBC x 1 unit 1/7/21: Per ICU Life-sustaining treatment note, ""Following discussion w/ patient that his lung dx has been refractory to txt and hasn't improved despite maximal therapy, patient agreed to transition to hospice after he settles affairs. "" 1/7/21 Infectious Disease note: ""This is an immunocompromised host due to cancer on active chemotherapy (albeit ANC&gt;4000 on admission) and notably had been on daily PO dexamethasone 1 mg TID (total daily dose 3 mg, equivalent to 20 mg PO prednisone) since 11/6/20 without any PJP ppx. There was elevated c/f COVID-19 infection in setting of patient's presenting symptoms, especially in conjunction with b/l GGOs on imaging. Has undergone multiple COVID test that have all resulted negative. Discussed radiographic findings with radiology colleagues and overall it is difficult to</p>	

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					definitively narrow the differential with imaging alone, but overall density of GGOs seem to appear less likely PJP and more in line with chemical pneumonitis vs COVID, although less typical for viral pneumonia as well. Given false-negative COVID tests are not unheard of, especially in the immunocompromised population, patient was kept on isolation precautions as a PUI for abundance of caution. He is now off precautions. In setting of patient having been on prednisone for some time without PJP ppx, he was also started on treatment dose TMP/SMX. Beta-d-glucan has returned positive, and although not the ideal test for PJP, this can certainly support a potential dx of PJP. Unfortunately, DFA from sputum was not performed due to insufficient sample and currently the patient is unable to produce an additional sample for testing. He is tolerating the high-dose TMP/SMX; we adjusted the dose to three SS tablets TID based on his somewhat declining UOP. Other fungal etiologies are pending work-up as well. Lastly, patient's chemotherapy is known to cause pneumonitis, but per pulmonology team, he receives prophylactic dexamethasone with his chemo cycles that should help to prevent drug-induced pneumonitis. Remains on the differential for now and this should also be concurrently treated with the steroids he is receiving." 1/10/21: Comfort care initiated. All non-comfort measures were discontinued. Time of death: Jan 10,2021@14:56; immediate cause of death per death note is ""hypoxic respiratory failure""	
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	50-59 years	<a href="#">933739-1</a>	"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."	Recent g-tube placement, Several hospitalizations over the pas few months due to low Oxygen Levels.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	50-59 years	<a href="#">938118-1</a>	on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm	none mentioned
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	50-59 years	<a href="#">944595-1</a>	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	No known new illnesses,
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	50-59 years	<a href="#">958072-1</a>	Death 3 days after receiving 2nd dose of COVID vaccine, unknown if related to vaccine administration.	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	60-64 years	<a href="#">924464-1</a>	coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer	COPD, lung cancer
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">928062-1</a>	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.	Parkinson's Disease with advanced dementia, dysphagia. Alcoholism in remission. HTN. BPH. GERD



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PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">936738-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">943266-1</a>	Initial pain in back of head and extreme headache. Some vomiting. At emergency, went into coma and was intubated. Hole drilled in skull to relieve pressure. MRI taken. Lot of bleeding in brain - aneurism lead to death approximately 14 hours after initial symptoms.	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">949965-1</a>	Patient 101 years old, nursing home resident, received vaccine 1/11, on 1/13 found on floor without obvious trauma, unresponsive. Brought to ED and was bradycardic, hypotensive, hypothermic and refractory to aggressive medical management. No obvious cause of death found on exam or labs, cxr. Unknown if event could be related to vaccine or not. Medical Examiner accepted case although initially unknown that patient had recently received vaccine. ME updated with that information today as soon as discovered.	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">950441-1</a>	Pt had witnessed arrest by wife. Pt wife started CPR and called EMS. CPR started at 15:12. Continued by EMS. Pt arrived to medical center asystole with CRP in progress and ventilated via igel device. He was in refractory ventricular fibrillation and continued CPR for a total of 1 hour. At that point, we checked a bedside ultrasound which showed his heart at a standstill. He was unresponsive to verbal and tactile stimulus and had fixed unreactive pupils. He was pronounced at 16:13.	Chronic systolic heart failure Coronary artery disease involving native coronary artery of native heart without angina pectoris
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">952704-1</a>	Daughter call in for VAERS report to file for father whom committed suicide 1/16/2021 in the AM after reportable ae of COVID 19 vaccine administered 1/14/2021. Patient sought care twice at ER; first visit by ambulance around 5PM and Friday 1/15/2021 Medical Center: Emergency Room. 1st Discharge summary diagnosis: adverse reaction to COVID shot; 2nd Discharge summary diagnosis: adverse reaction to COVID shot, fever, Panic Disorder-- ER. Medical Center Discharge summary diagnosis: Adverse reaction to the vaccine, acute anxiety. Reportable patient symptoms at, 1st visit : fever, shaking stomach cramps, breathing issues. Medical Center -- No fever, confusion and dementia type, patient would not stay in patient bed; patient would get up and sit down again repeatedly, agitated and anxious. Attempted to urinated hospital bed. Patient committed suicide in home.	Pneumonia 12/20 not Covid19 related

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PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">959929-1</a>	"Narrative: Patient seen in ED 1-17-21 with c/c of ""bloating with epigastric pain"". Patient with complicated medical history including stage 1B pancreatic cancer (was currently on chemotherapy mFOLFIRINOX), and a leadless permanent pacemaker implantation on 1-11-21 for long episodes of SR with complete heart block following symptoms of syncope (other cardiac history: CAD s/p CABG 2009, PAF, and HTN). Regarding ER visit for epigastric pain, nothing notable was found on workup and patient was to discharge home to rest. There were available doses of COVID-19 Vaccine following a vaccine clinic that same day, and patient was offered and agreed to a dose of vaccine. Patient was monitored for 15 minutes post vaccine with no notable issues. The following day, Monday 1-18-21, patient's caregiver called facility at 22:30 to report he had a fever of 102.8 degrees and that he had been ""feeling kind of bad all day"". Patient was advise to seek urgent medical care and reported back to ED on 1-19-21 at 00:55. Patient was admitted for SIRS (tachycardia and febrile) -- patient also reported diffuse myalgia. WBC WNL, CXR unremarkable for infection, UA neg for bacteria, LFTs WNL, blood cultures negative. Procalcitonin elevated at 17.8 -- suggesting inflammatory response. Patient initially reported feeling better on the morning of 1-19-21, but around 13:00 began rapidly declining (confusion, unable to walk) and started experiencing EKG changes (9 beats of SVT). Patient then coded and resuscitation was attempted for approximately 30 minutes. Patient did not survive the code. Coroner has been notified and family is considering autopsy at time of this report."	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">963057-1</a>	presented to ED 1/9/21 with abdominal pain, progressive worsening weakness and fatigue and new onset A fib with RVR likely due to hypertensive urgency . Patient progressed clinically with severe hypoxia and transferred to ICU and started on BiPAP; progressive decline with decreased urinary output with uremia likely secondary to sepsis. Concern with patient worsening clinical decline, palliative care had been consulted on end of life care. Patient expired 1/17/21	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">964653-1</a>	loss of consciousness; respiratory distress Narrative: Patient tolerated his 1st dose of the COVID-19 vaccine well, on 12/16/2020, and received his 2nd dose on 1/6/2021. Patient had some mild clinical decline the past few days prior to 2nd vaccination, with a decreased appetite and some increased fatigue per nursing report, but no significant changes. He experienced nausea on the evening of 1/6/21, which was effectively managed, but by early morning he spiked a fever of 102.9 with a sat of 86.1%. He continued to deteriorate from that point on and died 1/7/21 @13:20. Clinically, the presentation was most consistent with an aspiration pneumonia.	No current illness for this event.

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PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">966856-1</a>	Patient is a 90-year-old female. She is a nursing home resident with and ongoing COVID 19 outbreak occurring . She has been diagnosed with corona virus on 1/4/21. She apparently has not eaten or drank anything in about a week. She was being hydrated at the nursing home with normal saline, but has failed to improve. She was sent to the ER and was admitted on 1/8/21 to hospital At no time during the hospital stay has she been more than minimal responsive. She need O2 for Comfort but on CXR and CT cardiopulmonary imagining was clear. Discharge note stated that he was requiring supplemental oxygen, but her chest x-ray on admission actually showed no acute cardiopulmonary disease. She was diagnosed with COVID-19 on 1/4/21. Most likely, this disease set her level of function back to the point that she was no longer eating and drinking, and she just overall rapidly declined after that. There was no evidence of an actual COVID pneumonia or pneumonitis. On 1/12/2021 family made patient a DNR and IVF were stopped and switched to comforted care. Patient expired 1/13/21	unk
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">967749-1</a>	Cardiac Arrest Narrative:	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">968846-1</a>	Within 15 minutes of the injection, the individual became aphasia and stroke like symptoms. She was taken to the ER where she was later diagnosed with a cerebral hemorrhage and passed away.	None
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">969488-1</a>	Fatigue, muscle aches, vomiting, hematoma	Covid 19
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">970139-1</a>	arrested/heart was at a standstill; brief seizure; Last blood glucose was 167; feeling poorly; This is a spontaneous report from a contactable pharmacist. A 66-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot number: EL1283), intramuscularly in the left arm, on 15Jan2021 at 14:00 (at the age of 66-years-old) at a single dose for COVID-19 immunization. Medical history included congestive heart failure presented with unresponsiveness, coronary artery disease, dyslipidemia, hypertension, non-ongoing stroke (no residuals) in 2001, thyroid disorder, walnuts allergies, stenting to left anterior descending artery (LAD) and right coronary artery (RCA), wheezing, chest pain, and erectile dysfunction. Prior to the vaccination, the patient was not diagnosed with COVID-19. Concomitant medication, taken within two weeks of vaccination, included salbutamol (PROVENTIL) taken for wheezing, salbutamol (VENTOLIN) taken for wheezing, acetylsalicylic acid (ASPIRIN 81), colecalciferol (reported as Vitamin D3; MANUFACTURER UNKNOWN), furosemide (LASIX) taken for weight gain, glyceryl trinitrate (reported as: nitroglycerin; NITROSTAT) taken for chest pain, hydrochlorothiazide (HYDRODIURIL), levothyroxine sodium (SYNTHROID), levothyroxine sodium (LEVOTHROID), metoprolol succinate (TOPROL XL), montelukast sodium (SINGULAIR), prasugrel hydrochloride (EFFIENT), rosuvastatin calcium (CRESTOR), sildenafil (VIAGRA) taken for erectile dysfunction, spironolactone (ALDACTONE), and testosterone (ANDROGEL). It was unknown if patient received other vaccines within four weeks of vaccination. The patient experienced feeling poorly on 15Jan2021 at 14:50 and patient arrested/heart was at a standstill, brief seizure, and last blood glucose was 167 on 15Jan2021 at 15:15. The patient expired on 15Jan2021 at 15:15. The clinical course was reported as follows: The patient received the vaccine on 15Jan2021 around 14:00 and started feeling poorly around 14:50. The patient arrested after a brief seizure. Cardiopulmonary resuscitation (CPR) was initiated by his wife. Emergency medical	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
					service (EMS) arrived around 15:21 and initiated advanced cardiovascular life support (ACLS). CPR was continued upon arrival. A bedside ultrasound was performed and revealed his heart was at a standstill on 15Jan2021 and last blood glucose was 167 on 15Jan2021. Therapeutic measures were taken as a result of the events as aforementioned. The clinical outcome of expired and arrested/heart was at a standstill was fatal and of feeling poorly, brief seizure, and last blood glucose was 167 was not recovered. The patient died on 15Jan2021. The cause of death was assessed as arrested/heart was at a standstill. It was not reported if an autopsy was performed. It was also reported that since the vaccination, the patient had not been tested for COVID-19.; Sender's Comments: The 66-year-old male patient had medical history included congestive heart failure presented with unresponsiveness, coronary artery disease, dyslipidemia, hypertension, stroke, thyroid disorder, stenting to left anterior descending artery (LAD) and right coronary artery (RCA), wheezing, chest pain. The reported fatal event cardiac arrest was most likely due to concurrent cardiac diseases, and unlikely causally related to the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE). The case will be reassessed should additional information become available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: arrested/heart was at a standstill	
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">971969-1</a>	brought by EMS to ED; seizures at home in bed; 6 Epi and 1 bicarb; no hx of seizure	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">972392-1</a>	Patient sent to hospital 1/2 and 1/5. Returned both times to nursing home covid unit without a hospital admission. Resident had been diagnosed with COVID later in the day on 12/30, when routine testing PCR results returned to facility, after resident had already had her first covid vaccination on 12/30/20 in the morning. Resident continued decline, was again sent to hospital on 1/24/21, and expired in hospital 1/25/21.	Left femur fx 12-7-20 UTI 12-7-20
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">975184-1</a>	The patient had a heart attack and died at a local hospital morning of 1/19/2021.	none
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">975952-1</a>	Narrative:	No current illness for this event.
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">978199-1</a>	Arm hurting used his oxygen at time of bed appeared vomited.	Heart disease
PFIZER\BIONTECH	Emergency Room *	Jan., 2021	65+ years	<a href="#">979837-1</a>	Per EMS, the patient was last seen walking and talking to wife 10 minutes prior to EMS arrival. EMS reports via patients wife, that patient was upstairs to change for his doctor appointment then patient's wife found him down. The patient received his COVID-19 vaccine on 1/25/21. EMS states they gave 5 rounds of EPI then patient moved into vfib then was shocked once but returned to asystole. In ED, the patient initially in asystole CPR was started immediately. The patient was given 3 rounds EPI, 1 round bicarb. The patient stayed in PEA throughout. Patient was given tPA. Patient continued to be in asystole and time of death was called at 11:35 am.	History of benign prostatic hyperplasia, hypertension, urinary tract infection, cerebrovascular accident. 1/25/21 Brought to Hospital ED by EMS from Health District for near syncope and hypotension post Pfizer vaccine administration. 1/27/21 Brought to Hospital ED by EMS from home after wife found.



Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Office Visit *	Dec., 2020	60-64 years	<a href="#">964629-1</a>	Death - Hospice patient with metastatic CA admitted to facility and received vaccine during stay. No adverse sequelae noted from vaccine administration, but reporting as required because pt died 7 days later. Narrative: Reporting this event because patient died 7 days after receiving vaccine in the facility where he was in hospice care for metastatic cancer. Vaccine was administered by protocol without complications. The patient had been asked and denied any prior severe reaction to this vaccine or its components and gave permission to receive it. No vaccine adverse sequelae were documented after the immunization as monitored for 15 minutes nor in facility notes for 7 days after the immunization. The patient's death was felt to be due to underlying terminal illness.	No current illness for this event.
PFIZER\BIONTECH	Office Visit *	Dec., 2020	65+ years	<a href="#">964636-1</a>	Pt on hospice in facility for severe cardiomyopathy unable to perform interventions received vaccine without adverse sequelae died 5 days later. Reporting as required. Narrative: Reporting as required patient death 5 days after immunization with Pfizer vaccine. However, no adverse sequelae were noted to the vaccine in the 15minute observation period, nor in the days following the immunization related to the vaccine. The patient denied any prior severe reaction to this vaccine or its components, and the patient gave verbal consent to receive the vaccine. Patient had been in the facility on hospice since 11/18/20 for severe decompensated HF and newly diagnosed cardiomyopathy, unable to perform interventions, also LE ischemic wounds with very poor potential to heal due to advanced PVD.	No current illness for this event.
PFIZER\BIONTECH	Office Visit *	Dec., 2020	65+ years	<a href="#">973808-1</a>	"shortness of breath, chest xray with pulmonary edema, periorbital edema Narrative: 73 yo M w/ PMH HTN, HLD, EVAR (2013) for AAA c/b persistent type II endoleak s/p multiple repairs (2015 & 2017) c/b glue embolization down into the R CIA secured with additional stent placement with the R iliac limb, s/p b/l Iliac artery aneurysm stent 08/31/20, and PTSD. Former smoker, quit 12+ yrs ago. 11/1/20-11/6/20: Hospitalized for acute on chronic back pain, found to multiple hypermetabolic lesions in the axial skeleton. Diagnosed with epithelioid angiosarcoma. Patient discharged to facility. 12/17/20: Patient received his 1st COVID-19 vaccine w/o complications at facility. 12/21/20: Underwent cyberknife treatment. 12/31/20: Transferred from facility to ER for new O2 requirement, SOB, cough, chest X ray / pulm edema, tachycardic and new periorbital edema. 12/31/20: Admitted to ICU before transfer to acute care. 1/1/21: Pulmonary consult, ""Labs are notable for progressive left shift with bandemia, markedly elevated inflammatory markers (D-dimer, ESR, CRP, ferritin, LDH), mild elevation in procalcitonin, mild elevation in lactate that has improved, and negative viral panel including COVID-19 x2. CT chest is notable for b/l GGOs along with some interstitial infiltrates with an upper and particularly mid zone and perihilar predominance, septal thickening and crazy paving, and numerous cystic lesions or pneumatocoles. There is a lack of lobar consolidation and pulmonary nodules. Of note, PET/CT about 2 months ago only demonstrated some mild to moderate emphysema mostly in the upper lobes. Therefore, there has been a relatively dramatic change in a few months, suggesting a more subacute process, rather than an acute infectious process such as a viral pneumonia, including COVID-19 infection, in which the GGOs tend to be subpleural and peripheral. Overall, our suspicion for COVID-19 is relatively low, with negative testing x2 yesterday, negative testing a few weeks ago, and lack of sick contacts, but it is possible. Therefore, higher on the differential is a more subacute infection or chemotherapy-induced pneumonitis. Risk factors include malignancy	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
					<p>pneumonitis. Risk factors include malignancy, chemotherapy, and use of steroids (equivalence of about 27 mg of Prednisone in the form of Dexamethasone since 11/6/20 without PJP prophylaxis). These risk factors, along with consistent imaging and elevated LDH, make PJP quite likely. Fungal infection is less likely based on imaging. Chemotherapy-induced pneumonitis is a possibility, especially given the more subacute picture based on imaging. Both Gemcitabine and Docetaxel can cause pneumonitis. However, the patient has been on steroids, which is used to treat drug-induced pneumonitis, although this does not exclude it completely." 1/2/21: Transferred to ICU for worsening hypoxemia as patient reached 40L/100% FIO2 and remained on COVID isolation/COVID patient under investigation per ID recommendation. 1/4/21: Isolation precautions discontinued due to lower suspicion for active COVID infection to explain current presentation 1/6/21: Went into atrial fibrillation w/o RVR overnight 1/6. Tolerating, with MAPs in low 60s and HR in high 90s/low 100s. Suspect due to being-1L yesterday from diuresis, lasix stopped. S/p amiodarone bolus + drip, albumin 5% bolus 1/5/21: Macrocytic anemia NOS w/ slowly worsening H/H s/p PRBC x 1 unit 1/7/21: Per ICU Life-sustaining treatment note, "Following discussion w/ patient that his lung dx has been refractory to txt and hasn't improved despite maximal therapy, patient agreed to transition to hospice after he settles affairs. " 1/7/21 Infectious Disease note: "This is an immunocompromised host due to cancer on active chemotherapy (albeit ANC&gt;4000 on admission) and notably had been on daily PO dexamethasone 1 mg TID (total daily dose 3 mg, equivalent to 20 mg PO prednisone) since 11/6/20 without any PJP ppx. There was elevated c/f COVID-19 infection in setting of patient's presenting symptoms, especially in conjunction with b/l GGOs on imaging. Has undergone multiple COVID test that have all resulted negative. Discussed radiographic findings with radiology colleagues, and overall, it is difficult to definitively narrow the differential with imaging alone, but overall density of GGOs seem to appear less likely PJP and more in line with chemical pneumonitis vs COVID, although less typical for viral pneumonia as well. Given false-negative COVID tests are not unheard of, especially in the immunocompromised population, patient was kept on isolation precautions as a PUI for abundance of caution. He is now off precautions. In setting of patient having been on prednisone for some time without PJP ppx, he was also started on treatment dose TMP/SMX. Beta-d-glucan has returned positive, and although not the ideal test for PJP, this can certainly support a potential dx of PJP. Unfortunately, DFA from sputum was not performed due to insufficient sample and currently the patient is unable to produce an additional sample for testing. He is tolerating the high-dose TMP/SMX; we adjusted the dose to three SS tablets TID based on his somewhat declining UOP. Other fungal etiologies are pending work-up as well. Lastly, patient's chemotherapy is known to cause pneumonitis, but per pulmonology team, he receives prophylactic dexamethasone with his chemo cycles that should help to prevent drug-induced pneumonitis. Remains on the differential for now and this should also be concurrently treated with the steroids he is receiving." 1/10/21: Comfort care initiated. All non-comfort measures were discontinued. Time of death: Jan 10,2021@14:56; immediate cause of death per death note is "hypoxic respiratory failure""</p>	

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">936738-1</a>	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.	No current illness for this event.
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">945247-1</a>	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	Nothing acute prior
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">959929-1</a>	"Narrative: Patient seen in ED 1-17-21 with c/c of ""bloated with epigastric pain"". Patient with complicated medical history including stage 1B pancreatic cancer (was currently on chemotherapy mFOLFIRINOX), and a leadless permanent pacemaker implantation on 1-11-21 for long episodes of SR with complete heart block following symptoms of syncope (other cardiac history: CAD s/p CABG 2009, PAF, and HTN). Regarding ER visit for epigastric pain, nothing notable was found on workup and patient was to discharge home to rest. There were available doses of COVID-19 Vaccine following a vaccine clinic that same day, and patient was offered and agreed to a dose of vaccine. Patient was monitored for 15 minutes post vaccine with no notable issues. The following day, Monday 1-18-21, patient's caregiver called facility at 22:30 to report he had a fever of 102.8 degrees and that he had been ""feeling kind of bad all day"". Patient was advise to seek urgent medical care and reported back to ED on 1-19-21 at 00:55. Patient wasd admitted for SIRS (tachycardia and febrile) -- patient also reported diffuse myalgia. WBC WNL, CXR unremarkable for infection, UA neg for bacteria, LFTs WNL, blood cultures negative. Procalcitonin elevated at 17.8 -- suggesting inflammatory response. Patient initially reported feeling better on the morning of 1-19-21, but around 13:00 began rapidly declining (confusion, unable to walk) and started experiencing EKG changes (9 beats of SVT). Patient then coded and resuscitation was attempted for approximately 30 minutes. Patient did not survive the code. Coroner has been notified and family is considering autopsy at time of this report."	No current illness for this event.
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">964653-1</a>	loss of consciousness; respiratory distress Narrative: Patient tolerated his 1st dose of the COVID-19 vaccine well, on 12/16/2020, and received his 2nd dose on 1/6/2021. Patient had some mild clinical decline the past few days prior to 2nd vaccination, with a decreased appetite and some increased fatigue per nursing report, but no significant changes. He experienced nausea on the evening of 1/6/21, which was effectively managed, but by early morning he spiked a fever of 102.9 with a sat of 86.1%. He continued to deteriorate from that point on and died 1/7/21 @13:20. Clinically, the presentation was most consistent with an aspiration pneumonia.	No current illness for this event.
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">967749-1</a>	Cardiac Arrest Narrative:	No current illness for this event.

Vaccine Manufacturer	Event Category	Month of Onset	Age	VAERS ID	Adverse Event Description	Current Illness
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">972392-1</a>	Patient sent to hospital 1/2 and 1/5. Returned both times to nursing home covid unit without a hospital admission. Resident had been diagnosed with COVID later in the day on 12/30, when routine testing PCR results returned to facility, after resident had already had her first covid vaccination on 12/30/20 in the morning. Resident continued decline, was again sent to hospital on 1/24/21, and expired in hospital 1/25/21.	Left femur fx 12-7-20 UTI 12-7-20
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">972836-1</a>	sudden death	no
PFIZER\BIONTECH	Office Visit *	Jan., 2021	65+ years	<a href="#">975952-1</a>	Narrative:	No current illness for this event.
UNKNOWN MANUFACTURER	Death	Jan., 2021	65+ years	<a href="#">956962-1</a>	COVID 19 vaccine, unknown which company Chronically ill in a skilled nursing facility found diaphoretic, hypotensive, hypoxia to 85% arrived to Emergency dept in cardiac arrest Died within 65 minutes of nursing finding patient in distress Wife felt it may have been related to vaccine date of vaccination 1/6/20 hx covid 19 PNA in April 2020	CVA seizure disorder all chronic HTN CAD had COVID 19 in April 2020
UNKNOWN MANUFACTURER	Death	Jan., 2021	65+ years	<a href="#">973957-1</a>	5 days after receiving his COVID vaccination the patient had a spontaneous (nontraumatic) subarachnoid hemorrhage which was fatal. The patient had previously been stable on his coumadin dosing with therapeutic INRs for the past several months per his wife. At time of presentation his blood pressure in the ER was elevated to 223/94 and his INR was risen to 3.1	none
UNKNOWN MANUFACTURER	Emergency Room *	Jan., 2021	65+ years	<a href="#">973957-1</a>	5 days after receiving his COVID vaccination the patient had a spontaneous (nontraumatic) subarachnoid hemorrhage which was fatal. The patient had previously been stable on his coumadin dosing with therapeutic INRs for the past several months per his wife. At time of presentation his blood pressure in the ER was elevated to 223/94 and his INR was risen to 3.1	none

**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).**

**\* These values are only available from VAERS 2.0 Report Form, active 06/30/2017 to present.**

**\*\* These value are only available from VAERS-1 Report Form, active 07/01/1990 to 06/29/2017.**

**Notes:**



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

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

Key considerations and limitations of VAERS data:

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

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

Data contains VAERS reports processed as of 01/29/2021. The VAERS data in WONDER are updated monthly, yet the VAERS system receives continuous updates including revisions and new reports for preceding time periods. [More information. \(/wonder/help/vaers.html#Reporting\)](/wonder/help/vaers.html#Reporting)

Under [Title 21, Code of Federal Regulations Section 600.80 \(/wonder/help/vaers/21CFR600-80.htm\)](/wonder/help/vaers/21CFR600-80.htm), a serious event is defined with any of the following outcomes: Death, a life-threatening adverse experience, inpatient hospitalization or prolongation of existing hospitalization, a persistent or significant disability/incapacity, or a congenital anomaly/birth defect.

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 available 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 \(/wonder/help/vaers.html\)](/wonder/help/vaers.html) for more information.

**Query Date:** Feb 10, 2021 6:58:33 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 - 01/29/2021, CDC WONDER On-line Database. Accessed at <http://wonder.cdc.gov/vaers.html> on Feb 10, 2021 6:58:33 PM

### Query Criteria:

<b>Title:</b>	CoVid19 Vaccination Effects by Month in USA
<b>Date Died:</b>	Jan., 2019 to Jan., 2021
<b>Date of Onset:</b>	Jan., 2019 to Jan., 2021
<b>Date Report Completed:</b>	Jan., 2019 to Jan., 2021
<b>Date Report Received:</b>	Jan., 2019 to Jan., 2021
<b>Date Vaccinated:</b>	Jan., 2019 to Jan., 2021
<b>State / Territory:</b>	The United States/Territories/Unknown
<b>Vaccine Products:</b>	COVID19 VACCINE (COVID19)
<b>VAERS ID:</b>	All
<b>Group By:</b>	Vaccine Manufacturer; Event Category; Month of Onset; Age; VAERS ID
<b>Show Totals:</b>	False
<b>Show Zero Values:</b>	Disabled