



- **Serious AEFI** is defined as an event that is causing a potential risk to the health/life of a recipient leading to hospitalization, disability/incapacity, congenital abnormalities/birth defects or death.
- **Minor AEFI** is an event that is not “serious” and does not pose a potential risk to the health of the recipient. Cluster of minor AEFIs should be investigated for causality assessment. A **cluster** of AEFI is defined as two or more cases of the same or similar events related in time, geography, and/ or vaccine administered. *(For Serious AEFI and Cluster of Minor AEFIs, a PIDSr AEFI Case Investigation Form and Guide Questions on Investigation should also be filled-out.)*

LIST OF REPORTABLE SERIOUS AEFIs

Reportable Serious AEFI	Onset time interval*
<ul style="list-style-type: none"> Anaphylactoid reaction (acute hypersensitivity reaction) Anaphylaxis Persistent (more than 3 hours) inconsolable screaming HHE Toxic shock syndrome (TSS) 	Within 24 to 48 hours of immunization
<ul style="list-style-type: none"> Severe local reaction Sepsis Injection site abscess (bacterial/sterile) 	Within seven days of immunization
<ul style="list-style-type: none"> Seizures, including febrile seizures (6-12 days for measles/MMR; 0-2 days for DTP) Encephalopathy (6-12 days for measles/MMR; 0-2 days for DTP) 	Within 14 days of immunization
<ul style="list-style-type: none"> Acute flaccid paralysis (4-30 days for OPV recipient; 4-75 days for contact) Brachial neuritis (2-28 days after tetanus containing vaccine) Intussusception (commonly within 21 days after rota vaccines) Thrombocytopenia (15-35 days after measles/MMR) 	Within 3 months of immunization
<ul style="list-style-type: none"> Lymphadenitis Disseminated BCG infection Osteitis/Osteomyelitis 	Between 1 and 12 months after BCG immunization
<ul style="list-style-type: none"> Death Hospitalization Disability Any other severe and unusual events that are thought by health workers or the public to be related to immunization 	No time limit
<p>*Onset time interval information it is recommended to refer to the Brighton Collaboration case definitions (www.brightoncollaboration.org) and WHO position papers and observed rates information sheets (available at http://www.who.int/vaccine_safety/initiative/tools/vaccinfosheets/en/index.html).</p>	